The University of Iowa prohibits discrimination in employment, educational programs, and activities on the basis of race, creed, color, religion, national origin, age, sex, pregnancy, disability, genetic information, status as a U.S. veteran, service in the U.S. military, sexual orientation, gender identity, associational preference, or any other classification that deprives the person of consideration as an individual. The University also affirms its commitment to providing equal opportunities and equal access to university facilities. For additional information on nondiscrimination policies, contact the Director, Office of Equal Opportunity and Diversity, the University of Iowa, 202 Jessup Hall, Iowa City, IA, 52242-1316, 319-335-0705 (voice), 319-335-0697 (TDD), diversity@uiowa.edu.
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DEPARTMENT DESCRIPTION
The Department of Physical Therapy and Rehabilitation Science is located within the medical education complex of The University of Iowa. Post-baccalaureate graduate study toward a clinical entry-level doctor of physical therapy (DPT; two and one-half years; 104 total semester hours); the master of arts in Physical Therapy (M.A.); and the doctor of philosophy in Physical Rehabilitation Science (PhD; approximately four years; minimum of 72 semester hours beyond the baccalaureate degree including 12 semester hours of dissertation research) are available.

MISSION STATEMENT
The mission of the Department of Physical Therapy and Rehabilitation Science is to advance the health of humankind by: 1) excellence in education, 2) discovering new knowledge, and 3) developing leaders in healthcare and science.

VISION STATEMENT
The vision of the Department of Physical Therapy and Rehabilitation Science is to be the recognized leader in clinical practice, research, and education.

STATEMENT OF PHILOSOPHY
The Department of Physical Therapy & Rehabilitation Science strives for excellence in clinical practice, research, teaching, and service within the rehabilitation community and the profession of physical therapy. The faculty supports that only highly qualified and motivated individuals will be admitted to nurture and grow into future leaders within the physical therapy and rehabilitation science professions. The faculty believes that learning is a sequential, integrated, and life-long process and that learning is more than merely rehearsing and feeding back information. Instead, the faculty supports educational methods that strive to teach core concepts to enhance students’ abilities to logically solve unique clinical and research problems. Hence, high level critical thinking is emphasized throughout the curriculum by examining the contemporary scientific evidence from which clinical practice, rehabilitation research, and health care policy is based. The faculty supports and facilitates the students to become strong role models and leaders within their respective professional organizations. Indeed, promoting positive attitudes, personal values, and high ethical standards in clinical practice and research are integral parts of the Department’s philosophy.

The faculty believes that the strength of a physical therapy and rehabilitation science department lies within the faculty, environment, and institution’s administrative support. Accordingly, only the most highly qualified clinicians and scientists, with recognized scholarship, should become the educational leaders within our institution and the nation. The “melting pot” of faculty and students in our multi-level educational programs (DPT, PhD) provides a unique and an important educational experience for our students. The faculty supports that interaction among expert clinicians, clinical researchers, and basic scientists is critical to delivering a high level education. The diversity of patients that participate in the educational and research programs is essential to developing the most highly qualified health care practitioners and scientists. Therefore, the faculty supports that close alignment between the educational program and one or more major medical centers is necessary to train highly qualified leaders in the rehabilitation community. The excellent infrastructure (teaching and research facilities) and administrative support within the College of Medicine is critical to delivering outstanding clinicians, faculty, and scientists to the state of Iowa as well as to the national and international rehabilitation community. Frequent and clear communication about the Department’s high expectations among the faculty, staff and students is the unifying thread that enables a multifaceted department to be most successful. The graduates will confirm the Department’s commitment to excellence by their outstanding contributions to healthcare and research in the state of Iowa and throughout the world.
DEPARTMENT GOALS
The Department, faculty, and staff are committed to the following goals:
1. Enhance the quality of the education program.
2. Continue to demonstrate a viable, creative, and productive physical therapy effort which is respected by and competitively comparable to other health professionals.
3. Prepare physical therapy practitioners, teachers, and researchers.
4. Effectively integrate within the educational program relevant elements of clinical practice, teaching, and research for different levels of training.
5. Expand and solidify relationships with other disciplines, agencies, and facilities while striving to increase the independent and interdependent status of physical therapy.
6. Enrich physical therapy with meaningful and constructive attitudes, empathy, and values.
7. Provide services which meet the needs of the patient, profession, and community.
8. Provide clinical, didactic and physical resources, and secure adequate finances to accomplish these goals.
9. Convey the accomplishments of the Department of Physical Therapy and Rehabilitation Sciences at The University of Iowa to internal and external groups/agencies/ institutions/interested parties.

GENERAL INFORMATION
- **Class Registration** – Students will register for classes via the web on the UI’s ISIS system. Go to [http://www.isis.uiowa.edu](http://www.isis.uiowa.edu). ISIS is where students access registration, student records, course schedules, financial aid information, etc. Students log in using their HawkID and password.
- **ICON (Iowa Courses Online)** – ICON is the course management system at the University of Iowa that most courses in the program use. Students can log in to ICON at [https://icon.uiowa.edu/](https://icon.uiowa.edu/). Students log in using their HawkID and password.
- **Faculty Advisor** – A faculty advisor is assigned to each student upon admission. Students are to communicate with them any questions or concerns they have.
- **Mailboxes** – Student mailboxes are located in 1-276 MEB and Faculty mailboxes in 1-250 MEB.
- **Phones** – Use of cell phones is prohibited during class time. Please turn the ringer off your phone before lecture or lab. You may give the department’s main phone number (319-335-9791) for emergency purposes and a staff member will find you. Local phone calls may be made via the phones in the Alumni Study/Lounge (1-140 MEB). Push “9” to get an outside line.
- **Facilities** – Be proud of our facilities. All equipment, materials, etc., should be in place at the end of each class.
- **Video/Audio Taping** – Students must obtain the consent of the instructor before video/audiotaping lectures or laboratory sessions.
- **Electronic Communication** – University policy specifies that students are responsible for all official correspondences sent to their University of Iowa email address (@uiowa.edu). Faculty and students should use this account for correspondences.
- **Electronic Technologies in the Classroom** – Computers, laptops, mobile devices such as phones and media players are to be used for learning exercises. Professional behavior is expected. Disruption of the classroom learning experience will not be tolerated.
- **Accommodations for Disabilities** – A student seeking academic accommodations should first register with Student Disability Services and then meet privately with the course instructor(s) to make particular arrangements. See [www.uiowa.edu/~sds/](http://www.uiowa.edu/~sds/) for more information.
- **Meeting Course Standards** – Any student who experiences difficulty or anticipates possible difficulty in successfully meeting the course standards is encouraged to speak with the course coordinator as soon as the difficulty is suspected. Academic assistance is available through a variety of University resources such as the Tutor Referral Service ([http://tutor.uiowa.edu](http://tutor.uiowa.edu)) and the Writing Center ([http://www.uiowa.edu/~writingc/](http://www.uiowa.edu/~writingc/)). See these web pages for details. In addition, physical or mental health concerns can be addressed at Student Health ([http://studenthealth.uiowa.edu](http://studenthealth.uiowa.edu)), the University Counseling Service ([http://counseling.studentlife.uiowa.edu](http://counseling.studentlife.uiowa.edu)) or the Medical Student Counseling Service ([http://www.medicine.uiowa.edu/md/counseling/](http://www.medicine.uiowa.edu/md/counseling/)).
Making a Suggestion or Complaint – Students with a suggestion or complaint should first visit the instructor. If you remain unsatisfied you may contact the DEO of Department (Richard Shields; 319-335-9791; richard-shields@uiowa.edu). If your concerns have still not been resolved at that point, you may submit a written complaint to the Graduate College, 205 Gilmore Hall. Complaints must be made within six months of the incident. These rules and regulations are available on the Graduate College website at http://www.grad.uiowa.edu/graduate-college-manual.

Understanding Sexual Harassment – Sexual harassment subverts the mission of the University and threatens the well-being of students, faculty, and staff. All members of the UI community have a responsibility to uphold this mission and to contribute to a safe environment that enhances learning. Incidents of sexual harassment should be reported immediately. Go the following website for assistance, definitions, and the full University policy: http://www.sexualharassment.uiowa.edu/.

Reacting Safely to Severe Weather – In severe weather, class members should seek appropriate shelter immediately, leaving the classroom if necessary. The class will continue if possible when the event is over. For more information on Hawk Alert and the siren warning system, visit the Public Safety website: http://police.uiowa.edu/.

BUILDING ACCESS, KEY AND SECURITY PLAN
The Department of Physical Therapy and Rehabilitation Science main office area and teaching clinics are unlocked Monday-Friday 7:30 AM to 5:00 PM (except for University holidays). To gain access early mornings, evenings, weekends, or holidays, you will need to use the card swipes with your ID card. Card swipes for the Medical Education Building (MEB) are located at the south main entrance door, the north side of MEB by the loading dock, and at the exterior entrance to the Alumni Study/Lounge at the south side of MEB (down the stairs). Interior card swipes are at the main Department entrance and the entrance to the Student Study/Lounge. For security and safety reasons, please do not prop doors open. Unknown persons seeking admittance to student areas should be directed to the receptionist who will verify the identity of the person and the need for admittance. Any unknown person discovered within these rooms or loitering in the hallways outside these rooms should be reported to the Department receptionist during normal working hours or campus security at other times. All rooms should be locked at any time they are unoccupied. The last person to leave an area is responsible for closing and latching the windows, turning off the lights, and locking the door. As a courtesy, it is a good practice to inform a colleague that you are leaving and that he or she is the last person in the room. All PhD students will be issued keys to provide access to their individual offices and lab areas based on assignments. DPT students will need access to individual faculty research laboratories while participating in the student research projects. One person from each student group will be designated the key holder for the group and will be issued an entry key. Keys issued in this manner will be for the period of the project. Doors to these rooms should not be propped open. Keys are the property of the University of Iowa and should be safe guarded. Keys should not be loaned. Keys are checked out through the Department’s Administrative Manager and problems or concerns associated with this plan should be directed to her.

PROTOCOL FOR HANDLING EMERGENCIES
Dial 911 if there is any threat to life or a situation that requires an immediate response from police, fire, or emergency medical services. You cannot send a text message to 911.

When reporting an emergency:
• Stay calm
• If you hear a busy signal continue to dial 911 until you get through
• Answer all questions asked of you some of which may be
  o Provide your location as specifically as possible (Street Address, Building Name, Floor, Room Number)
  o Provide your telephone number in case it is necessary to contact you again
  o Provide a thorough description of the incident to assure appropriate resources are assigned
The following numbers are provided for non-emergency situations. Use of these numbers will still provide a response from the appropriate agency and keep 911 lines free for actual emergencies.

- University of Iowa Police 319-335-5022
- Facility Management (Work Control) 319-335-5071
- Information Technology 319-384-4357
- Environmental Health and Safety 319-335-8501

DEPARTMENT COMPUTERS
Students are to use the computers in the Alumni Student Study/Lounge and are to be considerate when using these computers. Students are not to use classroom computers. These are for instructional use only. Computer software installed on departmental student workstations is licensed for use only on the computer in which it is installed. Students may not copy and install licensed software on another computer. No software other than department-supplied software is to be installed. User files are to be stored on PhD student accounts (H-drive), laboratory accounts (if research related and approved by the student advisor) or student-owned and supplied memory sticks, flash drives, CDs or DVDs. No files may be stored on the hard drives. Any unauthorized files will be erased.

FERPA AND ACCESS TO ACADEMIC FILES
The Family Educational Rights and Privacy Act (FERPA), a federal law, affords students certain rights with respect to their educational records. In short, no one may access a student’s academic file without the student’s consent except school officials who have a legitimate educational interest in the information. For further information regarding a student’s rights under FERPA, restriction or release of directory information, etc., see the University’s Student Records Policy: [http://dos.uiowa.edu/policies/student-records-policy/](http://dos.uiowa.edu/policies/student-records-policy/)

CONFIDENTIALITY
Students in the Department of Physical Therapy and Rehabilitation Science are required to respect the rights of patients and research subjects including the right to confidentiality and shall safeguard patient confidences within the constraints of the law.

PLAGIARISM AND CHEATING
Academic fraud, dishonesty, and cheating are considered serious academic misconduct. All students suffer when academic misconduct takes place. Academic fraud, dishonesty, and cheating disturb the mutual respect that should exist between instructors and students and between students, and can poison the atmosphere of a classroom. Perhaps most seriously, those who commit academic fraud, dishonesty, or cheating are robbed of the educational experiences that are the primary purpose of coursework. Instructors are expected to help students understand and avoid all academic fraud.

Students unclear about the proper use and citation of sources, or the details and guidelines for any assignment, should discuss the assignment and questions promptly with the instructor. All forms of plagiarism and any other activities that result in a student presenting work that is not really their own are considered academic fraud.

Academic fraud includes these and other misrepresentations:
- Presentation of ideas from sources that a student does not credit
- Use of direct quotations without quotation marks and without credit to the source
- Paraphrasing information and ideas from sources without credit to the source
- Failure to provide adequate citations for material obtained through electronic research
- Downloading and submitting work from electronic databases without citation
- Participation in a group project which presents plagiarized materials
- Taking credit as part of a group without participating as required in the work of the group
- Submitting material created/written by someone else as one’s own, including purchased papers
Cheating on examinations and other work interferes with a student’s education as well as the education of others in the class. If guidelines for any testing situation or assignment are unclear, discuss the matter promptly with the instructor. Academic cheating includes all of the following, and any other activities that give a student an unfair advantage in course work:

- Copying from someone else’s exam, homework or laboratory work
- Allowing someone to copy or submit your work as his/her own
- Accepting credit for a group project without doing your share
- Submitting the same paper in more than one course without the knowledge and approval of the instructors involved
- Using notes, pre-programmed formulae in calculators, or other materials during a test or exam without authorization
- Not following the guidelines specified by the instructor for a “take home” test or exam


**FORGERY**

The Code of Student Life prohibits forgery of University records, documents, or student identification cards. Professional staff members at CLAS Academic Programs & Services interview students suspected of forgery and take disciplinary action based on the interview and verification provided by the advisor, instructor, or dean whose signature is in doubt.

**Disciplinary Action**

1. By the Instructor. The individual instructor may reduce the student’s grade, including the assignment of the grade of “F” in the course. A report of this action is sent to the dean’s office.

2. By the Dean. The dean of the college or a student-faculty committee appointed by him or her may impose the following or other penalties as the offense may warrant; disciplinary probation, assessment of additional hours for the degree, suspension from the college, or recommendation of expulsion from the University by the president.

**POLICIES AND REGULATIONS AFFECTING STUDENTS**

The Policies and Regulations Affecting Students are available on the University of Iowa website: [http://dos.uiowa.edu/policies/](http://dos.uiowa.edu/policies/). You may also contact the Dean of Students with policy questions at 319-335-1162 or email dos@uiowa.edu.

University of Iowa students are responsible for knowing and abiding by the rules and regulations set forth in the current version of the Policies and Regulations Affecting Students available from the above website or the Office of the Dean of Students. Students should also be aware of the Board of Regents Uniform Rules of Personal Conduct in the Iowa Administrative Code Section 681 Part 9. The Code of Student Life and the Student Judicial Procedure are also available at the above website.

