DEPARTMENT OF PHYSICAL THERAPY

Doctor of Physical Therapy Program

CLINICAL EDUCATION HANDBOOK

2024 - 2025
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Purpose of the Clinical Education Handbook

The University of Florida Doctor of Physical Therapy Program Clinical Education Handbook serves to inform students and clinical faculty about the curriculum, rules, regulations, and policies governing and related to the clinical education component of the Doctor of Physical Therapy (UFDPT) at the University of Florida. It also serves to disseminate clear information and guidelines for use in decision-making. The information in this handbook is intended to provide each student, Site Coordinator of Clinical Education (SCCE), and Clinical Instructors (CI) with the knowledge of the expectations of UFDPT, including the expectation that all the clinical education policies will be upheld. The handbook is intended to supplement, not replace, the University of Florida DPT Student Handbook, or any clinical affiliate’s published policies/procedures. The student is expected to abide by the policies established by UFDPT, rules and policies of each clinical affiliate and the standards established by the physical therapy profession.

Questions related to the content of this manual should be directed to the Director of Clinical Education or the Program Director:

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Accreditation Statement

The Doctor of Physical Therapy Program (DPT) at the University of Florida is accredited by;
The Commission on Accreditation in Physical Therapy Education (CAPTE),
1111 North Fairfax Street,
Alexandria, Virginia 22314;
Telephone: 703-706-3245;
Email: accreditation@apta.org
Website: http://www.capteonline.org/

UF's DPT Program has been accredited since 1960. The next CAPTE on-site review is scheduled for 2024.

The Southern Association of Colleges and Schools (SACS) accredits the University of Florida and all its programs,
1866 Southern Lane
Decatur, GA. 30033
Telephone: 407-679-4500
Email: questions@sacscoc.org
Website: http://www.sacscoc.org/
Doctor of Physical Therapy Program

Mission

To educate physical therapists who embrace evidence-based practice, deliver compassionate care, embody professionalism, and lead by example in the profession and communities.

Vision

Develop physical therapist leaders who advance health and well-being in Florida, the nation, and the world.

Values

The Doctor of Physical Therapy program embraces the following values:
- Accountability
- Collaboration
- Excellence
- Inclusion, Diversity, Equity, and Access
- Integrity
- Respect
- Servant leadership
- Social responsibility

DPT Curriculum Overview

For a comprehensive overview of the UFDPT curriculum please visit the UFDPT website.

DPT Clinical Education

Clinical Education Philosophy:

Clinical education curriculum within the University of Florida’s DPT Program is an integral part of the educational process in that it provides the student with opportunities to integrate evolving clinical practice with basic science, physical therapy theories, and critical thinking. Clinical education experiences are designed to allow students to use acquired knowledge, attitudes, communication skills, psychomotor proficiencies, and problem-solving abilities to attain professional competency. Expectations of initial and subsequent experiences are structured to build on previous knowledge and performance.

Expected Outcome of Participation in Clinical Education Experiences:

Clinical education experiences provide the student with opportunities to practice and perform professional responsibilities with appropriate supervision, professional role modeling, and a variety of patients and learning encounters. Our expected outcome is that students will reach entry-level performance across domains of practice as measured using the Clinical Performance Instrument (CPI) in settings with patient populations of high, medium and low
medical complexity.

The grading criteria for each experience, using the Clinical Performance Instrument (CPI) identifies the necessary level of proficiency in skills to be attained by students on each full-time clinical education experience. The grading criteria are defined to allow students to work independently toward defined learning and performance outcomes, utilizing the opportunities available at that clinical education site. Competence as an entry-level therapist is defined as being effective, consistent, and safe while managing complex and noncomplex patients with guidance as necessary and is capable of maintaining a 100% full time entry level physical therapist caseload in a non-specialty setting. The skills required of an entry-level therapist involve the evaluation and management of patients across the lifespan, health and wellness spectrum and health care settings. Sites for achieving entry-level competence are selected and maintained to meet the needs of the students. Specialization in a specific practice area is neither an expectation nor a desired outcome of our entry-level education program.

Clinical Education Preparation and Progression

Preparation for clinical education includes successful completion of preliminary academic coursework and professional behavior. Academic and clinical education coursework must be successfully completed in sequence. Failure to complete an academic education course in sequence may cause a student to wait a full year before resuming the program. Failure to successfully complete a clinical education experience may result in the need to complete an additional clinical experience as a component of a remediation plan.

Professional behavior is critical for a successful transition from the classroom to the clinical setting. The faculty recognizes this by incorporating professional behavior development and evaluation into each academic course. All students must consistently demonstrate developmentally appropriate levels in the core areas of professional growth in the DPT Student Handbook and as indicated in the CPI no less than one level below the stated goal of the clinical experience that the student is entering. Failure to do so will prevent the student from advancing in the curriculum to the next clinical experience.

Professional behavioral performance concerns will be addressed by feedback from Professional Incident Report submissions, professionalism mentors, peers, faculty, clinical instructors, teaching assistants, and the Professional Development Committee when required. Students will use the Professional Behavior Assessment Tool to formally self-evaluate their professional behavior providing insight for reflection as they enter clinical education experiences.

The clinical education curriculum begins in the third semester with the first clinical education course. In this course, students participate in the matching process to determine clinical placement locations for ‘full-time’ clinical experiences they will attend in their second year. Students also begin preparatory content for entering the clinical setting, including understanding professional communication, behavioral expectations, and planning strategies for transitioning from an academic to a clinical setting. In the second clinical education course,
students are assigned to integrated clinical experiences called single-day visits. These visits are to local hospitals and outpatient clinics in an approximate 60-mile radius. These experiences provide students with an opportunity to begin to integrate the material they have learned to date in a real-world clinical setting. This exposure to clinical settings and the introduction to working with clinical instructors is intentional to assist the student in preparing for their full-time clinical experiences.

Students must achieve > 80% average score on all class assignments to achieve a passing score in Clinical Education I & II. Students who do not achieve this level of performance will receive a U or an E for the course, preventing the student from advancing in the curriculum.

Table of progression through the clinical education curriculum:

<table>
<thead>
<tr>
<th>Course</th>
<th>Timeframe</th>
<th>Broad Objectives*</th>
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| PHT 6860 Clinical Education I | 12 weeks 3rd semester Summer Year 1 | 1. Develop a working knowledge of the Exxat database and its use in securing information regarding clinical experiences.  
2. Demonstrate a knowledge of clinical education requirements and policies.  
3. Participate in the clinical education placement process for the first three full-time clinical experiences.  
4. Create financial planning strategies to effectively manage financial resources, ensuring optimal preparation for clinical experiences.  
5. Demonstrate insight into personal challenges and responsibilities for safe and effective clinical performance including affective and psychomotor skills. |
| PHT 6861 Clinical Education II | 16 weeks 4th semester Fall Year 2 | 1. Recognize individual differences of patients and health care providers that can impact successful outcomes and make viable recommendations to reduce limitations.  
2. Accept the importance of individual differences including values and cultural differences and display verbal and non-verbal behaviors that exemplify this acceptance.  
3. Provide rationale for various intervention strategies and projected outcomes on individual patient symptomology, diagnosis, indications, precautions, and contraindications as relevant to the various settings.  
4. Develop and provide rationale for patient prognosis and discharge plan.  
5. Demonstrate appropriate knowledge for the use of the Physical Therapist Clinical Performance Instrument (CPI version 3.0)  
6. Demonstrate competency in delivering CPR techniques through successful completion of CPR training with certification for healthcare providers.  
7. Apply a comprehensive range of clinical skills/techniques acquired to date in their educational program.  
8. Describe the advantages and limitations for a particular rehabilitation program and recommend |
alterations and/or modifications that may be necessitated by changing patient status.

<table>
<thead>
<tr>
<th>Course: PHT6811 Clinical Education III</th>
<th>Duration: 8 weeks 5th semester Spring Year 2 First full-time clinical experience</th>
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<tbody>
<tr>
<td>1. Synthesize cognitive, psychomotor, and affective domain skills to ensure safe and effective clinical practice, revealing a holistic approach to patient care across diverse clinical environments. These environments include patient populations with at least 50% high, intermediate, and low medical complexity as defined by the Clinical Education Team. CPI ratings of advanced beginner performance level.</td>
<td></td>
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Synthesize cognitive, psychomotor, and affective domain skills to ensure safe and effective clinical practice, revealing a holistic approach to patient care across diverse clinical environments. These environments include patient populations with at least 50% high, intermediate, and low medical complexity as defined by the Clinical Education Team. CPI ratings of intermediate performance level.

Synthesize cognitive, psychomotor, and affective domain skills to ensure safe and effective clinical practice, revealing a holistic approach to patient care across diverse clinical environments. These environments include patient populations with at least 50% high, intermediate, and low medical complexity as defined by the Clinical Education Team. CPI ratings of advanced intermediate performance level for generalist setting.

Synthesize cognitive, psychomotor, and affective domain skills to ensure safe and effective clinical practice, revealing a holistic approach to patient care across diverse clinical environments. These environments include patient populations with at least 50% high, intermediate, and low medical complexity as defined by the Clinical Education Team. CPI ratings of entry-level performance rating for generalist setting.

*A complete listing of objectives can be found in each course’s syllabus

Clinical Experience Placement Requirements:

Students should be prepared to accept all costs for transportation, lodging and food associated with all clinical experiences. Integrative clinical experiences (Single Day Visits) will be within a 60-mile radius of Gainesville. Students are placed in clinical facilities by the course faculty. Placements in full-time clinical experiences are determined primarily by computerized matching with input from students on their preferences and the Clinical Education Team’s support. There is no guarantee that the student will be placed in Gainesville, the surrounding area, or in any specific geographic location. Most clinical placements are outside of Gainesville, with 10-20% of those out of state. Students may be required to attend clinical placements out of state.