Your advisor is also a good person to consult for help with any academic issues. The University of Iowa also has an Ombudsperson. The Office of the Ombudsperson provides informal conflict resolution to help students, staff and faculty deal with questions or problems. The office is confidential, neutral, informal, and independent. They can help visitors figure out their options, provide information on policies and procedures, refer to other resources when necessary, contact the other people involved to gather more information, and help to work out solutions through negotiation, mediation, or facilitated discussions. For more information about the Office of the Ombudsperson, visit their website at [http://www.uiowa.edu/~ombud/](http://www.uiowa.edu/~ombud/), or contact them by phone 319-335-3608, email ombudsperson@uiowa.edu, or visit in person at C108 Seashore Hall. Individuals in a supervisory role are required to report incidents of sexual harassment of which they become aware. If an individual comes to a faculty member regarding such an incident, the faculty member must
inform the student that they are required to report the incident and that if they want the information to be confidential, they must go to a confidential resource such as the Ombudsperson, Women’s Resource and Action Center, Rape Victim Advocacy Program, Faculty and Staff Services, or University Counseling Service.

Other offices particularly helpful to students are:

- University of Iowa Police: Non-emergency number 319-335-5022; http://police.uiowa.edu/
- Rape Victim Advocacy Program: 24-hour Rape Crisis Line 319-335-6000; http://www.uiowa.edu/~rvap/
- Johnson County Crisis Center: 24-hour hotline 319-351-0140; http://jccrisiscenter.org/
- 24-Hour Nurseline: UI Health Care 319-384-8442
- Emergency Treatment Center: UI Health Care 319-356-2233
- Poison Control Center: 1-800-222-1222
- National Suicide Prevention 24-Hour Lifeline: 1-800-273-8255
- Student Health Services: 319-335-8394; http://studenthealth.uiowa.edu/
- University Counseling Service: 319-335-7294; http://counseling.studentlife.uiowa.edu/
- Domestic Violence Intervention Program: 319-351-1043; http://www.dvpiowa.org/
- Student Disability Services: 319-335-1462; TTY 319-335-1498; http://www.uiowa.edu/~sds/
- Student Legal Services: 319-335-3276; http://legal.studentlife.uiowa.edu/imu-uiowa-edulegal/

STUDENT MISTREATMENT

Students at the Carver College of Medicine can excel because the College maintains and expects an academic environment that is free from student mistreatment. A number of reporting and counseling avenues exist at the University of Iowa for students who have been mistreated. In addition to those services, students are encouraged to raise any concerns with the Department’sFaculty, Staff & Student Affairs Committee, either directly to the Committee Chairman (Byron Bork) or through their academic advisor. The College of Medicine’s Medical Education Committee has used AMA guidelines to create the following definition of medical student mistreatment:

On the behavioral level, mistreatment may be operationally defined as behavior by healthcare professionals and students which is exploitive or punishing. For the purposes of this policy, examples of mistreatment include: physical punishment, physical threats, or violence; sexual harassment or sexual assault; discrimination based on race, color, national origin, age, sex, disability, sexual orientation or gender identity; repeated episodes of psychological punishment of a student by a particular superior, such as public humiliation, threats, intimidation, or removal of privileges; grading used to punish a student rather than to evaluate objective performance; assigning tasks for punishment rather than educational purposes; requiring the performance of personal services; taking credit for another individual’s work; intentional neglect or intentional lack of communication.

REPORTING MISTREATMENT

Student mistreatment should be reported as follows:

- **Crimes.** Students who are the victims of misconduct that is also a crime are encouraged to contact the University’s Department of Public Safety (“DPS”). http://police.uiowa.edu/ Students should call 911 in an emergency. The Carver College of Medicine may refer allegations of mistreatment that may constitute criminal behavior to DPS.
- **Violence.** Students are encouraged to report incidents of violence to the College or to the University’s Department of Equal Opportunity and Diversity (“EOD”). http://diversity.uiowa.edu/about/student-resources The Carver College of Medicine may refer allegations of mistreatment that may constitute a violation of the University’s violence policy to EOD for investigation and resolution.
- **Sexual Harassment/Assault.** Students are encouraged to report criminal incidents of sexual harassment or sexual assault to DPS. http://police.uiowa.edu/ Complaints may also be forwarded to the College, to the University’s Department of Equal Opportunity and Diversity (“EOD”) http://diversity.uiowa.edu/about/student-resources, the Office of the Dean of Students
If a student receives a grade of D, F, or U in a course, they will not receive Graduate College credit and will be unable to continue in the program until graduate credit for that course is earned. If a student receives a grade of Incomplete in a course, they may be allowed to continue in the program during remediation. The Incomplete turns into an F if not remediated by the end of the next full semester.

Rules and Regulations of the Department of Physical Therapy & Rehabilitation Science:

The progress of all students will be evaluated by the Graduate Student Review and Promotion Committee following the completion of each academic session. The progress of individual students can be evaluated at any time as deemed necessary by circumstances or by the Chair. The results of these evaluations will be reported to the Chair and the Faculty, Staff, and Student Affairs Committee.

Committee Composition

- Three faculty, one PhD student, one DPT2 student.
- Student members will be recommended by their peers and approved by faculty committee members.
- Student members will serve one-year terms beginning June 1st each year.
- Students are non-voting members.
- Committee members will receive orientation and education regarding committee responsibilities by senior committee members.
Scope of the Committee
The purpose of the Graduate Student Review and Promotions Committee is to ensure that each person who graduates from The University of Iowa Department of Physical Therapy and Rehabilitation Sciences has adequate skills, knowledge, and judgment to assume appropriate professional responsibilities within the physical therapy profession. To perform these duties, the committee will depend upon the cooperation, advice and judgment of faculty, students and administration.

As deemed appropriate, the Graduate Student Review and Promotions Committee may request a meeting with a student in order to explore issues that are impeding their progress and/or their status in the program. The scope of the Review and Promotions Committee includes, but is not limited to, the following:
- Students who fail to receive a grade with Graduate College credit (A thru C- carries Graduate College credit) in courses or clinical internships.
- Unprofessional or unethical behavior such as plagiarism, dishonesty, theft, cheating, violation of patient confidentiality, alcohol or substance abuse-related violations, etc.
- Information obtained from criminal background checks will be assessed by the Chair of the Faculty, Staff, and Student Affairs Committee in concert with the Committee. The Chair will maintain the confidentially of individuals except in cases where the incident is viewed to potentially impact professional behavior, necessitating review by the Graduate Student Review and Promotions Committee.
- Negative comments on clinical education evaluations.
- Persistently poor or marginal academic or clinical performance.
- Requests to extend the period of study beyond the usual time allowed.
- Former students applying for reinstatement to the Department after withdrawal or dismissal.
- Other purposes as determined by the Department Chair in consultation with the Review and Promotions Committee.

Except under extenuating circumstance that are communicated in writing, failure of the student to appear before the committee will be viewed as a negative response by the student when the issue is deliberated by the committee.

 Appearing before the Review and Promotions Committee
- A written request will be provided outlining the purpose for an independent appearance before the Review and Promotions Committee.
- Students are expected to answer questions posed by the Committee members during the interview. In addition, if desired, students may bring a prepared statement to read at the meeting.
- The student may not contact the Review and Promotion Committee members in advance of or following the meeting regarding committee actions or deliberation.
- All deliberations and actions of the committee will be held in the strictest confidence.

Review and Promotion Committee Actions
- Following the interview with the student, Committee members will discuss the student’s situation and faculty members will vote on a recommendation to be sent to the Department Chair. The Committee has the authority to recommend:
  - No action is necessary.
  - Changes in the students’ program of study.
  - A plan of action or recommendation for corrective action on issues of professionalism or behaviors.
  - Dismissal
- When voting on a recommendation, three faculty members must be present at the meeting and a simple majority is required for passing a recommendation.
- Review and Promotion Committee members may recuse themselves from an interview and discussion on a student if they feel there may be a conflict of interest. Faculty members who recuse themselves will temporarily be replaced by faculty members appointed by the Department Chair.

8
- Official paperwork outlining the Committee’s recommendation will be delivered to the Department Chair and the student within 3 working days of the Review and Promotion Committee meeting.

**Department Chair Actions**
- The Department Chair will review the recommendations of the Committee and make a decision on the recommendation within 3 working days of the Review and Promotions Committee meeting and indicate that decision with his signature.
- A student may schedule an appointment with the Chair to discuss the Review and Promotion Committee’s recommendation prior to the Chair’s decision and within the 3 working days referenced above.
- A student wishing to appeal the Chair’s decision must submit a letter to the Chair within 3 working days of receiving notification of that decision, with a copy to the Associate Dean of Academic Affairs of the Graduate College.

**Grievance Procedures:**
In general, the Department adheres to the policies of the current issue of the Manual of Rules and Regulations of the Graduate College as specified in Section IV.E. The manual is available online at: [http://www.grad.uiowa.edu/manual-table-of-contents](http://www.grad.uiowa.edu/manual-table-of-contents)

This manual also states that "If a student judges the dismissal decision improper, the student has a right to review. Each department shall establish procedures for handling such reviews." The following procedures will be followed by the Department of Physical Therapy and Rehabilitation Sciences.

1. The Department Chair will appoint a minimum of three graduate faculty members, one PhD student, and one DPT2 student at the beginning of each academic year to serve, if called upon, as members of the Grievance Committee. (Members will be different from those currently serving on the Graduate Student Review and Promotions Committee).

2. Prior to the formal initiation of the grievance process, a student should discuss the grievances with the Department Chair in an attempt to resolve such grievances informally.

3. If the student continues to feel the decision is improper and cannot be resolved through the discussion provided for in #2 above, the student shall forward a written request for review of the decision to the Department Chair. The letter should outline the grievances in reasonable detail. In addition, the student should choose two of the graduate faculty members and students from those chosen to serve on the committees, to constitute his/her review committee.

4. The Department Chair shall designate a chairman of the review committee from those committee members identified by the student.

5. The review committee chairman shall convene the committee as soon as possible. Normally it is expected that the review process will be completed within two weeks of its formal initiation by the student.

6. The student requesting the review shall have the opportunity to discuss the grievances directly with the committee and provide any supporting material relevant to the review.

7. The review committee shall then determine what additional information or consultation is necessary to complete their review.

8. Upon review of relevant information the review committee shall communicate their findings and recommendations in writing to the student and the Department Chair. The committee’s report should include major considerations in the decision.

The Graduate College policy is that questions involving judgment of performance will not be reviewed beyond the Department level. If, however, the student feels there has been unfairness or some procedural irregularity concerning dismissal, the student may pursue a grievance according to the Academic Grievance Procedure (AGP) established by the Graduate College. The AGP is available in the Graduate College. The student should consult with the Graduate College prior to initiating an academic grievance. If a Department decision is appealed, the Dean may appoint an appeals committee of faculty and students from a slate of nominees prepared by the Graduate Council and the Graduate Student Senate to recommend an appropriate course of
action. The student should inquire at the Office of the Dean for further information. If the student disagrees with the decision made by the Dean, the student may request a review by the Provost.

**COMPLAINTS TO THE DEPARTMENT**

Complaints that are not covered by due process procedures (described above) may be brought to a faculty or staff member or to the department chair. All complaints reported to faculty and staff will be reported to the department chair. If the complaint remains unresolved at the department level, it should then be brought to the university. Specific university contacts can be found at the following site: http://dos.uiowa.edu/policies. Complaints may also be filed with the Committee on Accreditation in Physical Therapy Education (CAPTE).

Details on this process can be found at: http://www.capteonline.org/Complaints/

**POLICY ON ETHICS IN RESEARCH**

The Department faculty wishes to heighten sensitivity of students to the ethical standards of the University community. All students will be expected to complete the online Protection of Human Subjects Certification. A portion of the University's Policy on Dealing with Conflicts of Interest is reproduced below from the University’s operations manual. The entire Operations Manual is available online at http://www.uiowa.edu/~our/opmanual/.

**Chapter 18: Conflicts of Commitment and Interest (President 9/95; 2/03; 4/05; 2/06; 1/09; 8/12; 10/13; 1/14; 5/15)**

18.1 Introduction. (Amended 10/1/13)

The University of Iowa and its community is committed to the principle of free, open, and objective inquiry in the conduct of its teaching, research, and service missions. Further, The University of Iowa encourages its employees to engage in external activities that promote the University's mission, contribute to their professional skills, and/or enhance the public good. However, the University also expects its employees to fulfill their University obligations first and foremost commensurate with their appointment requirements. To ensure that external activities are conducted in a manner consistent with institutional and public values, the following policy conveys expectations and procedures to ensure that University employees avoid improper conflicts whenever possible, or otherwise disclose activities for review and management.

After consultation with their relevant employees, individual units within the University may adopt more stringent rules, which must be approved by the vice president or Executive Vice President and Provost responsible for that unit. Other University policies that address other types of conflicts of interest not covered by this policy are referenced at the end of this chapter.

It should be noted that the following rules governing outside professional activities do not apply to the intramural practice of medicine, nursing, and dentistry conducted in the Colleges of Medicine, Dentistry, and Nursing by members of those faculties according to the plan approved and regulated by the Board of Regents, State of Iowa, and specific provisions of the Iowa Code.

**27.4 General Policy and Procedures for Review of Research Projects Involving Use of Human Subjects. (President 8/7/75; amended 9/97; 11/00; 6/01; 8/02)**

It is the general concern of the University that no research done under the jurisdiction of the University expose persons who participate as subjects or respondents to unreasonable risks to their health, general well-being, or privacy.

Specifically, the University is concerned that in all research and related activities involving the use of human subjects: 1) the rights and welfare of the individuals involved are adequately protected; 2) the participation of the subjects is based on freely given, legally effective informed consent; and 3) the risks to the subject are reasonable in relation to the sum of the benefit to the subject and the importance of the knowledge to be gained as to warrant a decision to allow the subject to accept these risks.
Therefore, all research and related activities involving the use of human subjects must be submitted for prior review by the appropriate University Institutional Review Board (IRB) to ensure that the above conditions are met.

Primary responsibility for assuring that the rights and welfare of research subjects are protected continues to rest with principal investigators conducting the research. Others engaged in the conduct of the research share this responsibility. Teachers who assign or supervise research conducted by students have an obligation to consider carefully whether those students are qualified to adequately safeguard the rights and welfare of subjects.

The University has provided the federal government with a formal commitment to ethical and appropriate review and conduct of human subjects research in a document entitled "Federalwide Assurance of Protection for Human Subjects." The detailed University policy and procedures are described in a manual entitled "Investigator's Guide to Human Subjects Research." Both documents are available via the World Wide Web at http://research.uiowa.edu/hso or in hard copy from the Human Subjects Office.

**HUMAN SUBJECTS REVIEW / INSTITUTIONAL REVIEW BOARD**

All human subject research proposals (student, faculty, and external investigators) are submitted online to the University Human Subjects Office / Institutional Review Board and before any data collection may be initiated. Submission and review by other committees may be required depending on the nature of the individual research study. For example, studies involving the use of vertebrate animals must be reviewed by the University Office of Animal Resources / Institutional Animal Care and Use Committee. The student should inquire with the faculty advisor for more detailed instruction. For detailed information and instructions, see the following University web page: [http://research.uiowa.edu/policies-and-compliance](http://research.uiowa.edu/policies-and-compliance).