Each student, over the four, full-time clinical experiences, must have a variety of clinical experiences that incorporate clinical practice across the life span and continuum of care. Each student must complete a minimum of one full-time clinical experience in each of the following categories differentiated by medical complexity of the patient population:

- Category 1 (C1): Low medical management complexity, high function, and independence (outpatient neurological/orthopedic or sports facilities)
- Category 2 (C2) Moderate medical management complexity, moderate function, and independence (sub-acute/in-patient rehabilitation setting/skilled nursing facility), and
- Category 3 (C3) High medical management complexity, low function and independence: (acute care/ICU/transplant units)
These experiences reflect the student’s training across the spectrum of patient health conditions and life span. Thus, students have 3 category requirements that must be fulfilled but have 4 experiences in which to fulfill them. The order in which they are fulfilled does not matter. In the event there are outstanding circumstances (e.g., COVID-19), that preclude the availability of certain settings for safety reasons, the Clinical Education Team will attempt to expose students to the same patient populations within the available settings.

Students are typically not permitted to be placed in clinical experience sites in which there is an actual or potential conflict of interest. The most common include 1) a student has been employed or is well known by the staff, or 2) there are family members in employment in the areas in which the student will be practicing. Students must notify the Clinical Education Team immediately of any actual or perceived conflict of interest. The Clinical Education Team will investigate the situation and make recommendations which may result in the student’s placement being changed.

Through the use of patient logs, interviews with students and clinical instructors, and availability of on-site learning experiences, the Clinical Education Team works with the individual students and clinical sites to ensure learning experiences cross the lifespan, continuum of care, and a diversity of diagnoses. Clinical experiences will differ based on many conditions including patient volume, diagnosis, facility, physical environment and staffing. Clinical experiences should not be compared to each other for these reasons.

Not all students will be placed in geographic areas or in the clinical site of their preference. The Clinical Education Team works to optimize placements to support the student’s learning needs, respect the clinical sites’ patient care needs, and foster the relationship with the clinical site to support future UFDPT students’ learning requirements.

**Hardship Status for Clinical Experience:**

As noted in each student’s acceptance letter, all students should expect to be placed inside and/or outside of the commutable area of Gainesville for their clinical experiences. Students who encounter an unexpected change in their situation after admission to the UFDPT, may apply for hardship status for a clinical experience placement. Students must submit an email request to the DCE who will discuss these requests with the Clinical Education Team to determine hardship decisions. The letter of request must include the student’s name, timeframe of hardship request, geographic need for placement, and specific reason for the request (nature of the hardship), and if required a [DRC accommodations](#) request letter. The hardship request is due to the DCE via email no later than 1 week prior to the scheduled time for each clinical experience match or as indicated by the DCE in Clinical Education I course.

Hardship status allows students to list sites for matching in the geographic location of need but does not guarantee a specific site placement. Due to the time-sensitive nature of the clinical experience placement process, decisions made by the Clinical Education Team regarding hardship status are final. Students with concerns about these decisions may seek further guidance via the student appeals process in the student handbook but must understand that the matching process will proceed according to schedule. It should be noted that difficulties funding the cost of housing, transportation, and/or food are not considered examples of hardship as all students are subject to this consideration.
**Scheduling and Assignment of Students for Clinical Experiences:**

Students must refrain from attempting to secure or arrange their own clinical experience with clinical sites. Clinical experiences are scheduled 6-12 months prior to the date of the experience. Available clinical experience slots are recruited from contracted sites for the following calendar year in cooperation with a national date for all academic programs to request clinical site placements and require extensive contract negotiations between the site and UFDPT. Any student who bypasses the Clinical Education Team and the clinical experience placement process and contacts a clinical site directly to ask or work to understand if a placement is available or if a placement can be secured will be referred to the Professional Development Committee in violation of this policy. Students should contact clinical sites only on the written approval of the DCE/ADCE or following confirmation **procedures of clinical placement at the facility.** Students should also notify the Clinical Education Team if they become aware of other student peers engaging in this behavior.

Clinical education coursework provides the student with opportunities to practice and perform professional responsibilities with appropriate supervision, observe professional role modeling, and interact with a variety of patients during their clinical learning experiences. These experiences are predicated on clinical sites committed to the meeting the following criteria: 1) effective communication between clinical and academic faculty, 2) written agreements between the academic institution and clinical sites outlining responsibilities of each party, and 3) standardized education of clinical faculty by the clinical site. Clinical sites that demonstrate the criteria enter into an official agreement with the University. All efforts are made to keep consistent clinical sites that have demonstrated a long-term commitment to clinical education of student physical therapists and have consistently provided a commitment to clinical education for UFDPT students. New clinical sites are developed according to UFDPT needs for learning experiences and sufficient site numbers.

Once offers for student placements from clinical sites are secured, students submit their top preferences via an electronic program, EXXAT. A computerized matching system is utilized to obtain the best possible match of students with their preference list. The matching process progresses in a chronological fashion with monitoring and counseling by the Clinical Education Team to assure that students meet the UFDPT’s clinical experience requirements. While every effort is made to match a student with one of their choices, there are circumstances where this will not occur. In that situation, the Clinical Education Team will work to find a clinical experience that meets the educational needs of the student in a clinical site that has the capacity to accept a student during the specified time frame.

Student must contact the Site Coordinator of Clinical Education (SCCE) at the student’s assigned site via email through Exxat profiles, 30 days prior to the scheduled start date of the clinical experience unless the clinical sites request a different date. Students should confirm all site preclinical requirements including health information, mandatory training, background checks, etc. via communication directly with the site or as directed by the Clinical Education Team. Students must meet the site requirements within the timeframe identified by the site. Students who do not fulfill the site requirements by the stated time frame may be subject to a delay in completion of their clinical experiences which can delay graduation and will also be subjected to disciplinary action.
Students Requesting Accommodations

Students with a documented disability (registered with UF’s Disability Resource Center) must meet with the DCE/ADCE to discuss the needs specific to each clinical education course prior to matching. Students must have a Letter of Accommodation from the DRC that is submitted to the DCE/ADCE for each experience requiring accommodation prior to each matching process if the accommodation is known. Students must also provide written consent for the DCE to contact the SCCE to arrange for any requested accommodation. Students who are not requesting accommodation are encouraged to meet with the DCE/ADCE to discuss their situation in a good faith effort to avoid misunderstandings regarding the student’s abilities and needs. Students must provide their clinical site (SCCE and CI) with any letters of accommodation no less than one week prior to the start of the clinical experience to allow for accommodations to be considered and acted upon. Failure to provide this information will release the DCE/ADCE, SCCE, and/or CI from accommodating due to insufficient notice.

Reassignment of a confirmed clinical experience placement

Reassignment of student from a confirmed placement to a different clinical site is rare. Situations where this may occur is in the event a site cancels a student placement, military service, or medical leave. Site cancellations can occur for multiple reasons which are not under UFDPT’s control; therefore, students must be aware of the possible need for reassignment. In this event, the SCCE should contact the DCE as soon as possible to allow for alternate planning for the student. The Clinical Education Team will work to secure a clinical experience that will support the student’s learning needs and UFDPT requirements, respect the clinical sites’ patient care needs/schedule, and continue to foster the relationship with the clinical site for future UFDPT’s students. This placement may be in a different geographical location and/or setting than previously placed. Students should be prepared to be flexible in this situation to matriculate on schedule for a timely graduation. If there is a placement offer in the same geographical location that meets the requirement needs of the student, the Clinical Education Team will work to place the student there if the placement slot is still available.

If a student has concerns regarding a clinical site after they have started their experience, they are to notify their FOR to discuss the situation. To resolve most issues, students should first have a discussion with the SCCE and CI to work through any challenges. The FOR will become involved at different times based on the situation. If the student doesn’t feel safe, the FOR should become involved immediately and speak with the SCCE with possible removal of the student. Most situations will be able to be resolved through the student and SCCE and/or CI having a discussion. Rarely, would a student be reassigned to a different clinical site after they have started in a clinical experience.

If there is an unforeseen situation that arises that is outside of the control of the UFDPT, clinical placements may be impacted. The Clinical Education Team will work in accordance with Departmental and University guidance as the situation dictates. The completion goal for clinical education is to have student’s progress through the clinical curriculum in accordance with the UFDPT’s curricular plan. If this progression is in jeopardy for some or all students, the Clinical Education Team will work to optimize student advancement opportunities to the best of their ability while working to meet UFDPT outcomes. Graduation timelines may be impacted.
Termination of a clinical experience

In the event the UFDPT decides to terminate a clinical experience because student is not progressing as expected and is unable to meet the required performance level on the CPI as confirmed by the CI, the DCE/ADCE will meet with the SCCE/CI and the student as soon as possible to discuss the situation. If the situation is unable to be resolved, the DCE (or ADCE in consultation with the DCE) will make the determination to terminate the clinical experience. In the rare instance this occurs, the student may require remediation before further clinical experiences can be continued causing a delay in graduation. If remediation is not required, the Clinical Education Team will work to place the student in a different clinical site; this too may lead to a delay in graduation.

A student is not able to terminate their own clinical experience; that decision is made by the FOR in discussion with the SCCE and DCE. A student who terminates their clinical experience independent of the DCE/ADCE/FOR will receive a “U” for that experience and will be dismissed from the UFDPT.

A student who refuses to attend a clinical experience as per the UFDPT’s placement process will be removed from the process and will receive a “U” for the course and be referred to the PDC. The student may be eligible to enter the placement process the following year; thus, extending their graduation timeline.

Clinic Attire

All students are to be in clinic attire as defined by the specific clinic they are attending for their clinical experiences and single day visits. Students are required to wear their UF DPT GatorOne ID badge, or an ID badge provided by the clinical facility following on the policies of the clinical facility. Students who are participating in assigned projects in the clinic are to be in clinic attire. Students are asked to refrain from visits to the clinic unless there is a specific assignment there. Most clinicians wear business casual clothes (collared shirts & slacks). Clean, professional closed-toe & closed-heel shoes are required (no sandals). This policy should work together with the clinic’s policy.