**DEPARTMENT FACULTY & STAFF**

**Core Faculty**
Marcie L. Becker, DPT, Associate
Byron E. Bork, PT, MA, Lecturer & Academic Coordinator of Clinical Education
Darren P. Casey, PhD, Assistant Professor
Stacey DeLong, PT, PhD, PCS, Assistant Professor
Shauna Dudley-Javoroski, PT, PhD, Assistant Research Scientist
Laura A. Frey Law, MPT, MS, PhD, Associate Professor
Bruce A. Miller, MA, PT, Adjunct Faculty
Shelley Mockler, MPT, Adjunct Faculty
Kelly J. Sass, MPT, Associate & Assistant ACCE
Richard K. Shields, PT, PhD, FAPTA, Professor, Chair & DEO
Kathleen A. Sluka, PT, PhD, FAPTA, Professor
Carol G. Vance, PT, PhD, Associate
David M. Williams, MPT, PhD, ATC, CSCS, Associate
Glenn N. Williams, PT, PhD, ATC, SCS, Associate Professor
H. John Yack, PT, PhD, Associate Professor

**Administrative Staff**
Ann Lawler, MBA – Administrative Services Coordinator
Carol Leigh – Administrative Services Manager
Janan Winn – Administrative Services Coordinator
Jason Wu, BS, MS – Engineer II
Secondary Faculty
Annuziato Amendola, MD, FRCS®, DABOS – Professor, Orthopaedics
Kathleen H. Andersen, MS – Lecturer, Anatomy & Cell Biology
David P. Asprey, PhD, PA-C – Professor, Physician Assistant
Joseph J. Chen, MD – Clinical Associate Professor, Orthopaedics
Kelly J. Cole, BS, MS, PhD – Associate Professor, Health & Human Physiology
Warren G. Darling, BS, MSc, BA, PhD – Professor, Health & Human Physiology
Barbara Rakel, BSN, MA, BA, PhD – Assistant Professor, Nursing
Justin Sipla, PhD – Lecturer, Anatomy & Cell Biology
Brian Wolf, MD, MS – Associate Professor, Orthopaedics

Emeritus Faculty
Thomas M. Cook, BA, PhD
David H. Nielsen, PT, PhD
Gary L. Smidt, PT, PhD, FAPTA
Gary L. Soderberg, PT, PhD, FAPTA

Laboratory Staff
Ramy Abdelhamid, PhD – Postdoctoral Research Scholar
Dana Dailey, PT, PhD – Assistant Research Scientist
Jessica “Jing” Danielsen, BS – Research Assistant
Katharine Geasland – Research Associate
Sandra Kolker, BS – Research Associate
Jacquelyn Loesche – Research Assistant
Ericka Merriwether, PhD – Postdoctoral Research Scholar
Lynn Rasmussen, BS – Research Associate
Rebecca Spitz – Research Intern
Carol Vance, PT, PhD – Associate

Complimentary Staff
Judy Biderman

Adjunct Faculty
- Lisa M. Ainsworth, DPT – UnityPoint–St. Luke’s Hospital, Cedar Rapids, IA
- Theresa Alt, PT, DPT, GCS, CCI – UnityPoint– St. Luke’s Hospital, Cedar Rapids, IA
- Amy N. Baker, DPT – Total Rehab, Williamsburg, IA
- Bryon T. Ballantyne, PT, PhD – St. Ambrose University, Davenport, IA
- Rhonda N. Barr, MA, DPT, CCS – University of Iowa Hospitals & Clinics, Iowa City, IA
- Sarah Bengtson, DPT – UnityPoint–St. Luke’s Hospital, Cedar Rapids, IA
- Randy Boldt, MPT, CFO – Rock Valley Physical Therapy, Moline, IL
- Michelle Borgwardt, DPT – University of Iowa Hospitals & Clinics, Iowa City, IA
- Molly Camacho, DPT, OCS – Performance Therapies, PC, Coralville, IA
- Leslie Carpenter, PT – Progressive Rehab Associates, Iowa City, IA
- Nicholas Cooper, DPT, OCS – University of Iowa Hospitals & Clinics, Iowa City, IA
- Wendy Craft, MPT, NCS – University of Iowa Hospitals & Clinics, Iowa City, IA
- Rene Crumley, DPT, NCS, CEEAA – UnityPoint – St. Luke’s Hospital, Cedar Rapids, IA
- Dana Dailey, PT, PhD – Genesis Outpatient Rehabilitation, Moline, IL
- Pamela A. Duffy, PT, PhD, OCS, CPC, RP, FAPTA – Wellmark BCBS of Iowa, Des Moines, IA
- Matt Ehler, MPT, ATC – Progressive Rehab Associates, Iowa City, IA
- Lori Enloe, PT, MA, CEEAA – Breath & Balance Tai Chi, Iowa City, IA
- Kim E. Eppen, MPT, PhD – University of Iowa Hospitals & Clinics, Iowa City, IA
• Richard E. Evans, PT, OCS – University of Iowa Hospitals & Clinics, Iowa City, IA
• Stephanie Evans, DPT – University of Iowa Hospitals & Clinics, Iowa City, IA
• Brett Ford, DPT, OCS – University of Iowa Hospitals & Clinics, Iowa City, IA
• Robb Gardner, PT, MHL, ATC, CEO – Henry County Health Center, Mt. Pleasant, IA
• Jerry F. Gillon, PT, OCS, ATC – Linn County Physical Therapy, Cedar Rapids, IA
• Catherine L. Hahn, MPT, ATP – Mississippi Bend AEA, Bettendorf, IA
• Jaclyn Hall, DPT, GCS – UnityPoint – St. Luke’s Hospital, Cedar Rapids, IA
• Scott Harms, DPT, ATC, CSCS – Performance Therapies, PC, Coralville, IA
• James B. Holte, PT, OCS, CSCS – Midwest Physical Therapy, Coralville, IA
• Michael Horsfield, PT, OCS, ATC, MBA – Rock Valley Physical Therapy, Moline, IL
• Melanie House, DPT, NCS – University of Iowa Hospitals & Clinics, Iowa City, IA
• Masaki Iguchi, PT, PhD – Tsukuba University of Technology, Japan
• Alexas Ihrig, DPT – University of Iowa Hospitals & Clinics, Iowa City, IA
• Judith Jicinsky, PT – Performance Therapies, PC, Cedar Rapids, IA
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• Carol J. Kelderman, DPT – Work Systems Rehab, Oskaloosa, IA
• Janine Kelly, PT, CCS – University of Iowa Hospitals & Clinics, Iowa City, IA
• Ted Kepros, MPT, MTC – Kepros Physical Therapy & Performance, Cedar Rapids, IA
• Lisabeth L. Kestel, DPT, MBA, SCS, ATC – University of Iowa Hospitals & Clinics, Iowa City, IA
• Jill Kilkenny, MS, PT – Rec Center Physical Therapy, Rockwell Collins, Cedar Rapids, IA
• Amy L. Kimball, MPT, ATC – Wartburg College, Waverly, IA
• Kevin Komenda, DPT, NCS – UnityPoint – St. Luke’s Hospital, Cedar Rapids, IA
• Paul O. Kraushaar, PT, OCS – Muscatine Physical Therapy Services, Muscatine, IA
• Bret Kruthoff, DPT, ECS – Special Medical Services, Charles City, IA
• Tami Lansing, DPT – University of Iowa Hospitals & Clinics, Iowa City, IA
• Ken C. Leo, MA, PT – University of Iowa Hospitals & Clinics, Iowa City, IA
• Joseph Leone, MA, PT – UnityPoint – St. Luke’s Hospital, Cedar Rapids, IA
• Shannon Miers, MPT, PCS, SCS, ATC – University of Iowa Hospitals & Clinics, Iowa City, IA
• Bruce A. Miller, PT, MA – University of Iowa Hospitals & Clinics, Iowa City, IA
• Joy M. Miller, MPT, ATC – University of Iowa Hospitals & Clinics, Iowa City, IA
• Joe Nelson, DPT – Accelerated Rehabilitation, Iowa City, IA
• Debra S. Parrott, PT, CCS – University of Iowa Hospitals & Clinics, Iowa City, IA
• Erin E. Pazour, MPT – UnityPoint–St. Luke’s VNA, Cedar Rapids, IA
• Andrew J. Phillips, DPT – University of Iowa Hospitals & Clinics, Iowa City, IA
• Lauren Plum, DPT – 21st Century Rehab, Knoxville, IA
• Tanja Roembke, BA, MA – University of Iowa, Psychology Graduate Assistant, Iowa City, IA
• Kevin Schleich, PharmD – University of Iowa Hospitals & Clinics, Iowa City, IA
• Carol Schueller, DPT – UnityPoint–St. Luke’s Therapy Plus, Cedar Rapids, IA
• Elayne O. Sexsmith, MBA – University of Iowa Hospitals & Clinics, Iowa City, IA
• Michael Shaffer, MPT, OCS, ATC – University of Iowa Hospitals & Clinics, Iowa City, IA
• Mary Shepherd, PT, CVR – University of Iowa Hospitals & Clinics, Iowa City, IA
• Kolleen Shields, MA, PT – University of Iowa Hospitals & Clinics, Iowa City, IA
• Donald Shurr, CPO, PT – University of Iowa Hospitals & Clinics, Iowa City, IA
• Jamie M. Smelser, PharmD – University of Iowa Hospitals & Clinics, Iowa City, IA
• Sue Sohrweide, PT – Gillette Children’s Hospital, St. Paul, MN
• Sherry Steffen, MPT – Performance Therapies, PC, Coralville, IA
• Travis Sterling, PT, OCS, CSCS – Sterling Physical Therapy, Pella, IA
• Patrick Swancutt, DPT, ATC, CSCS – Performance Therapies, PC, Coralville, IA
• Margaret Thomas, PT, MA – Kirkwood Community College, Cedar Rapids, IA
- Blake Tiedtke, DPT, CSCS – Performance Therapies, PC, Coralville, IA
- Amy Uitermark, DPT, WCS – University of Iowa Hospitals & Clinics, Iowa City, IA
- Barbara Van Gorp, DPT, OCS, CSCS – University of Iowa Hospitals & Clinics, Iowa City, IA
- Daniel White, DPT, OCS – Rock Valley Physical Therapy, Davenport, IA

**DEPARTMENT COMMITTEE STRUCTURE**

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<tr>
<th>Meetings 1st Monday, 12:00-1:00</th>
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<td>Support: Lawler</td>
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<tr>
<th>Members</th>
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<th>Research Awards/ Travel</th>
<th>PhD Program Committee Chair</th>
<th>Graduate College Meetings</th>
<th>Grants/ Traineeships/ IRB</th>
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<th>Curriculum and Instruction (C&amp;I)</th>
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<tr>
<td>Chair: G Williams</td>
<td>Support: Leigh</td>
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<th>Members</th>
<th>Peer Review/ Teaching/ TA’s</th>
<th>Academic/ Clinical/ Alumni/ Awards</th>
<th>Clinical Education</th>
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<th>Faculty Meetings</th>
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<th>Meetings 4th Monday, 12:00-1:00</th>
<th>Faculty/Staff/Student Affairs (FSSA)</th>
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<td>Co-Chairs: Bork &amp; Sass</td>
<td>Support: Leigh</td>
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<th>Events/ Social</th>
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* The DEO (Richard Shields) is ex officio to the R&D, C&I, and FSSA committee meetings. A faculty committee chair or co-chairs run these meetings. Class representatives from each DPT class and the PhD program attend the faculty meeting.
DEPARTMENT ORGANIZATIONAL CHART

1) SHIELDS- Chair & DEO

2) Leigh – Admin Serv Mngr;
   Winn - Admin Serv Coord;
   Lin - Financial Analyst

3) BORK/SASS, Becker,
   DeJong, Frey Law, Kestel, Leigh,
   Yack
   a) Bork, Sass
   b) Bork, Sass, Frey Law,
      Leigh
   c) Yack
   d) Staff
   e) Staff

4) G. WILLIAMS, Becker, Bork,
   Casey, DeJong, Frey Law,
   Kestel, Miller, Sass, Sluka, D
   Williams, Yack
   f) Sass
   g) Bork
   h) Bork, Sass, Kestel,
      Miller
   i) Sass, Frey Law (All)
   j) G Williams, Yack

5) SHIELDS, Casey, DeJong,
   Frey Law, Lawler, Sluka,
   G. Williams, Yack
   k) Frey Law (All)
   l) Sluka (All)
   m) Casey
   n) Rotate All
   o) Sluka, Yack
DOCTOR OF PHYSICAL THERAPY PROGRAM

MISSION AND PRACTICE OF PHYSICAL THERAPY
The faculty of The University of Iowa Department of Physical Therapy and Rehabilitation Sciences unanimously supports the following mission statement regarding the education of the entry-level physical therapy student: “Physical therapy is a dynamic profession with an established theoretical base and widespread clinical applications, particularly in the preservation, development, and restoration of maximum physical functions. We prepare our graduates to examine, evaluate, treat, and prevent impairments, functional limitations, and disabilities; to maintain and promote fitness, health and quality of life; and to ensure availability, accessibility, and excellence in the delivery of physical therapy services to patients/clients. As essential participants in the health care delivery system, our graduates are prepared to assume leadership roles in prevention and health maintenance programs, in the provision of rehabilitation services, and in professional and community organizations. Our graduates are also able to play important roles in developing health policy and appropriate standards, as well as assessing clinical outcomes for the various elements of physical therapy practice.”

ACCREDITATION
The Doctor of Physical Therapy Program at the University of Iowa is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: (703)706-3245; email: accreditation@apta.org; [http://www.capteonline.org](http://www.capteonline.org).

STUDENT RECRUITMENT AND ADMISSION
Our goal is to recruit outstanding applicants to our Doctor of Physical Therapy (DPT) degree program. Our target class size is currently 36 to 40 students per class. Any change in planned class size is reviewed and approved by the Department faculty. Realizing that not all accepted applicants will choose to enroll, an alternate list of qualified applicants is developed to ensure planned class size is obtained and maintained. Over the past 20 years we have extended into our alternate list each year. To ensure we reach our planned class size of 36 to 40 it is helpful to give initial admission offers to slightly more applicants than our planned class size. This approach is effective in maintaining the desired class size while limiting the chance of over enrollment.

PROFESSIONAL BEHAVIORS
Professional behaviors are behaviors, attributes, or characteristics that are not explicitly part of a profession's core knowledge and technical skills but are nevertheless required for success in that profession. Professional behaviors, which define expected behavior within a given profession, serve as the foundation for ability-based learning. [http://www.marquette.edu/physical-therapy/documents/ProfessionalBehaviors.pdf](http://www.marquette.edu/physical-therapy/documents/ProfessionalBehaviors.pdf). Students are evaluated by faculty each semester regarding their Professional Behaviors. The 10 abilities and definitions are listed below:
1. Critical Thinking: The ability to question logically; identify, generate and evaluate elements of a logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision making process.
2. Communication: The ability to communicate effectively (i.e., verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.
3. Problem Solving: The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
4. Interpersonal Skills: The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.

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5. **Responsibility:** The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.

6. **Professionalism:** The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.

7. **Use of Constructive Feedback:** The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.

8. **Effective Use of Time and Resources:** The ability to manage time and resources effectively to obtain the maximum possible benefit.

9. **Stress Management:** The ability to identify sources of stress and to develop effective coping behaviors.

10. **Commitment to Learning:** The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.


**TECHNICAL STANDARDS**

Graduates from the Doctor of Physical Therapy (DPT) Program at The University of Iowa must possess and demonstrate the physical, cognitive, and emotional abilities required to provide physical therapy services in a broad variety of clinical situations and environments. All candidates in the DPT Program must perform, the skills listed below in a safe, effective, and efficient manner and in compliance with legal and ethical standards as set forth by the APTA Code of Ethics and Standards of Practice, with accommodations when appropriate.

1. Communicate effectively through utilization of appropriate verbal, nonverbal, and written communication with patients, families, and others.

2. Demonstrate ability to apply universal precautions.

3. Utilize appropriate tests and measures in order to perform a physical therapy examination. Examples include, but are not limited to, the examination and evaluation of cognitive/mental status, vital signs, skin and vascular integrity, wound status, endurance, segmental length, girth, and volume, sensation, strength, tone, reflexes, movement patterns, coordination, balance, developmental stage, soft tissue, joint motion/play, cranial and peripheral nerve function, posture, gait, functional abilities, assistive devices fit/use, psychosocial needs, and the pulmonary system.

4. Demonstrate ability to reach diagnostic and therapeutic judgments through analysis and synthesis of data gathered during patient/client examination in order to develop an appropriate plan of care.

5. Perform fully or in a reasonably independent manner, physical therapy interventions appropriate to the patient's status and desired goals. These include but are not limited to, exercise and aerobic conditioning, functional training in self-care and home management, functional training in community and work integration activities, manual therapy techniques, prescription and application of appropriate prosthetic and orthotic devices, airway clearance techniques, wound management, physical agents and mechanical modalities, and cardiopulmonary resuscitation (CPR).

6. Apply teaching/learning theories and methods in health care and community environments.

7. Accept criticism and respond by appropriate modification of behavior.

8. Possess the perseverance, diligence, and consistency to complete the physical therapy curriculum and enter the practice of physical therapy.

Applicants who because of a health condition or disability believe they need accommodation to meet the technical standards for graduation should contact The University of Iowa's Office of Student Disability Services at (319) 335-1462.

**IOWA READINESS INDEX SCALE (IRIS)**

The Iowa Readiness Instrument for Students (IRIS) is an internally-developed tool that assesses student readiness to begin terminal clinical education experiences based on cognitive, psychomotor and affective skills. The instrument allows faculty to assess each student's overall performance in comparison to the benchmarked
average for the class. Students who lag behind their peers are identified for potential remediation activities. Students who show no deficiencies are approved for full-time clinical education experiences.

The data utilized in the IRIS are:
- Cumulative GPA
- Psychomotor GPA (Lab Practical Examinations)
- Didactic GPA (Lecture Examinations)
- Professionalism
- Generic Abilities
- Total/Composite Score

DPT CURRICULUM OBJECTIVES
In agreement with the mission and vision of the University of Iowa Department of Physical Therapy and Rehabilitation Sciences, graduates of the Doctor of Physical Therapy (DPT) program will:

Patient Care
1. Demonstrate the ability to practice in an ethical, legal, safe, caring, and effective manner in areas of:
   - standards of practice
   - applicable state and federal laws
   - ethical principles
   - scientific basis of evaluation, prevention and treatment
   - responsibility to refer to other physical therapists and other members of the health care team when indicated.
2. Be able to screen individuals to determine the need for physical therapy examination or for referral to other health professionals by identifying potential health problems and recognizing patient problems that may require other professional attention in addition to that from a physical therapist.
3. Determine in any patient with physical dysfunction a diagnosis that is within the scope of physical therapy by:
   - obtaining pertinent history and identifying patient problems through interview or other appropriate methods
   - selecting and performing appropriate examination
   - interpreting the results of physical therapy examinations of the neurological, musculoskeletal, cardiovascular, pulmonary, integumentary, and other systems as appropriate.
4. Design a comprehensive physical therapy plan of care that includes:
   - realistic measurable physical therapy goals and length of time for achievement
   - therapeutic procedures that have the potential for achieving the goals
   - recognition of the influence of biological, psychological, cognitive, social, and cultural factors on compliance and achievement of goals
   - concepts of health maintenance and promotion and prevention of disease and disability
   - collaboration with patients, families, those individuals responsible for the patient, and colleagues
   - re-evaluation and modification of the treatment and goals.
5. Manage a physical therapy plan of care by:
   - implementing a comprehensive treatment plan
   - interact with patients and families in a manner which provides the desired psychological support
   - appropriately delegate to and direct the physical therapist assistant and supervise other personnel
   - participate in discharge planning and follow-up care including referral to other community resources as indicated
   - document relevant aspects of history, examination, assessment, planning, and treatment
   - demonstrate effective written, oral, and non-verbal communication with patients, families, colleagues, health care providers, and the public
• promote effective interpersonal relationships in all aspects of professional practice.

**Physical Therapy Delivery System**

6. Apply concepts and principles of management in the provision of physical therapy to individuals, organizations, and communities
7. Apply concepts of teaching and learning theories in designing, implementing, and evaluating learning experiences used in the education of patients, students, colleagues, and the community
8. Apply basic principles of scientific method to read and interpret professional literature, to participate in clinical research activities, and to critically analyze new concepts and findings
9. Design and implement cost effective physical therapy services
10. Plan and implement programs designed to promote and maintain health and wellness
11. Use current information management technologies in the delivery of physical therapy services and analysis of data when indicated
12. Demonstrate effective professional writing skills
13. Assess treatment and service outcomes
14. Participate in quality assurance programs
15. Plan for future professional development to maintain a level of practice consistent with acceptable standards.

**Health Care System and Society**

16. Recognize the need for demonstrating accountability, cost effectiveness of service provided, and efficacy of services
17. Participate in developing methods to meet the physical therapy needs of society
18. Serve as consultants to individuals, colleagues in physical therapy, other health professionals, organizations, and the community.
19. Serve in leadership positions as clinicians, researchers, and health policy managers.

**REAFFIRMATION CEREMONY**

Instituted in 2014, the DPT students profess the following oath during a ceremony prior to leaving for their terminal clinical education experiences where they each are pinned with a University of Iowa physical therapy pin.

We, the University of Iowa Class of 20__, profess our aspiration to preserve, protect, and defend the values that we attribute to becoming a physical therapist.

The physical therapist’s relationship with the patient is the core of the art and science of rehabilitation, and, therefore, we will treat our patients to the utmost of our ability, with compassion and respect. We will strive to craft a healthy and open relationship with each patient, keeping in mind each patient’s unique background and remembering that the great physical therapists treat the whole patient and not just the symptoms of disease or injury. We pledge to pursue lives of learning and discovery within the rehabilitation sciences, aiming to achieve the best possible outcomes for our patients.

We pledge to our colleagues in physical therapy an equally high level of dedication as we pursue our common goals. Our relationships with fellow health care providers alike will be based on mutual respect and open communication. We will recognize our limitations and will accordingly seek advice and counsel from our colleagues. Similarly, we will aim to provide that same guidance as mentors and teachers.

Our responsibilities as physical therapists also extend further to include our respective communities – local, national and global. We recognize the universal right to the pursuit of health and pledge to act as stewards of that principle, pursuing our moral obligation to ameliorate health care disparities and to promote attitudes, behaviors and values beneficial to the public’s health. Moreover, we intend to remain active participants in the discourse shaping rehabilitation health care
policy, acknowledging that physical therapy is a public service, undertaken in the nation’s service – and in the service of all nations.

Finally, though we pledge to serve selflessly, we also acknowledge the need to maintain balance amongst the various professional and personal responsibilities of our lives. We pledge to approach this challenge with humility, introspection, and a constant awareness of our limitations and capabilities.

We declare this statement on the ___ of May, 20___, to our peers, educators, the community of Iowa City, and the nation at large. It is an acknowledgment of our commitment to the University of Iowa Physical Therapy and Rehabilitation Science Department and its tradition of excellence.

GRADUATION
The DPT program holds two graduation ceremonies in December – a departmental ceremony and the Graduate College ceremony. The departmental ceremony is conducted by the physical therapy faculty, graduating DPT students, and the Carver College of Medicine (CCOM) Dean addresses the graduates. The graduates select a speaker and master of ceremony from their class. Department faculty members recognize the scholarship recipients and each graduate. The Graduate College ceremony is conducted by the Dean of the Graduate College and external faculty. During the formal Graduate College ceremony, the DPT students wear the traditional cap and gown and are formally hooded by their faculty advisor.

GENERAL INFORMATION FOR DPT STUDENTS

- **Philosophy of Attendance & Participation** – Attendance of classes allows students to benefit from instructors’ knowledge, impromptu content, interactive discussion within the classroom, and practical learning opportunities whether planned or extemporaneous. Student participation enriches the student’s own learning experience and the learning experiences of his or her peers. Interpersonal communication is a vital component of physical therapy practice. Accordingly, it is our wish that students attend and actively participate in classes. In the event a student will miss, the student should discuss the conflict with the instructor(s) as appropriate and attempt to resolve the conflict. Expectation is that all students attend all classes. See the course syllabus for specific expectations of individual course instructors.

- **Liaison** – A student liaison from the DPT2 class is assigned to each entering student to facilitate transition to a DPT student.

- **Schedule** – The semester schedule as distributed will be followed unless announcements are posted, emailed, or given verbally. Every attempt will be made to give as much notice as possible of any schedule changes. Students are to have their days reserved from 8:00 AM to 5:00 PM Monday through Friday for the DPT curriculum as out of class time is needed for research, projects, etc. Work conflicts are not a reason to miss these out of class time meetings. On occasion, there will be evening and weekend times required. These will be announced well in advance to allow scheduling arrangements.

- **Booklist** – A booklist will be provided prior to each semester. Most books are available at the University Medical Student Bookstore in the Atrium area of the Medical Education & Research Facility (MERF) building. Hours are limited and typically are 12:30-1:15 PM Monday through Friday, and Monday and Wednesday 4:45-5:30 PM. Summary hours are typically Monday through Wednesday 12:30-1:15 PM.

- **Lockers** – A locker in the Department’s locker room will be assigned to each student. Combination or other locks are to be provided by the student. Some students will need to share lockers.

- **Department Charges** – DPT students will be notified of any charges to student University bills (U-bills) for needed supplies purchased by the department for students such as an evaluation kit, bulk orders of textbooks (hard copies and electronic), handout booklets for class, etc.

- **APTA Membership** – The department strongly recommends American Physical Therapy Association (APTA) membership. National dues are currently $80 and Iowa Chapter dues are $20.

- **Health Screening** – All students are responsible for assuring that Health Screening is current and complete with Student Health Services. If such is not the case, clinical facilities will not allow student participation in clinical education. The result can be potential alterations in academic standing in the program.
Malpractice Insurance – Malpractice insurance is required on all students in the DPT Program. The University maintains professional liability insurance on the DPT students in the amount of $1,000,000 per occurrence and $3,000,000 in the aggregate per year. The cost for coverage is paid by the Department. Detailed information concerning limits of coverage, etc., may be obtained from the ACCEs.

Health Insurance – Health insurance is required. If students do not provide proof of insurance students will automatically be enrolled in a health insurance plan and billed on their university bill. Proof of coverage must be provided annually to the university.

Use of Patients and Healthy Volunteers in Classroom Demonstrations and Skills Practice – In select courses, students are required to interact with patients and/or healthy volunteers during demonstrations and/or lab practice of clinical skills. These learning experiences are directly supervised by core and/or adjunct faculty members who are licensed physical therapists. For patients and healthy volunteers, the choice of whether or not to participate is completely voluntary. Patients and volunteers can choose not to participate at all, or can stop participating at any time, without penalty. In all circumstances, students are expected to practice in a safe manner that minimizes the risk to themselves and others, by ensuring safety, privacy and dignity. Volunteers should be informed in advance regarding procedures, potential risks, and the extent to which personal and health information will be shared with students and course faculty as part of the learning experience. Students and faculty are expected to restrict the sharing of personal and health information to essential, course-related purposes that are necessary for the learning experience.

Student Participation Policy – In select courses, students are asked to serve as subjects or to simulate certain patient care situations during demonstrations or lab practice of clinical skills. These learning experiences are supervised by core and/or adjunct faculty members who are licensed physical therapists. Students have a choice of whether to participate as a subject in each activity and may communicate their wishes with the course coordinator. Students are expected to practice in a safe manner that minimizes the risk to themselves and others by ensuring safety, privacy, and dignity.

Standard Precautions and Hazardous Materials – Standard precautions shall be used by all students when there is a risk for contact with blood or other potentially infectious or hazardous materials. Personal protective equipment will be provided by the department, lab or clinical education site as needed for protection. Infection control and blood borne pathogen training is completed on an annual basis. The PTRS Blood Borne Pathogen Exposure Control Plan can be found in the Safety Module on your class ICON page. Material Safety Data Sheets (MSDS) for all hazardous chemicals in the department can be found here: https://uiris.research.uiowa.edu/modules/alerts.php?type=msds.

Equipment Use, Maintenance, and Safety – All department equipment used in the instruction of students will be routinely assessed for safety/injury risk. Training on the safe use of equipment must be obtained prior to the use of medical devices and any other types of equipment that pose injury risk to users or others. The Department Equipment Safety & Management Policy is available on department and class ICON sites.

GRADUATE ASSISTANTSHIPS
Since the professional DPT program requires our students to carry semester loads of 16-20 hours, this does not allow them to have assistantships. Any request for an exception to this policy must be approved by the department faculty.

FINANCIAL AID
Detailed information regarding financial aid can be found at www.uiowa.edu/financial-aid/.

How to Apply for Financial Aid: Specific information and application materials may be obtained from the UI Office of Student Financial Aid (OSFA). To determine your eligibility for aid through OSFA for the academic year, you must provide information about your financial situation by submitting the Free Application for Federal Student Aid (FAFSA) annually which is available online at www.fafsa.ed.gov. OSFA will process your financial aid application as soon as your file becomes complete. Some financial aid programs are subject to the availability of funds (first-come, first-served), and others are not. To be
considered for all limited funds, be sure to submit your materials as soon as possible. The following loan
programs are available through the University of Iowa OSFA:

Federal Student Aid Programs:
- Grants – student aid funds that do not have to be repaid (other conditions apply)
- Work-Study – a part-time work program to earn money while you are in school
- Federal Loans – student aid funds that you must repay with interest.