No jewelry except a watch, small earrings, wedding ring or engagement ring may be worn when in clinic. No facial jewelry is allowed in the clinical setting unless it serves a religious purpose as they may be pulled on by patients with impaired cognition or small children. Fingernails should be short, and the use of artificial nails is strongly discouraged. As healthcare professionals, maintaining the highest standards of hygiene and patient safety is paramount. Artificial nails can harbor bacteria and pathogens, increasing the risk of infection transmission. Rings should be removed and secured in a pocket when handling patients as they may cause discomfort to the patient.

No excessive perfume, cologne, and other strong odors such as sweat or smoke can be distracting and potentially offensive. Even small amounts may be prohibited in the clinic to avoid causing irritation or discomfort to patients or others with allergies or sensitivities and to maintain a professional and distraction-free environment for everyone.
Medical and Legal Requirements

All students are required to meet the DPT immunization requirements for admission as noted on the website.

In addition to required immunizations, all students must show current proof of an updated annual tuberculosis screening prior to beginning of Clinical Education I. Prior to participation in full-time clinical experience all students must show proof of the following:

1) UF HIPAA Training
2) HIV/Bloodborne Pathogen Training
3) CPR/BLS Healthcare Provider certification
4) Health insurance including major medical (hospitalization)
5) Annual Tuberculosis screening
6) Hepatitis B
7) Varicella titer
8) Background Check
9) Tetanus/Tdap

Per individual clinical site requirements, students may be required to show proof of the following:

1) Additional background checks of varying levels and cost
2) Drug Screen
3) Finger printing
4) Additional vaccines for such conditions as Tetanus, Influenza, or COVID-19
5) Face mask fit testing
6) Other requirements as stated by the individual clinical site

Students are required to review clinical experience site documents such as the Clinical Site Information Form (CSIF) and posted reports from prior students, as well as contacting the SCCE at each site to prepare appropriately for each clinical experience.

Students must link proof of coverage/completion of all medical and legal requirements in UFDPT tracking system Exxat and keep this up to date throughout all full-time clinical experiences. Students who fail to comply with these requirements are subject to disciplinary action.

Technical Standards and Essential Functions

See Student Handbook pg 13

If a student is limited or prohibited from performing the essential functions & technical standards noted because of injury, illness, pregnancy or any other reason, the student must meet with a representative of the University of Florida Disability Resource Center for documentation of disability and requested accommodations. Each individual situation will be evaluated to determine whether the student is able to continue in the clinical portion of the curriculum and whether reasonable accommodations (short term and/or permanent) can be made at the specific site. If an accommodation cannot be made by a clinical site, the student’s progression to graduation may be impacted. The Clinical Education Team will work to find a clinical site that can make the accommodation within the same time frame, but this may not be possible. The student may need to wait until their situation changes and the accommodation is not longer needed. There can be situations where a student may not be able to perform the
essential functional function and technical standards, and this can impact their ability to meet graduation requirements.

**Accident/Incident Reports**

Students who are involved in or witness an accident or incident while participating in clinical experience activities must follow the clinical site’s policy on completing reports/forms/documents related to the accident/incident. If an injury/exposure or possible injury/exposure occurs, as soon as possible within 24 hours of the accident/incident, students must also contact the DCE or their FOR to receive direction for follow up. Students should also submit via email an UF DPT Student Accident/Incident Form – Clinical Education to their FOR and cc the DCE. The student will be contacted by the DCE/ADCE, FOR, or another school representative to confirm receipt of this report and provide further direction as needed. If a student causes an injury, UF’s Health Science Center Self Insurance Program (SIP) procedures will be followed.

Pursuant to contractual agreements with clinical sites, students are not eligible for employee benefits including worker’s compensation. For minor injuries, basic first aid should be administered onsite. For more serious injuries, an emergency response should be instigated. Each student is responsible for maintaining personal major medical health insurance while on clinical experiences, thereby availing the student to the opportunity to receive appropriate emergency care.

**Blood borne Pathogen Exposure**

All students will follow procedures for standard, transmission-based and universal precautions in all health care settings. Students will inquire and obtain the facility’s policies and procedures on exposure to communicable diseases and blood borne pathogens prior to patient contact. Students will clarify the policy with their immediate supervisor, Clinical Instructor (CI) or SCCE. Students should determine:

A) Quickest way to contact their immediate supervisor or next in chain of command  
B) Phone Number of Infection Control Nurse  
C) Location of Employee Health  
D) Location of Emergency Room  

In the event of exposure to a communicable disease and/or blood borne pathogen, students should:

E) Report incident to immediate supervisor (or next in chain of command) and follow the facility’s policy for reporting the exposure.  
F) Contact the DCE/ADCE (this should occur as soon as possible so that DCE/ADCE can assist the student).

**Attendance**

Each clinical experience is scheduled for ~ 40 hours per week for 8 weeks. Students are expected to work the same schedule as their CI, which may include longer days, weekends and holidays. UF holidays do not apply to clinical experiences. If you have religious or other considerations that impact your ability to work on a Saturday or Sunday, please notify the DCE/ADCE and FOR at least one week prior to the first clinical education match. The Clinical Education Team will advocate on the student’s behalf but cannot guarantee a site’s decision on weekend attendance. Other than for religious considerations, limited exceptions are available. Decisions to allow a student a day off for a special event in exchange for working an alternate...
Day are at the discretion of the SCCE/CI at the assigned site. Examples may include professional conferences, residency interviews, etc.

Weather and Natural Disasters

Inclement weather and natural disasters may also impact a student’s attendance during a clinical experience. Safety is a priority for UFDPT students. Students should contact their clinical site first if they do not feel safe or are unable to come into the clinic as originally scheduled. When safe to do so, the student should inform their FOR or the DCE as soon as possible to discuss the situation. Some situations may require a student to relocate to seek safety. Students should contact their FOR as soon as they are able to, to inform them of their evacuation and return plan. Make up days for days missed will need to be coordinated with the SCCE and the students FOR.

Missed time due to Illness/Injury/Death in family, etc.

Rescheduling of missed days is REQUIRED for greater than 2 days and recommended for two or less. Students should not assume they automatically are awarded 2 days off each experience. Time away for any reason other than illness/injury or death in the family is made at discretion of the CI in consultation with the FOR. Students should contact their FOR (in addition to their CI) for any missed clinical days. Students should also log missed days into their profiles in Exxat prior to taking the time off if possible. For scheduled missed clinic time, students must receive pre-approval from the CI as well as their FOR. Students may need to extend their time in a clinical experience due to making up missed time.

If a student becomes ill or has an injury prior to the clinical experience that can impact their start date or their performance at the clinic, the student should notify their FOR immediately. If a student has a medical condition that impacts their performance, they will need to provide their FOR with a letter from their medical provider indicating when it is safe to resume/start their clinical experience. If any limitations are required, they should be included and the time frame for those limitation included. For example: for two weeks, “X” can not lift of move anything greater than 10# after that they will have no restrictions and can return to full duty as a student physical therapist.

Non-excused absences

Excused absences are defined by the University of Florida. Students must request a leave of absence for non-excusable reasons and are allowed to request such absences with their SCCE/CI with full knowledge that the site may decline the request. The student is responsible for any previously accepted costs associated with planned non-excused absences in cases of denied requests. In cases in which non-excused absences have been approved, the student is required to arrange make-up clinical hours to satisfy the attendance requirement.

Email

All students are required to have a @ufl.edu email address for use with academic coursework and responsibilities. UF Health Science Center (HSC) policy, which supersedes UF general campus policy, states that all HSC students cannot forward @ufl.edu email to a personal account. These policies exist to improve communication between faculty, staff, and students.

During clinical experiences, email is the primary means of communication between UFDPT, and
the student. It is the responsibility of the student to check email on a daily basis to ensure they are current with communication from the UFDPT and University.

**Unsatisfactory Clinical Performance**

A student who performs unsatisfactorily on a clinical experience will be notified of their unsatisfactory performance by their CI in writing. Student's will be notified during feedback sessions with their CI and be given opportunities to give their perspective and provide feedback to the CI. Midterm and final CPI assessments can also be used to document unsatisfactory performance. Unsatisfactory performance is defined by the standards of the clinical site via the CI/SCCE and site policies & procedures, UFDPT guidelines, and the CPI performance criteria. The student will either continue with the clinical experience or will be removed from the clinical experience based on individual and situational circumstances. If the student remains at the clinical site, the student must modify and/or correct the identified behaviors or skills. The student’s CI, SCCE, and the DCE/ADCE/FOR will give the student specific feedback regarding the changes necessary, the required time frame, the conditions of success, and consequences of not meeting the criteria in writing. A learning contract may be developed to facilitate the correction of the behaviors and/or skills being addressed.

If it is deemed necessary to remove the student from the clinical experience or the student is unable to modify the unsatisfactory behaviors and/or skills the Clinical Education Team may notify the Professionalism Development Committee and request guidance based on the demonstrated behaviors of the student. The Clinical Education Team, with insight from the Professionalism Development Committee, if applicable, will recommend remediation of skills/behavior and a learning contract will be developed. When appropriate, input from the student will be incorporated into goal setting. The Clinical Education Team, with guidance from the Professionalism Development Committee, will determine the terms and the objectives of the remediation. If the student successfully completes the remediation according to the contract, they will have an opportunity to repeat the clinical experience at a site and duration determined by the Clinical Education Team. They will receive a course grade of “I” until the clinical experience is completed. If the remediation is not completed satisfactorily in the time designated, the student will not have the opportunity to repeat the clinical experience and the student will receive a grade of “U” and will be recommended for dismissal from the UFDPT to the Program Director. The Program Director will be notified by the DCE of any such student and the student will be notified in writing of their status by the Program Director.