- **Work Study:** For those eligible for work study, there may be opportunities for this in departmental
  research laboratories depending on faculty grant funding available.
- **Medical College Access Program (MedCAP):** The MedCAP loan is a private medical school student loan for
  students in an approved health-related program.
  Contact: [https://www.wellsfargo.com/student/loans/professional/medschoolloan](https://www.wellsfargo.com/student/loans/professional/medschoolloan) or 800-378-5526
- **Teaching & Research Assistantships:** These are not available to DPT students. Departmental teaching and
  research assistantships are awarded to students who are working on their Ph.D.
- **Departmental Support:** Each entering physical therapy student will be eligible for financial aid as
determined on the FAFSA form. The student must sustain a strong academic performance in order to
qualify for these funds. These resources are contingent upon state approval from the Board of Regents,
State of Iowa on an annual basis.
- **Mentor Scholars Program:** This scholarship is awarded through the Department and is available to second
year students to be mentors for select DPT1 courses. The selection criteria include GPA/merit, instructor
perception, and teamwork. Four DPT2 students are selected and receive $1,000 each. These resources are
open to state approval and will always be contingent on allocations from the state.
- **Interprofessional Education Leaders:** This recognition is awarded through the Department and is available to
second year students to be leaders through assisting in teaching joint evaluations to first year medical
students. The selection criteria include GPA/merit, instructor perception, and teamwork. Ten DPT2
students are selected and receive $1,000 each. These resources are open to state approval and will always
be contingent on allocations from the state.
- **Departmental Scholarships:** Our department has about $12,000 of scholarship money annually, mainly
  through memorial funds and contributions to the Physical Therapy Development Fund from alumni.
  Information about department scholarships is given to the students once enrolled.
- **ILEND Traineeship:** Iowa’s University Center for Excellence in Developmental Disabilities (UCEDD), which is
  a part of UIHC’s Center for Disabilities and Development (CDD), has been the recipient of a LEND training
  grant, sponsored by the Maternal and Child Health Bureau (MCH), since Fall 1993. If the grant continues,
  they will recruit 2-3 DPT2 students, who will participate in the rigorous leadership curriculum throughout
  the fall and spring semesters as part of their ILEND training experience and will complete one of their 9-
  week clinical internships at the CDD. Financial support to each trainee will include a monthly stipend and
  anticipated support for approved training related travel (i.e.: to conference – CSM, a legislative session,
  community-based programs, etc.).
- **Employment:** Part-time work during the DPT Program is usually discouraged. However, most students who
do work limit themselves to no more than 10 hours of employment per week. Students are to have their
days reserved from 8:00 AM to 5:00 PM Monday through Friday for the DPT curriculum as out of class time
is needed for research, projects, etc. The University of Iowa Hospitals & Clinics and St. Luke’s Hospital in
Cedar Rapids generally employs 5-6 interested DPT students for weekend coverage on a rotating basis.
- **Iowa Physical Therapy Association & Foundation:** The Iowa Physical Therapy Association & Foundation
(IPTA) annually has two sources of financial aid for entry-level students who are APTA members, from
accredited physical therapy schools in Iowa.
  o **Olive C. Farr Student Loans:** Four $1,000 loans per year, not to exceed $2,000 per student, with an
    annual fee of $25 per each $1,000, and an annual interest rate of 10% which begins one month after
    graduation. A great deal if you can repay or refinance soon after graduation. **Deadline:** July 1
  o **IPTF Student Scholarships (Final Year of PT School Only):** Four $500 scholarships awarded on a
    competitive basis. Criteria include demonstrated scholarship, potential for professional contributions,
    and leadership. **Deadline:** 30 days prior to the Spring Conference (consult the IPTA calendar)
Application forms are available at http://www.iowaapta.org/.

- **Other:** Once a student is admitted to the Doctor of Physical Therapy Program, information is supplied from hospitals and clinics who may offer early "sign on" scholarships. Some private nonprofit organizations offer scholarships or loans, i.e., National AMBUCS scholarships and the Easter Seal Society.

**PHYSICAL THERAPY STUDENT ORGANIZATION (PTSO)**

The Physical Therapy Student Organization is a recognized student organization within the Office of Student Life at The University of Iowa. Membership is open to all University of Iowa students enrolled in the physical therapy curriculum. Byron Bork serves as the faculty advisor and the officers consist of a president, a vice-president, and a secretary-treasurer. Additionally, each class elects or appoints two student representatives to attend faculty meetings, a social chair, a representative to the Iowa Physical Therapy Association, a representative to the Graduate Student Review and Promotion Committee and a representative to the Grievance Committee. The organization’s purpose is to enhance student participation in professional and community outreach activities related to the profession of physical therapy. Participation in this organization fosters those behaviors which are appropriate to a professional person and promotes the transition from student to professional practitioner. The organization represents physical therapy before other student groups and the public. In addition, the organization acts as a liaison between the physical therapy program and prospective physical therapy students. Major activities of the PTSO include 1) an annual Wheelchair Challenge event designed to promote awareness to accessibility issues and to raise money to benefit selected charities; 2) planning and implementing an annual job fair, 3) organization and covering the mobile clinic, 4) organization of the Physical Therapy Ball, and 5) organization of a continuing professional education conference. The organization meets monthly during the fall and spring semesters.

**DPT SHORT-COURSE/WORKSHOP ENDORSEMENT PROTOCOL**

In an effort to facilitate and support the efforts of individuals interested in offering short-courses or workshops to our DPT students, as well as keeping faculty informed and ensuring the appropriate use of resources, the following protocol is suggested for getting the endorsement of the Curriculum & Instruction Committee. This endorsement is required of all short-courses/workshops using any Department facilities or resources and strongly recommended of all short-courses/workshops offered to the DPT students. The presenter should prepare a one-page outline that briefly describes the purpose, goals, content outline, intended audience, and presentation method. For those short-course/workshops wishing to use the Department of Physical Therapy and Rehabilitation Science’s facilities and/or resources, the following should also be included: facilities required (if possible, including times and dates), faculty or secretarial support required, equipment needs, expendables required, and a plan for cost recovery (where appropriate). The student facilitator should assign a clean-up crew to make sure the room is picked up and re-oriented after the short-course/workshop.

**OBTAINING FEEDBACK**

Feedback is encouraged and obtained through the following ways:

- From current students through course evaluations (Assessing the Classroom Environment forms) and Surveys (at the time of graduation)
- From faculty through End of Semester Professionalism Assessments
- From Employers of Graduates through the Employee Evaluation Tool
- From Clinical Instructors through the Clinical Performance Instrument

**CLINICAL EDUCATION POLICIES FOR DPT STUDENTS DURING CLINICAL EDUCATION EXPERIENCES**

**Dress Code** – Professional attire is expected during clinical experiences. Students are required to follow the dress code outlined by each clinical center. The student should bring his/her lab coat and UIHC photo name badge to all clinic sites unless specified otherwise by the clinical site. General guidelines for professional attire would include: no jeans, t-shirts, shorts, no low riding pants, low cut or cropped shirts, no visible tattoos or
body piercing (other than earrings), and no open-toe or high-heeled shoes.

**Absences** – Absences are not allowed during clinical experiences with the exception of illness or family emergency. The student must contact both the ACCE and the CCCE prior to their scheduled work hours to report an absence. Time missed due to absence will be made up at the discretion of the ACCE in consultation with the CCCE. Students are not allowed to request vacation time during their scheduled clinical experiences. There is a week-long break scheduled between clinical experiences for students to use for personal needs, including job interviews. An unexcused absence, one in which the ACCE and CCCE were not notified in advance, may be grounds for failing a clinical experience. Any exceptions to this policy must be approved by the ACCE.

**Clinical Education Expenses** – There will be some travel required to clinic sites in surrounding cities. A car is nice to have but not necessary as generally students can car pool. During the 6-week and 9-week internships, some travel will likely be required to off-campus clinical sites. Living expenses will vary depending on where the students complete their internships. Some sites require extra screening (i.e., drug screening) that the student may be responsible for.

**Student Information Shared with Clinical Education Sites** – Students are each provided a training transcript to take with them on their clinical internships verifying completion of the following:
- Mandatory Reporter Training
- Hospital Safety & Infection Control
- CPR
- HIPAA Training
- Domestic Violence Reporting Training
- Fire Extinguisher Safety Training
- UIHC Orientation Training
- Criminal Background Check upon admission to the program
- Annual signed attestation statement that the criminal background is unchanged

Additional information may be requested by a specific clinical education site, such as a current background check, drug screen or academic standing. Students are made aware of any additional information to be shared through the Clinical Site Information Form (CSIF) and/or communication with the ACCE or CCCE. Student approval is required to share any additional information.

**Professional Liability Insurance** – Malpractice insurance is required on all students in the DPT Program. The University maintains professional liability insurance on the DPT students in the amount of $1,000,000 per occurrence and $3,000,000 in the aggregate per year. The cost for coverage is paid by the Department. Detailed information concerning limits of coverage, etc., may be obtained from Byron Bork, ACCE or Kelly Sass, Assistant ACCE.

**Health Insurance** – Health insurance is required. If students do not provide proof of insurance annually they will automatically be enrolled in a health insurance plan and billed by the UI. Many of our clinical internship centers will require the physical therapy intern to provide proof of health insurance coverage prior to beginning the clinical education experience.

**Off-Campus Emergency Services** – In the event of accident or illness to students associated with their learning experience while at off-campus clinical facilities, the facility will provide or arrange for emergency treatment. The student is responsible for the expense associated with the treatment.

**Criteria to Determine Student Readiness to Engage in Clinical Education**
Criteria upon which the determination is made that each student is ready to engage in clinical education:
- Written and lab practical examinations
Professional behaviors

Simulated patient experiences

The mechanisms utilized by the core faculty to determine that each student is ready to engage in clinical education, including the determination that the student is prepared to interact safely with patients/clients during the clinical education experience:

- Written and lab practical examinations
- Professional behaviors
- Simulated patient experiences
- Review of student performance at monthly FSSA committee meetings and after each semester

**Role of Students in Clinical Education**

- To take responsibility for learning and to make the most out of opportunities provided with the goal of becoming a competent professional.
- To participate in ongoing self-assessment, reflecting on areas of strength, limitations, and inconsistencies.
- To provide constructive criticism to both academic and clinical faculty.
- To be accountable for personal and professional behaviors and actions.
- To welcome and befriend constructive criticism on clinical performance and develop an action plan for growth and development.
- To practice diligently and be willing to make mistakes and learn from them.
- To respect the rights of patients, clinical instructors, and all others associated with clinical education.

**Expectations for Clinical Instructors**

It is expected that a clinical instructor (CI) will demonstrate a desire to work with students and will serve as a positive role model for our students. By demonstrating effective communication skills, the CI will collaborate with students to plan learning experiences, goals, and expectations for student performance. The CI will make time to effectively supervise the student and will provide timely feedback related to student knowledge, skills, and professional behaviors. Clinical instructors for students on full time clinical education experiences will have a minimum of one year of full time post licensure clinical experience.

**Patient/Client Rights**

In all clinical education experiences when patients/clients are being provided health care services in Health Insurance Portability and Accountability Act (HIPPA) grants patients/clients certain legal rights. Among those rights is the right to know who is providing care and the right to refuse that care. The patient/client must be explicitly informed and completely understand when care is being provided by a student even while being closely supervised by a licensed physical therapist. The patient/client has the right to refuse treatment by a student.

**Patient’s Right to Refuse Care Provided by a Student**

The Health Insurance Portability and Accountability Act (HIPPA) grants patients/clients certain legal rights when receiving health care. This includes health care provided by students during clinical education experiences. Among those rights is the right to know who is providing care and the right to refuse that care. Patients/clients should be clearly informed and completely understand when care is being provided by a student even when the student is closely supervised by a licensed physical therapist. The patient/client has the right to refuse treatment by a student prior to and at any time during the treatment of the patient without penalty.

**Evaluation of Performance**

- During each full-time clinical experience, the student will be evaluated by the CI using the PT CPI at both midterm and final.
- The student will show progress from midterm to final evaluation on all clinical performance criteria.
- The student should demonstrate entry level performance in the following professional practice categories:
safety, professional behavior, accountability, communication, and cultural competence (categories 1-5).

- At the completion of the 6-week internship following year one, the student should at a minimum be at the intermediate performance level in all categories. Ratings below that level will require review with the ACCE and may be grounds for an unsatisfactory grade or remediation.

- At the completion of each of the first two terminal 9-week clinical experiences following year two, the student should at a minimum be at the advanced intermediate performance level in categories 6-10. Ratings below that level will require review with the ACCE and may be grounds for an unsatisfactory grade or remediation. At the conclusion of the final 9-week clinical experience, the student should achieve a rating of entry level or beyond for all 18 performance criteria. However, the grading decisions made by the ACCE will also consider clinical setting, experience with patients in that setting, relative weighting or importance of each performance criterion, progression of performance from midterm to final evaluations, whether or not “significant concerns” box is checked, and the congruence between the midterm and final comments related to the five performance dimensions and the ratings provided on the CPI.

- The student will complete a self-evaluation using the PT CPI at midterm and final.

- The student will evaluate the clinical site following the completion of the clinical experience. The student will complete the Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction. This form must be returned to the University of Iowa within one week of the completion of the experience.

- During each clinical experience, the ACCE will attempt to contact the student and/or the CCCE at least once by telephone or email to check on performance.

### Unsatisfactory Clinic Performance/Behavior Issues

- When a problem with clinic performance is noted, all efforts should be made to resolve the problem with CCCE, CI and student input. The desired change in behavior should be outlined and opportunities for the student to demonstrate change should be allowed.

- If the problem cannot satisfactorily be resolved, the student and the CCCE should contact the ACCE immediately. The ACCE will then serve as a mediator between the student and the CCCE or CI. If possible, a clinic site visit will be completed to meet with the individuals involved.

- Reassignment of the clinical experience may occur if the problem is deemed unresolvable, the student or CCCE requests termination of the clinical experience, and if another site can be arranged where the student may be able to satisfactorily complete the clinical experience.

- If, following the above arbitration, the student’s overall performance is not judged to be satisfactory, this should be reported to the ACCE.

- The Program’s ACCE has the final responsibility of assigning a grade. Prior to assigning a grade the ACCE and Assistant ACCE review and jointly discuss all student evaluations by the clinical instructors. In addition to clinical instructor ratings and comments, multiple other sources of information are given due consideration. The grading decisions made by the ACCE will also consider clinical setting, experience with patients in that setting, relative weighting or importance of each performance criterion, progression of performance from midterm to final evaluations, whether or not “significant concerns” box is checked, and the congruence between the midterm and final comments related to the five performance dimensions and the ratings provided on the CPI.

- All four segments of Clinical Education in Physical Therapy (PTRS:6793; PTRS:6794; PTRS:6795; PTRS:6796) must be completed with a Satisfactory (S) grade.

- A grade of Unsatisfactory (U) in a segment will require the student to be reviewed by the Graduate Student Review & Promotions Committee. If a student receives a grade of U, they will not receive Graduate College credit and will be unable to continue in the program until graduate credit for that course is earned.

- A grade of Incomplete (I) in a segment may require the student to be reviewed by the Graduate Student Review & Promotions Committee. A student receiving an Incomplete may be allowed to continue in the program during remediation. The Incomplete will turn into an F if not remediated by the end of the next full semester.
MANAGING COMPLAINTS

Clinical Education complaints are first brought to the attention of the Academic Coordinators of Clinical Education (ACCEs). Other complaints are managed at the departmental committee level. If the complaint is not resolved by the ACCEs or committee, then it is referred on to the department chair. Curricular complaints not handled at the committee level or by the chair, can be directed to the Commission on Accreditation in Physical Therapy Education, 703-706-3245 or accreditation@apta.org.

DPT PLAN OF STUDY

The DPT Program requires students to complete 104 semester hours of graduate credit. A summary of the required courses is listed below.

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<tr>
<td>PTRS:5101 Intro to PT Practice I</td>
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<td>PTRS:6122 Psychosocial Aspects of Pt Care</td>
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<td>PTRS:5102 Principles of PT I</td>
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<td>PTRS:6134 PT Mgmt of Integumentary Syst</td>
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<td>PTRS:5205 Health Promotion &amp; Wellness</td>
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<td>PTRS:6145 Inter-professional Education II</td>
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<td>PTRS:6170 Management of People with P&amp;O Needs</td>
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<td>PTRS:6200 Pediatric PT</td>
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<td>PTRS:6202 Musculoskeletal Therapeutics II</td>
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<td>PTRS:6224 Activity Based Plasticity Healthcare</td>
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<td>First Semester (Fall)</td>
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<td>Fourth Semester (Spring)</td>
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<td>PTRS:5100 Professional Issues and Ethics</td>
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<td>PTRS:6121 PT Mgmt &amp; Admin II</td>
<td>1</td>
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<tr>
<td>PTRS:5103 Principles of PT II</td>
<td>2</td>
<td>PTRS:6133 Pain Mechanisms &amp; Treatment</td>
<td>2</td>
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<tr>
<td>PATH:8133 Intro to Human Pathology</td>
<td>4</td>
<td>PTRS:6172 Radiology/Imaging for PT</td>
<td>2</td>
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<tr>
<td>PTRS:5144 Inter-professional Education I</td>
<td>1</td>
<td>PTRS:6173 Differential Diagnosis in PT</td>
<td>2</td>
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<tr>
<td>PTRS:5209 Surface Anatomy</td>
<td>1</td>
<td>PTRS:6203 Musculoskeletal Therapeutics III</td>
<td>4</td>
</tr>
<tr>
<td>PTRS:5210 Kinesiology &amp; Pathomechanics</td>
<td>4</td>
<td>PTRS:6204 Progressive Functional Exercise</td>
<td>2</td>
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<tr>
<td>PTRS:5235 Case Based Learning I</td>
<td>1</td>
<td>PTRS:6225 Neuromuscular Therapeutics</td>
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<tr>
<td>PTRS:5790 Integrated Clinical Educ in PT I</td>
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<tr>
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<tr>
<td>Second Semester (Spring)</td>
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<td></td>
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<tr>
<td>ACB:5131 Functional Neuroanatomy</td>
<td>4</td>
<td>Summer Session</td>
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</tr>
<tr>
<td>PTRS:5201 Musculoskeletal Therapeutics I</td>
<td>3</td>
<td>PTRS:6794 Terminal Clinical Educ in PT I</td>
<td>4</td>
</tr>
<tr>
<td>PTRS:5206 Cardiopulmonary Therapeutics</td>
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<td></td>
<td></td>
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<tr>
<td>PTRS:5215 Applied Clinical Medicine</td>
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<td>Fifth Semester (Fall)</td>
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</tr>
<tr>
<td>PTRS:5236 Case Based Learning II</td>
<td>1</td>
<td>PTRS:6795 Terminal Clinical Educ in PT II</td>
<td>4</td>
</tr>
<tr>
<td>PTRS:5791 Integrated Clinical Educ in PT II</td>
<td>1</td>
<td>PTRS:6796 Terminal Clinical Educ in PT III</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>16</td>
<td>PTRS:6252 Critical Inquiry in PT II</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>9</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Summer Session</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PTRS:6120 PT Mgmt &amp; Admin I</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PTRS:6143 Selected Topics in PT Practice</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PTRS:6176 Pharmacology for PT</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PTRS:6793 Integrated Clinical Educ in PT III</td>
<td>3</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total: 104</td>
<td></td>
</tr>
</tbody>
</table>
### CLINICAL EDUCATION SCHEDULE

#### First Year – Fall Semester

**PTRS:5790 Integrated Clinical Education in Physical Therapy I – 1 s.h.**

**Time:** One day every other week for each student (30-40 hours for each student). Some clinics will be a full day experience, while others will be a half-day experience.

**Place:** Local facilities within a 30 mile radius of the University of Iowa.

**Goals:**
1. To become familiar with a variety of settings in which physical therapists practice and the role(s) of the therapist through observation and discussion.
2. To observe a variety of patient examinations and treatments by an experienced physical therapist.
3. To practice patient handling skills such as transferring and positioning.
4. To assist a physical therapist in performing evaluation and treatment procedures within individuals capabilities with special emphasis on goniometry and manual muscle testing.
5. To begin to develop a familiarity with the patient medical record as it is pertinent to physical therapy.
6. To develop and expand skills in interpersonal relations and communication with patients.

**Relationship of Clinical Education Unit to the Curriculum:**
Curriculum is designed so that a) the student acquires skills in the basic sciences, b) begins to develop skills in basic physical therapy techniques, and c) becomes acquainted with information relative to ethical practice of physical therapy as well as the duties of other health personnel.

#### First Year – Spring Semester

**PTRS:5791 Integrated Clinical Education in Physical Therapy II – 1 s.h.**

**Time:** Two days per week every other week for each student (56 hours)

**Place:** Part-time clinicals are completed in local facilities within a 30 mile radius of the University of Iowa.

**Goals:**
1. To develop skill in the use of evaluation procedures learned in class during this and last semester.
2. To improve skills in the use of basic physical therapy techniques.
3. To correlate theory of physical therapy procedures to practice of selected physical therapy procedures.
4. To understand, appreciate and learn how to work with the unique problems of each patient.
5. To develop appropriate methods of communication with patients and their families, supervisors, and other health workers.

**Relationship of Clinical Education Unit to the Curriculum:**
Curriculum is designed so that the student a) continues to build on the didactic framework of the basic sciences foundation of the first semester, and b) employs the skills and knowledge acquired to actual clinical problems involving administration and clinical care.

#### Second Year – Summer Session

**PTRS:6793 Integrated Clinical Education in Physical Therapy III – 3 s.h.**

**Time:** 6 week full-time clinical experience (240 hours)

**Place:** Clinical experience centers with whom The University of Iowa has clinical education written agreements. Not restricted to the State of Iowa.

**Goals:**
This clinical experience is scheduled to be an experience with a focus on in-patient care in a general hospital, skilled nursing facility, or long term care center.

**Evaluation:**
The clinical instructor uses the APTA PT CPI Web to evaluate student performance.
Second Year – Spring Semester
PTRS:6792 Integrated Clinical Education in Physical Therapy IV – 1 s.h.

<table>
<thead>
<tr>
<th>Time:</th>
<th>Two weeks (full time for 2 consecutive weeks for each student) (80 hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Place:</td>
<td>Clinicals are completed in facilities located in Iowa.</td>
</tr>
</tbody>
</table>
| Goals: | 1. Develop and demonstrate competence in patient care, i.e., patient evaluation and treatment; program planning; implementing and charging, record keeping.  
2. Demonstrate appropriate professional behaviors and attitudes toward patients and staff. |

Relationship of Clinical Education Unit to the Curriculum:
1. Curriculum is designed so that the student a) strengthens the correlation between the basic sciences and physical therapy practice, b) learns to critically evaluate patients and design and implement treatment plans, and c) enhances skills in the application of techniques commonly employed in the practice of physical therapy.  
2. Prior to the start of the two week clinical, the clinical sites will be sent more specific objectives as to the competencies they might expect from the students.

Third Year – Summer and Fall
PTRS:6794 Terminal Clinical Education in Physical Therapy I – 4 s.h (Summer)  
PTRS:6795 Terminal Clinical Education in Physical Therapy II – 4 s.h. (Fall)  
PTRS:6796 Terminal Clinical Education in Physical Therapy III – 4 s.h. (Fall)

<table>
<thead>
<tr>
<th>Time:</th>
<th>27 weeks full-time divided into 3 different 9-week clinical experiences. (1080 hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Place:</td>
<td>Physical therapy settings in the United States with whom The University of Iowa has contracts. These are arranged by the education program's Clinical Education Coordinator with significant input from program faculty and students. The experiences begin in mid to late May and end in mid-December.</td>
</tr>
</tbody>
</table>
| Goals: | 1. Develop and demonstrate entry-level competence in patient care activities.  
2. Opportunity to develop special interest area in patient care.  
3. Exhibit appropriate professional conduct and represent the profession of physical therapy effectively.  
4. Demonstrate a commitment to continued learning. |
| Evaluation: | The clinical instructor uses the APTA PT CPI Web to evaluate student performance. |
|---------------------|---------------------|---------------------|
| **FACULTY ADVISOR: DARREN CASEY** | | |
| Kelly Geraghty | Jonny Arnold | Shari Huber |
| David Hagerty | Addison Bates | Chelsey Kramer |
| Caley Medinger | Taylor Brandenburg | Andrew Pirotta |
| Joshua Montague | Molly King | Ben Stecker |
| Kim Richards | Patrick Lewis | Susie Stralina |
| | | Sierra Turner |
| **FACULTY ADVISOR: STACEY DEJONG** | | |
| Sarah Briggs | Tina Converse | |
| Joel Gourley | Matt Hrvol | |
| Jacob LaFayette | Emily McKeever | |
| Brandilynne Schierland | Tony Naber | |
| Logan Thompson | Laura Rapp | |
| | | |
| **FACULTY ADVISOR: LAURA FREY LAW** | | |
| Katherine Blocker | AJ Crone | Lauren (Fleener) Saehler |
| Cora Claypool | Carmen Ertz | Taylor Helms |
| Jakob Hummel | David Holte | Nate Kleckner |
| Kirsten Maakestad | Abigail Jergenson | Brittany Treichler |
| Mary O’Connor | Nick Mergen | Dan Vogel |
| Andrew Timmer | Chelsea Moore | Abe Ward |
| | | |
| **FACULTY ADVISOR: RICHARD SHIELDS** | | |
| Birant Akbay | Katelyn Bakey | Kyle Bernard |
| Jenna Goar | Katherine Bird | Micah Hayek |
| Lindy Pins | Brent Corum | Katie Hoak |
| Quinlan Syfert | Erica Gerdes | Anna Mangan |
| Katrina Thomas | Justin Rumpza | Melony McDermott |
| Rachel Zhorne | Cody Walkup | Francis Nguyen |
| | | Reid Wilson |
| | | |
| **FACULTY ADVISOR: KATHLEEN SLUKA** | | |
| Eric Callahan | Dani (Aceto) Greiner | Henry Byl |
| Jordan Finch | Becca (Adams) Strabala | Krista Hannasch |
| Joel Ingram | Colleen Bouchard | Katie Jansa |
| Michael McMahon | Amanda Ulin | JJ Krutsinger |
| Lisa Otto | Drew Voss | Garrett McGrane |
| Abbie Wooten | | Michael Mueller |
| | | Leigha Yerk |
| | | |
| **FACULTY ADVISOR: GLENN WILLIAMS** | | |
| David Harper | Megan Albee | Paige Hersom |
| Timothy Mack | Amanda Clark | Kalais Kuhlmann |
| Michael Schinstock | Drew Gibson | Marty McDevitt |
| Ryan Tillma | Clare Goeken | Jenn Mier |
| Sarah Weber | Robert Hess | Samuel Walter |
| Lola White-Baer | Derek Klein | Colton Wilson |
| | | |
| **FACULTY ADVISOR: JOHN YACK** | | |
| Megan Fritz | Emily Ciha | Pat Alt |
| Logan Gushiken | Jared Gerber | Nicole Hayden |
| Ryan Kauffman | JD Pluim | Mackenzie Means |
| Brennan McNitt | Gerry Robles | Thomas Steffen |
| Emily Roberts | Jackie Wells | Jordan Washington |
| Emily Yanny | | |
PHYSICAL REHABILITATION SCIENCE – PhD DEGREE

The PhD program is designed to advance the student's ability to independently develop and carry out research projects that strive to establish the scientific basis for the prevention, evaluation, and treatment of impairments, functional limitations, or disability. The curriculum is sufficiently flexible to accommodate research needs that focus on basic, applied, or clinical studies in the rehabilitation sciences. At the completion of the program, graduates will be positioned to assume academic appointments that emphasize research, scholarship, and teaching.

PhD CURRICULUM INFORMATION

Objectives
On completion of the PhD program the student will:

1. Possess the theoretical and scientific knowledge to perform original research at the basic, applied, or clinical level leading to scientific presentations, peer-reviewed publications, and the potential to compete for extramural funding through scientific grant writing.
2. Possess a depth of knowledge in a physical rehabilitation specialty area as it relates to impairment, functional limitation, and disability.
3. Possess the theoretical and practical skills required to teach at the professional entry and advanced graduate levels within the academic community.

Plan of Study
The student is advised by a Program PhD faculty member in the area of specialization in which he or she is interested. The student should arrange a meeting with the advisor for the purpose of preparing a Preliminary Plan of Study during the first session enrolled (or within the first 9 s.h. of graduate study for part-time students). The Preliminary Plan of Study form is submitted to the Research & Development Committee for review with recommendations to the Department Chair for approval. A formal Graduate College Plan of Study accompanies the departmental request to the Graduate College for permission to conduct the Comprehensive Examination. The formal Plan is the responsibility of the student working together with his or her advisor. The Plan will provide a listing of all graduate courses taken that apply toward the degree and a listing of courses in progress or to be completed after the Comprehensive Examination.

The PhD Preliminary Plan of Study form can be found on the Department webpage. The form details all of the required coursework for the PhD degree, grouped into Core Content, Research Content, and Specialty Content. Core content is designed to provide broad knowledge and skills required for a career in academic research and teaching in physical rehabilitation science. Research content provides the opportunity for in-depth study within a defined area of research focus. Specialty content provides specific background knowledge in a particular area of science or scientific investigation. Therefore the specialty content will vary considerably across students. Twelve semester hours of thesis research and a written dissertation with an oral examination serve as the culminating doctoral graduate study experience.
Core Content Requirements:
19 to 24 semester hours must be taken from the following core courses.

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRAD:7604</td>
<td>Principles of Scholarly Integrity</td>
<td>1 sh</td>
</tr>
<tr>
<td>PTRS:7812</td>
<td>Biomedical Instrumentation and Measurement</td>
<td>3 sh</td>
</tr>
<tr>
<td>BIOS:5110</td>
<td>Introduction to Biostatistics</td>
<td>3 sh</td>
</tr>
<tr>
<td>OR STAT:4143</td>
<td>Intro to Statistical Methods</td>
<td>3 sh</td>
</tr>
<tr>
<td>BIOS:5120</td>
<td>Design &amp; Analysis in Biomedical Science</td>
<td>3 sh</td>
</tr>
<tr>
<td>OR STAT:6513</td>
<td>Intermediate Statistical Methods</td>
<td>4 sh</td>
</tr>
<tr>
<td>PTRS:7820</td>
<td>Seminar in Rehabilitation Science</td>
<td>1 sh*</td>
</tr>
<tr>
<td>PTRS:7826</td>
<td>Scientific Writing in Rehabilitation Science</td>
<td>3 sh</td>
</tr>
<tr>
<td>PTRS:7900</td>
<td>Rehabilitation Research Capstone Project</td>
<td>2-4 sh**</td>
</tr>
<tr>
<td>PSQF:7385</td>
<td>Teaching &amp; Learning in Higher Education</td>
<td>3 sh</td>
</tr>
<tr>
<td>PTRS:7880</td>
<td>Teaching Practicum</td>
<td>1 sh</td>
</tr>
</tbody>
</table>

Total Semester Hours (sh) for Core Content Requirements 19-24 sh

* Must be taken for credit at least two semesters for 2 sh credit.