Students will be allowed one, and only one, such situation regarding clinical experiences. If the student is not performing satisfactorily on a subsequent clinical experience at any point in time, the student will receive a “U” and be dismissed from the UFDPT.

**Clinical Education Feedback and Outcomes**

**Student Performance:**

The APTA’s Clinical Performance Instrument (CPI) is primarily utilized by the student and clinical instructor to assess and provide feedback regarding the student’s ultimate progress toward entry-level skill as a physical therapist. The students’ ability to manage patient problems is expected to increase in terms of the complexity, consistency, quality, and efficiency of
physical therapy services provided over the course of the clinical education coursework. The clinical instructor's guidance and assistance should gradually decrease as the student’s caseload increases. By the conclusion of the final clinical experience, the student is expected to function independently as an entry-level physical therapist in a non-specialty setting, managing a full caseload safely and effectively, with guidance provided as needed.

<table>
<thead>
<tr>
<th>Course</th>
<th>CPI Expectation for Performance</th>
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<tbody>
<tr>
<td>Clinical Education III</td>
<td>Advanced Beginner</td>
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<tr>
<td>Clinical Education IV</td>
<td>Intermediate</td>
</tr>
<tr>
<td>Clinical Education V</td>
<td>Advanced Intermediate</td>
</tr>
<tr>
<td>Clinical Education VI</td>
<td>Entry Level</td>
</tr>
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</table>

Students are encouraged to meet with their CI during the first week to discuss expectations and the student’s preferred learning style and type of feedback they learn best with. Students should be aware that their preferred learning style and feedback preference may or may not be used by their CI. Students should be able to adapt to individual styles as they would for a patient that has different learning and communication needs. It is recommended that CIs provide daily, verbal, formative feedback, and weekly written feedback regarding student progress. Students are also encouraged to perform weekly self-assessments and documentation of goals and share them with their CIs. The DCE, ADCE, or FOR also reviews student and CI comments on the CPI at mid-term to monitor student performance.

**Clinical Faculty Evaluations by Students**

Students are required to provide professional feedback regarding their first impressions of the clinical instructor and the clinical experience during the first week of each clinical experience. The clinical instructor evaluation is utilized by students to assess and provide feedback to clinical education faculty at the mid-term and final week of each clinical experience. These are completed by the student and housed in Exxat. The DCE, ADCE, or FOR initiates communication with the clinical education faculty via email within the first two weeks of the clinical experience to provide support and answer questions or address concerns that may have developed. The Clinical Education Team will follow up with the student on their evaluations of their CIs at mid-term and final that have been scored with a 3 or less (on a scale of 1 – 5) on the average of all items assessed. The FOR/DCE will contact the clinical site as appropriate for sharing the information or for intervention activities as the case may dictate.

The Clinical Education Team assesses performance of the clinical education faculty through student evaluations of CI’s and mid-term interviews/site visits with students and CI’s. These interviews are also used to identify areas of development needed for the SCCE and/or CI. Students are counseled to provide clear and objective feedback to CI’s regarding expectations for clinical supervision and to share the results of their evaluations with their CIs to aid in the CIs growth as well as their capacity to deliver objective feedback.
Clinical Experience Evaluations by Students

All students are required to evaluate the clinical experience at the end of their time at each clinical rotation. Students are encouraged to share their feedback with their CIs and SCCEs. The Clinical education Team monitors the feedback from the students and utilizes it as a quality metric. The clinical Education Team follows up with students and clinical sites (as necessary) when scores of 2 or lower on a 4-point scale are submitted.

Academic Preparation

Students and clinical faculty are routinely polled to ascertain their opinions regarding the academic preparation of UFDPT students. This is initiated in the first week of each clinical experience, is addressed at mid-term, and students and clinical faculty are surveyed to provide feedback during site visits regarding student preparedness.

Clinical Faculty Privileges

Clinical faculty are invited to participate in feedback regarding the performance of the Clinical Education Team and the UFDPT curriculum via an email survey performed on an annual basis. Clinical faculty are also afforded the opportunity to apply for library privileges, attend department sponsored CEH activities, and request specific feedback and assistance with the development of clinical teaching and skills. Additionally clinical education faculty are eligible to apply for tuition deferment for certain courses and CEH’s for hours of clinical instruction. The current offering as established by the FPTA is 1 CEU for each 120 hours of student mentoring up to 8 CEU’s each biennium.

Rights and Responsibilities of Academic Institution, Clinical Education Site & Student

1) Rights and responsibilities of the Department of Physical Therapy
a) To assign to clinical education sites those students who have satisfactorily completed the pre-clinical phase of their physical therapy education and prior supervised clinical education experiences.
b) To select clinical sites that will provide stimulating environments for learning with adequate supervision and guidance of students.
c) To maintain effective communication between the UFDPT and the clinical facility to facilitate realistic and optimal pursuance of clinical education. Means of communication includes regular correspondence, telephone conversations, clinical visits (onsite or virtual), educational inservices, and consultative meetings.
d) To offer educational opportunities to clinical instructors that aims for their continued development of clinical knowledge, supervisory skills, and teaching strategies.
e) To share with the clinical instructors the general responsibilities for planning, executing, and evaluating the clinical education program.
f) To share with students the general responsibilities for preparation for and active involvement in seeking educational experiences. UFDPT faculty accepts the final responsibility for clinical education.
g) To adhere to formal conditions for agreement written in the contract.
h) To assign the final course grade (Satisfactory or Unsatisfactory) for the clinical education course based on the assessment of the student’s performance as determined by a review of the
completed APTA Clinical Performance Instrument (CPI) and discussion with the student and clinical instructor.