** Required for all students entering with a bachelor's level education. Recommended but not required for students entering with a master's or doctoral level education.

Research Content Requirements:
24 or more semester hours must be taken from the following research courses.

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTRS:7884</td>
<td>Practicum in Research</td>
<td>sh arr</td>
</tr>
<tr>
<td>PTRS:7930</td>
<td>Critical Thinking in Neuro-Mechanical Systems</td>
<td>sh arr</td>
</tr>
<tr>
<td>PTRS:7931</td>
<td>Critical Thinking in Pain</td>
<td>sh arr</td>
</tr>
<tr>
<td>PTRS:7932</td>
<td>Critical Thinking in Biomechanics</td>
<td>sh arr</td>
</tr>
<tr>
<td>PTRS:7933</td>
<td>Critical Thinking in Movement Control/Human Perf</td>
<td>sh arr</td>
</tr>
<tr>
<td>PTRS:7934</td>
<td>Critical Thinking in Neuroplasticity</td>
<td>sh arr</td>
</tr>
<tr>
<td>PTRS:7935</td>
<td>Critical Thinking in Sports Medicine</td>
<td>sh arr</td>
</tr>
<tr>
<td>PTRS:7936</td>
<td>Critical Thinking in Cardiovascular Physiology</td>
<td>sh arr</td>
</tr>
<tr>
<td>PTRS:7927</td>
<td>Research in Rehabilitation Science</td>
<td>sh arr</td>
</tr>
<tr>
<td>PTRS:7927</td>
<td>Research in Rehabilitation Science</td>
<td>sh arr</td>
</tr>
<tr>
<td>PTRS:7895</td>
<td>Advanced Seminar in Rehabilitation Science</td>
<td>3 sh</td>
</tr>
<tr>
<td></td>
<td>(taken in preparation for the Comprehensive Examination)</td>
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<tr>
<td>PTRS:7990</td>
<td>Thesis in Rehabilitation Science</td>
<td>12 sh</td>
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<td></td>
<td>(taken in preparation for the PhD dissertation)</td>
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</table>

Total Semester Hours for Research Content Requirements ≥24 sh

Special Content Requirements:
Nine (9) or more semester hours must be taken within the student’s scientific specialty area. A list of possible course options provided on the Preliminary Plan of Study form, but other courses deemed more suitable to the student’s background knowledge and interest area will be considered.

<table>
<thead>
<tr>
<th>Hours</th>
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<tbody>
<tr>
<td>Total Semester Hours for Specialty Content Requirements ≥9 sh</td>
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Summary:

<table>
<thead>
<tr>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Core Content Hours 19-24</td>
</tr>
<tr>
<td>Research Content Hours ≥24</td>
</tr>
<tr>
<td>Specialty Content Hours ≥9</td>
</tr>
<tr>
<td>Total Required Hours 72</td>
</tr>
</tbody>
</table>
Credits beyond the 52-57 specified within the Core, Research, and Specialty Content areas may be earned by taking additional credits in the Research and/or Specialty Content areas. Transfer of graduate credits from other programs will also be considered. Courses taken ten or more years prior to the doctoral Comprehensive Examination must be evaluated by the Department in order to determine the possible use of these credit hours within the student's Plan of Study. The Department, in turn, must send a letter of petition to the Graduate College, requesting the use of any or all of these credits toward the fulfillment of degree requirements.

**Comprehensive Examination**

To be authorized by the Dean of the Graduate College to take the Comprehensive Examination, the student must:

1. file a formal Plan of Study with the Graduate College,
2. have completed all specialization and related course requirements,
3. have completed all core course requirements, except PhD thesis enrollments, and
4. have a cumulative graduate GPA at this University of not less than 3.00.

This examination, administered only on campus, is intended to be an inclusive evaluation of the student’s mastery of the major and related fields of study, including the tools of research in which competence has been certified. The Comprehensive Examination is not a deferred qualifying examination. It is intended to evaluate a student’s mastery of the subject at or near the end of the student’s formal preparation and prior to the completion of the dissertation. The Comprehensive Examination and the Doctoral Final Examination, which is concerned chiefly with defense of the dissertation and related subjects, are the two principal examinations for the PhD doctoral degree.

**Purposes of the Physical Rehabilitation Science Comprehensive Examination**

1. To determine if the student can demonstrate an understanding of and the ability to integrate information in a comprehensive fashion and apply the appropriate scientific and/or educational principles acquired through relevant course work
2. To determine if the student is knowledgeable about the classic and recent literature and body of knowledge (theories and models) in the areas of his or her expertise
3. To determine if the student has the ability to use the information in items 1 and 2 above to demonstrate critical thinking, i.e., the ability to interpret, critique, and apply previous results to current problems, and to demonstrate an understanding of sound research design
4. To ascertain the creativity of the student, i.e. the ability to identify problems and to propose appropriate solutions based on current technology
5. To determine if the student is capable of developing a well-grounded experimental protocol under ideal conditions (no budget constraints, equipment, subjects)
6. To serve as an educational experience

**Comprehensive Examination Committee**

The Comprehensive Examination Committee will consist of a minimum of five faculty. At least four of the members must be tenure-track faculty, and at least two must be faculty members in the student's area of specialization. Also, at least two committee members must be faculty from the Department of Physical Therapy & Rehabilitation Science and at least one tenure-track faculty member must be from another department. The Committee will be nominated by the student's academic advisor in consultation with the student.
Comprehensive Examination Schedule
The student typically sits for the Comprehensive Examination after completing all required course work (normally after ~60 s.h.), usually after the completion of the sixth semester (unless a part-time student). The student must be registered in the Graduate College at the time of the Comprehensive Examination, which must be satisfactorily completed no later than the session prior to the session of graduation.

The candidate must complete all work required for the PhD degree (including the Doctoral Final Examination) no later than five years after passing the Comprehensive Examination. Failure to meet this deadline will result in a re-examination, i.e. the candidate must retake and pass the Comprehensive Examination. After successful completion of the Comprehensive Examination, the candidate is required to enroll in 101:301--Thesis in Rehabilitation Science during the next regular semester. Twelve semester hours of Thesis in Rehabilitation Science must be completed prior to graduation. The candidate is required to register each semester after passing the Comprehensive Examination until the degree is awarded (see GCM for further details).

Comprehensive Examination Format
The student will submit to the Examination Committee two abstracts of research proposals, each of which needs to be no more than two single-spaced pages. The research abstracts must contain some original ideas, approaches, and interpretations of contemporary literature. The ideas may be indirectly associated with research programs of the faculty. The student is not to consult or receive advice from the faculty regarding research abstracts as they constitute an examination and must, similar to any other examination procedure, represent the quality of work the student is capable of preparing. The faculty will be given the name of any student who is preparing such research projects in order to avoid giving unwarranted advice.

In a convened meeting of the Comprehensive Examination Committee, both abstracts will be reviewed. If both abstracts are judged by the Committee to be of satisfactory quality, one abstract will be selected for the student to expand into a written research proposal similar to a standard NIH R01 Project Grant. The following guidelines must be used when formatting the research proposal:

1. Prepare the proposal using Arial, Helvetica, Palatino Linotype, or Georgia typeface with a font size of 11 point.
2. The proposal should have at least one-half inch margins (top, bottom, left, and right) for all pages and typed in a single space format.
3. The proposal should include the following sections:
   A. Specific Aims [1 page],
   B. Research Strategy [15 pages] which should be comprised of the following sections:
      a. Background
      b. Significance [4 to 5 pages should be allocated for the Background and Significance sections]
      c. Innovation
      d. Approach (include rationale, methodology, statistical analyses, expected results and interpretation, and potential problems and alternative strategies for each proposed aim) [up to 10 pages allocated for the Innovation and Approach sections]
   C. References [no page limit]

The student may have a maximum of six weeks to accomplish this task. A minimum of one week after the student submits the research proposal; a formal meeting of the Comprehensive Examination Committee will be convened at which the student will orally defend the research proposal.
If both abstracts submitted by the student are judged unacceptable by the Committee, the student will receive a failure for the Comprehensive Examination. If the Committee should allow a second sitting of the examination, two different research abstracts must be submitted. After having failed the abstract component of the comprehensive examination once, the student may consult with the appropriate faculty members prior to submitting two new research abstracts. Such new abstracts may not be submitted within the same semester. If both of the new abstracts are unacceptable, the student will have failed the Comprehensive Examination for the second time and will not be allowed to continue in the PhD Program.

If on the first submission of the two research abstracts one abstract is judged unsatisfactory, the student will be given one opportunity to revise and resubmit the failed abstract without a failure being recorded. If the resubmission of the unsatisfactory abstract is judged unacceptable a second time, this will constitute the first failure of the comprehensive examination. As a result, the conditions cited above for the first failure become effective.

Guidelines for the preparation of Comprehensive Examination materials:
The research proposal abstracts must each meet the following minimum standards:
1. Contains a statement of the rationale for the proposed research
2. Contains an explicit statement of the purpose of the research
3. Describes the basic methodology to be utilized, including the research design and statistical analysis
4. Conforms to acceptable standards of writing and grammar

The written research proposal must meet the following minimum standards:
1. Clearly states the relevance and purpose of the research proposal
2. Contains an appropriate review of literature as relates to the proposed research
3. Demonstrates an appropriate methodology to resolve the stated research problem
4. Addresses the significance of the research; indicates the appropriateness of conclusions; and states plausible interpretations from any predicted results

The oral defense of the research proposal must demonstrate the following minimum standards:
1. Presents and defends the written research proposal clearly
2. Clarifies and qualifies any ambiguous statements or concepts presented in the written proposal
3. Discusses the feasibility of the proposed research and recognizes alternative experimental approaches
4. Adequately defends assumptions made in the proposal
5. Justifies the proposed statistical analyses
6. Projects future directions for the proposed research
7. Responds effectively to questions related to the general topic of the proposal
8. Adequately answers any question which may be raised concerning general knowledge in the discipline

Instructions for Preparing Requests for the Doctoral Comprehensive Exam
After the two abstracts have been approved, the student should notify the Department office and provide to the office the following information:
1. Request for Doctoral Comprehensive Examination form (naming the committee chair and other members, and their academic ranks and home departments),
2. the proposed date of the Comprehensive Examination,
3. the formal Plan of Study,
4. current registration, and
5. current transcript.

These documents must be provided well in advance, so that the appropriate materials can be prepared and submitted to the Graduate College at least two weeks prior to the Comprehensive Examination.

Evaluation of the Comprehensive Examination
The Comprehensive Examination will be evaluated by a convened meeting of the Comprehensive Examination Committee. Each committee member will sign the Doctoral Comprehensive Examination Report as “Satisfactory”, “Reservations”, or “Unsatisfactory”. The completed examination report will be submitted to the Graduate College office within 14 days after the completion of the examination. If more than one committee member judges the Comprehensive Examination (inclusive of the two research abstracts, the written research proposal, and the oral defense of the proposal) as “Unsatisfactory”, the Comprehensive Examination is reported as unsatisfactory (failure).

In the case of a failed Comprehensive Examination, the student may, in accordance with the Manual of Rules and Regulations of the Graduate College, request a reexamination not sooner than four months after completion of the first Examination. Permission to repeat the Examination is at the discretion of the Examination Committee. If a student is not allowed to retake an Examination which is judged unsatisfactory, then the student is dismissed from the Program. If the student is allowed to retake an Examination which is judged unsatisfactory, then the student must begin the entire process over by submitting two new abstracts.

A vote of "Reservations" is only used when a faculty member feels that the deficiencies displayed by the student were modest, and can be readily rectified. In the event of a report with two or more votes of "Reservations", the actions required of the student by the Committee that are necessary to correct the deficiencies are recorded and submitted to the Graduate College with the Examination Report form. Copies of the written statement of necessary actions are kept by the student, the Chair of the Examination Committee, and Program administration. The statement must specify the time allowed for completion of the aforementioned actions. If the student completes the required actions to the satisfaction and approval of the Examination Committee and in the specified period of time, the Chair of the Examination Committee will send a written report to the Graduate College and a carbon copy to the Department Head, indicating the date for which the Comprehensive Examination Committee considers the actions to have been satisfied. Upon approval of the Dean of the Graduate College, the Comprehensive Examination will be recorded as "Satisfactory" as of that date. If the actions are not satisfied on time, or if the actions are not of sufficient quality, the Chair of the Examination Committee will send a written report to the Graduate College indicating that fact. Upon approval of the Dean of the Graduate College, the Comprehensive Examination will be recorded as "Unsatisfactory" as of that date. The student will not be admitted to the dissertation phase and will not be permitted to sit for the Doctoral Dissertation Final Examination until a grade of "Satisfactory" has been recorded for the Comprehensive Examination.

PhD Dissertation in Physical Rehabilitation Science

Purpose of the Doctoral Dissertation and Final Examination
The purpose of the Doctoral Dissertation and the Final Examination is to determine the ability of the student to demonstrate all facets related to the investigative process: formulation of a problem, search and analysis of literature, procedure for collecting data, analysis of data, and organization of the dissertation proposal, the final written dissertation, and oral defense of the dissertation.
Doctoral Dissertation Committee / Final Examination Committee

The Doctoral Dissertation Committee will consist of a minimum of five faculty. At least four of the members must be tenure-track faculty, and at least two must be faculty members in the student’s area of specialization. Also, at least two committee members must be faculty from the Department of Physical Therapy & Rehabilitation Science and at least one tenure-track faculty member must be from another department. The Committee will be nominated by the candidate’s academic advisor in consultation with the candidate, and must be approved by the Department Head and the Dean of the Graduate College. The Dissertation Committee also serves as the Final Examination Committee.

Ultimate Responsibility for the Doctoral Dissertation

Although the Doctoral Dissertation Chair and Committee give the candidate such advice and guidance as they deem appropriate, the responsibility for the scholarship evidenced by the dissertation lies with the candidate. A dissertation that does not show a high level of scholarship will not be accepted by the Committee at the time of the Final Examination.

Doctoral Dissertation Schedule

After successful completion of the Comprehensive Examination, the candidate is required to enroll in the course “PTRS:7990--Thesis in Rehabilitation Science” during the next regular semester. A formal proposal meeting is scheduled by the candidate with his or her Doctoral Dissertation Committee (which may be different than the Comprehensive Examination Committee), typically within 12 months of passing the Comprehensive Examination.

The Final Examination may not be held until the next session after passing the Comprehensive Examination nor until the dissertation is accepted for first deposit by the Graduate College. The candidate must complete all work required for the PhD degree (including the Final Examination) no later than five years after passing the Comprehensive Examination. Failure to meet this deadline will result in a reexamination, i.e. the candidate must retake and pass the Comprehensive Examination.

The candidate is required to register each semester after passing the Comprehensive Examination until the degree is awarded. No registration for the summer session is necessary, except in the case when the candidate will earn his or her degree at the end of the summer session. In order to maintain continuous registration, the candidate may register for required and/or elective courses, research, and thesis hours to complete the Plan of Study or Doctoral Continuous Registration (DCR). DCR requires a 2 s.h. tuition/fee payment. The DFR may be repeated if the degree requirements are not completed in this session.

Doctoral Dissertation Format

The doctoral dissertation summarizes the scientific skills and knowledge acquired by the candidate and the results from original research performed by the candidate at the basic, applied, or clinical level.

During the proposal phase, the candidate develops and produces a written dissertation research proposal. At the proposal meeting, the candidate orally defends the written dissertation proposal, including the studies planned as part of the final dissertation. At minimum, the proposal should include Introduction and Methods sections or preliminary chapters of the dissertation. It is recommended that the proposal contain a Specific Aims page.

During the dissertation phase, the candidate completes the research developed during the proposal phase, creates the complete, final written dissertation document and orally defends the dissertation.
The dissertation typically follows one of two formats: (1) five chapters arranged as “Introduction”, “Literature Review”, “Methods”, “Results”, and “Discussion” or (2) a variable number of chapters arranged according to manuscripts describing separate studies; i.e., “Introduction”, “Study 1”, “Study 2”, …, “Study N”, “Discussion”. The dissertation must meet the approval of the Graduate College and the Doctoral Dissertation Committee. It is recommended that the dissertation be copyrighted. The dissertation phase culminates in the Final Examination. The Final Examination for a PhD candidate consists of an oral examination over the dissertation and whatever related topics the Final Examination Committee deems appropriate. This examination should include: (1) a critical inquiry into the purposes, methods, and results of the investigations—not a mere recapitulation of the procedures followed—and (2) intensive questioning on areas of knowledge constituting the immediate context of the investigation. Final Examinations for the doctorate are open to the public. Members of the faculty of the Graduate College are especially invited to attend and, subject to the approval of the Dissertation Chair, to participate in the Examination.

Instructions for Preparing Required Dissertation Materials
The Doctoral Dissertation and Final Examination are administered in accordance with Graduate College regulations and deadlines. It is the responsibility of the candidate to file with the Graduate College and Department office the necessary written applications before the published deadlines. Candidates should carefully review the published regulations of the GCM for more details.

After the proposal meeting with the Doctoral Dissertation Committee, the candidate must:
1. file an Application for Graduate College Degree by the published deadline (see GCM for further details), and
2. at the same time, place on record in the Department office the intention to graduate.

Upon receipt of the Application, the Department Head will:
1. verify that the candidate has fulfilled all requirements listed on the formal plan of study filed with the Graduate College at the time the comprehensive examination was taken,
2. request the permission of the Dean of the Graduate College to administer the Final Examination, and
3. recommend faculty for the Doctoral Final Examination Committee.

With the approval of the Dean, the Doctoral Final Examination may be administered as scheduled. If at any time the candidate is unable to meet a Graduate College deadline, the Department office must be notified and the Degree Application canceled. A new application must be submitted during the new session in which the candidate plans to defend.

In addition, prior to the indicated Graduate College deadline in the session in which the degree is to be conferred and at least three weeks in advance of the Final Examination date, the candidate should notify the Program office and provide to the office the following information:
1. Request for Final Examination form (naming the Final Examination Committee Chair and other committee members, and their academic ranks and home departments),
2. the proposed date, time and location of the Final Examination,
3. the Plan of Study form, or, if appropriate, a Change in Plan of Study form, and
4. the title of the dissertation.
First deposit of the dissertation: The candidate's dissertation, complete and in final form, must be presented in ETD (electronic thesis/dissertation) format at the office of the Graduate College by the first-deposit deadline date in the session in which the degree is to be conferred. Dissertations must also be made available to all members of the Doctoral Final Examination Committee no later than two weeks before the date of the Examination.

Final deposit of the dissertation: The final deposit of the approved ETD must be received by the office of the Graduate College by the appropriate deadline date in the candidate's graduation semester. The final deposit can be no later than the end of the semester (summers excluded) following the session in which the Doctoral Final Examination is passed. Failure to meet this deadline will require reexamination of the candidate. Regulations regarding preparation of the dissertation copy shall be promulgated by the Dean of the Graduate College. An external abstract of the dissertation, not to exceed two, double-spaced pages (text and approval lines), is to be deposited with the dissertation. The abstract must be approved and signed by the dissertation advisor. Approved ETDs will be forwarded to ProQuest for microfilming and digital archiving; the doctoral abstracts will be published in Dissertation Abstracts International. The PDF format of all electronic submissions will be forwarded by ProQuest to The University of Iowa Libraries, where they will be catalogued and made available for public use.

Failure to submit the first or final deposits of the dissertation by the deadline dates established by the Graduate College will result in the postponement of graduation to a future session. The candidate should carefully review the Graduate College web site for detailed submission and formatting requirements.

The Department requires that the candidate also:
1. make any corrections or changes required by the Dissertation Chair, the Examination Committee, or the Graduate College by the appropriate Graduate College deadline for final deposit of the dissertation,
2. provide a bound copy of the dissertation, including the abstract, to the Program dissertation library, and
3. submit a draft of the manuscript(s) for publication from the dissertation to the candidate’s advisor prior to graduation.

Evaluation of the Dissertation and Doctoral Final Examination
A Report of the Doctoral Final Examination is due in the Graduate College office not later than 48 hours after the Examination. In the report, the Examination (including the written dissertation and the oral defense) will be evaluated as “Satisfactory” or “Unsatisfactory”. Two or more “Unsatisfactory” votes will make the Committee report unsatisfactory. In the case of an unsatisfactory report, the candidate may not sit for reexamination until the next session. The Final Examination may be repeated only once and only if permission by the Program is received. The candidate should carefully review the published regulations of the Graduate College for more details.

Changes in Requirements
Should the requirements for a PhD change after a student has filed a preliminary plan of study with the Department, but before the student receives the degree, the student may choose to graduate under either the original requirements listed in the preliminary plan of study or the new requirements created by the change.
**Discontinuation of PhD Plan of Study**

If a student is unable to continue with the PhD Plan of Study, the possibility exists for a non-thesis Master of Arts degree in Physical Therapy to be awarded. Following appropriate consultation with the academic advisor, the student may apply for the non-thesis MA degree which would require completion of the following courses:

- **GRAD:7604** Principles of Scholarly Integrity 1 sh
- **PTRS:7812** Biomedical Instrumentation and Measurement 3 sh
- **BIOS:5110** Introduction to Biostatistics 3 sh
- **OR STAT:4143** Intro to Statistical Methods 3 sh
- **BIOS:5120** Design & Analysis in Biomedical Science 3 sh
- **OR STAT:6513** Intermediate Statistical Methods 4 sh
- **PTRS:7820** Seminar in Rehabilitation Science 1 sh x 2 sem
- **PTRS:7900** Rehabilitation Research Capstone Project 2-4 sh

Electives: Additional courses to obtain the required total 30-31 sh. Electives may come from the Core, Research or Specialty Content areas, but must be approved by the advisor and the Department Research & Development Committee.

**Total Semester Hours (sh) for non-thesis MA degree requirements** 30-31 sh

**GUIDELINES AND POLICIES RELATED TO STUDENTS**

**Guidelines for Student Progress**

A full-time student should generally complete the doctoral degree in five years or less. The expected completion date for the degree is commensurately lengthened by the extent of the student’s part-time pursuit of the degree.

The Preliminary Plan of Study must be approved within the first nine semester hours of graduate study and must be filed with the Department’s Research & Development Committee. The Comprehensive Examination is taken at the completion of all required course work, normally after ~60 semester hours, but no later than at completion of the sixth semester. A full-time student should generally successfully complete the Comprehensive Examination within three years of his/her matriculation. Dissertation work can begin any time following satisfactorily completing the Comprehensive Examination.

**Financial Support**

The Department of Physical Therapy & Rehabilitation Science seeks to provide financial support for full-time PhD students. Support is most often provided in the form of an assistantship, for which the student is given specific research and/or teaching responsibilities. A one-half time (50%) graduate assistantship requires 20 hours of research and/or teaching responsibilities per week by the student; a one-fourth time (25%) assistantship requires 10 hours per week. Support at 25% or greater qualifies the graduate student for resident tuition and fees and a partial tuition scholarship. For details, see the website http://www.grad.uiowa.edu/graduate-student-stipends-and-benefits the specific responsibilities associated with graduate assistantships depend on the needs of the Department and the source of funding and are determined in conjunction with the faculty advisor. Supervision of the graduate assistant is provided by the faculty advisor. Graduate research assistantship support may be available, at the discretion and availability of each advisor. If no assistantship support is available
through the Department, the student may be able to obtain a graduate assistantship elsewhere in the University. To view recent announcements, see the website http://www.grad.uiowa.edu/graduate-assistant-job-postings. Assistants are paid on a monthly basis. Terms and conditions of employment for graduate assistant employees are set forth in an agreement between the Iowa State Board of Regents and the United Electrical Radio and Machine Workers of America, Local 896 (COGS).

The majority of the appointments and reappointments of graduate assistantships are considered in the spring or summer of each year. Considerations for appointment and reappointment are the faculty evaluation of students’ progress toward the degree, the quality and quantity of service rendered as a graduate assistant, seniority short of the time expected to complete the degree, and graduate assistant capabilities with respect to the job requirements of the funding sources. Recommendations for appointment involving University funds are initiated by the Research & Development Committee and then taken under advisement by the Department Head who officially makes the appointments.

The Department strives to provide support for 12-month appointments. The practice, however, is to provide nine-month appointments corresponding to the two academic semesters. The three-month summer extension is negotiated in the spring based on needs and availability of funds. Financial support for graduate assistantships is usually derived from a variety of sources. Hence, students’ responsibilities in research and teaching are commensurate with the source of funding.

The guidelines for length of financial support by the Department of Physical Therapy & Rehabilitation Science are the same as the length of time expected for the student to complete the degree. Appointments associated with externally funded projects are the responsibility of the supervising faculty member.

**Research, Supplies, Services and Ownership of Equipment**

The Department of Physical Therapy & Rehabilitation Science and its faculty have a responsibility to provide financial support and technical services for graduate student research. The student is encouraged to pursue research projects which are related to the faculty advisor’s primary lines of investigation. The student may request program support for selected areas of need. With the advisor’s approval, the student may make requests for funds related to his or her research, scientific conference registration fees, and/or travel expenses through the Research & Development Committee. Highest priority will be given to the student who is presenting research findings at a scientific conference. In the written request, the student should also document attempts to secure funding through other mechanisms (on or off campus) and explain ways he or she will keep expenses to a minimum (e.g., sharing a room; early-bird registration, etc.). These factors will also be weighed in the decision for funding. The upper request limit is $500 per student per year. The final decision on funding rests with the Department Head.

The student may be expected to use his or her personal funds for expenses associated with development or completions of the dissertation. The exception is the cost of providing for the Doctoral Dissertation Committee copies of the dissertation proposal and the final dissertation. The student is further expected to provide one hardbound copy each of the dissertation, including the Abstract, for the Department library and the dissertation advisor. If any Committee member desires a final copy of the dissertation, the student is expected to provide it. If a student needs to use personal funds to purchase University services, equipment, or supplies and desires reimbursement, a request should be made to the Department Chair. Financial credit will not be provided by the Department.
In the case that only Department funds are used for the design, fabrication and/or purchase of equipment, the Department shall retain ownership. However, in the case that joint (i.e., Department and student) funds are used to purchase equipment, it is recommended that the student may retain ownership of commercially available equipment purchased by the student and the Department retain ownership of any custom fabricated equipment purchased jointly by the student and the Department. New equipment funded by program-sponsored grants or fellowships will be considered to be owned by the Department. In the case that only student funds are used for the design, fabrication and/or purchase of equipment, the student shall retain ownership.
FACULTY HANDBOOK

Organizationally the department is located in the Carver College of Medicine and our educational degrees are awarded through the Graduate College. Policies and procedures can be located on the University of Iowa and the Carver College of Medicine’s websites.

The University of Iowa Faculty Handbook is available online at the following link: https://provost.uiowa.edu/faculty-handbook

FACULTY POLICIES AND PROCEDURES
The policies and procedures for faculty are available on the Carver College of Medicine’s website: http://www.medicine.uiowa.edu/facultyaffairs/policies/.

FACULTY PROMOTION AND TENURE
The Department of Physical Therapy and Rehabilitation Science follows the guidelines for the Carver College of Medicine for promotion and tenure. http://www.medicine.uiowa.edu/facultyaffairs/promotion/

FACULTY DEVELOPMENT
Faculty development is enhanced in the following ways:

- Faculty are reviewed by their peers and feedback provided.
- The University of Iowa Center for Teaching is utilized for providing teaching reviews/feedback.
- Faculty members including adjunct faculty who provide guest lectures are reviewed at the end of each semester by students using the Assessing the Classroom Environment (ACE) forms.
- New faculty are assigned a faculty mentor.
- Faculty and staff are evaluated by their peers annually utilizing a Professionalism-Citizenship Assessment which rates them on Honesty, Verbal, Teamwork, Respect, and Responsibility.

FACULTY DEFINITIONS

Adjunct Faculty – Key individuals from around the state who assist classroom and/or laboratory teaching responsibilities in such areas as acting as CI’s to our students, offer expertise in clinical skills assessment, and providing expertise in classroom lectures.

Associated Faculty – Those individuals who have classroom and/or laboratory teaching responsibilities in the curriculum and who are not core faculty or clinical education faculty. The associated faculty may include individuals with full-time appointments in the unit in which the professional program resides or in other units of the institution, but who have primary responsibilities in programs other than the professional program.

Clinical Education Coordinator – The core faculty members responsible for the planning, coordination, facilitation, administration, and monitoring of the clinical education component of the curriculum. The clinical education coordinators are the faculty members of record for the clinical education courses.

Clinical Education Faculty – The individuals engaged in providing the clinical education components of the curriculum, generally referred to as either Center Coordinators of Clinical Education (CCCEs) or Clinical Instructors (CIs). While the educational institution/program does not usually employ these
individuals, they do agree to certain standards of behavior through contractual arrangements for their services.

Core Faculty – Those individuals appointed to and employed primarily in the program including the program director, the director of clinical education and other faculty who report to the program director. The core faculty have the responsibility and authority to establish academic regulations and to design, implement, and evaluate the curriculum. The core faculty include physical therapists and may include others which expertise to meet specific curricular needs. The core faculty may hold tenured, tenure track, or non-tenure track positions. Members of the core faculty typically have full-time appointments, although some part-time faculty members may be included among the core faculty.

Program Director – The individual employed full-time by the institution, as a member of the core faculty, to serve as the professional physical therapist education program’s academic administrator.