2) **Rights and responsibilities of the Clinical Education Site**
   
a) To provide healthcare services and physical therapy direction by qualified personnel.
b) To provide guidance and supervision of students by qualified licensed physical therapists.
c) To orient the student(s) to the physical therapy department, specific types of patients unfamiliar to students, and a review of methods, policies, and procedures of the institution such as appropriate dress, working hours, patient schedules, record-keeping, and approaches to physical therapy interventions.
d) To provide a variety of educational experiences for the student in regard to types of patients (age, gender, diagnosis, medical complexities); including examination, evaluation, and intervention methods used. Educational experiences should be appropriate for the setting and consistent with student's grading criteria/level of education.
e) To involve the student in record-keeping, medical record documentation, educational sessions, and supervisory opportunities as appropriate for the student's level of education.
f) To guide and supervise the student(s) in their activities according to individual needs and abilities.
g) To provide feedback to the student by performing ongoing informal evaluations of performance. To discuss concerns with the DCE/ADCE/FOR as early as possible in the clinical experience.
h) To formally evaluate the performance of the student using the CPI at least twice (midterm and final) during the clinical experience. To discuss with the student the results of these evaluations.
i) To encourage professional growth of staff and students.
j) To share with the UFDPT faculty the general responsibilities for planning, executing, and evaluating their onsite clinical education program.
k) To adhere to formal conditions for agreement written in the contract.

3) **Rights and responsibilities of the Student Physical Therapist**
   
a) To develop behaviors consistent with an adult learner such as, but not limited to, self-directed, independent, critical thinker, adaptable, and flexible.
b) To review, understand, and comply with any policies and procedures of the assigned facility before reporting to assigned site. This will include all information provided to UFDPT and/or material sent to the student by the facility.
c) To comply with all federal and state laws and regulations regarding the practice of physical therapy. Comply with all department regulations of the clinical facility and UFDPT, inclusive of but not limited to hours, attendance, dress code, record keeping, use of non-protected health information, and safety regulations.
d) To review and comply with all medical and liability requirements required of the UFDPT and the facility. This includes PPD, immunizations (MMR & Hepatitis B), CPR, liability, current health insurance and hospitalization, and any additional requirements of the facility (e.g. 3 month PPD, recent medical exam, first aid class, background check, fingerprinting, etc.). To produce all documents upon the facility's request.
e) To understand the objectives and grading criteria of the clinical education courses.
f) To seek additional assistance when clarification of criteria is needed.
g) To make oneself available to the learning experiences offered by each facility and its personnel.
h) To seek and utilize those experiences to meet grading criteria.
To request additional experiences to meet grading criteria.

To request guidance and assistance when needed. Students are encouraged to use appropriate reporting structure when seeking assistance with challenges (CI and SCCE). Students are encouraged to contact the DCE/ADCE/FOR when they have difficulties seeking guidance or assistance in the clinical setting.

To review, understand, and properly utilize the evaluation tool CPI. To request clarification and guidance about the CPI from the FOR before the clinical experience if needed. To answer questions the CI may have about the CPI.

To discuss performance evaluations with their CI and to improve performance by the acceptance of critical feedback.

To demonstrate interest in and commitment to the clinical site while attending the clinical experience.

To maintain high quality of performance and ethical conduct befitting a professional physical therapy student.

To complete and submit all paperwork and assignments required by the UFDPT for satisfactory completion of clinical experiences.

### Patients’ Right to Refuse Treatment

Students are required to wear a UFDPT or facility name badge, identifying them as a student and introduce themselves as such when working with a patient/client. Patients have the risk-free right to refuse treatment/participation in student training.

### Complaints Outside the Realm of Due Process

**Summary:** This document describes the process required for handling and recording UFDPT complaints that fall outside the realm of due process. These types of complaints fall into three main categories and specific procedures have been established for each category.

Documentation of all complaints of this nature are required to be stored on the Department’s S drive in the “Complaints Outside the Realm of Due Process” folder.

**Procedure:**

**A. Category: General program or process complaints**

A general UFDPT complaint received from the public should be forwarded to the DPT Program Director, who may follow up directly for resolution or discuss the issue with the Chair of the Department. If necessary, the DPT Program Director and Chair will develop a course of action. If the complaint is an issue that warrants input or reflection on the part of the faculty, the complaint will be brought up at the next faculty meeting. A record of the complaint and the associated documentation is placed in the “Complaints Outside the Realm of Due Process” folder on the S drive, as well as notes on any course of action.

**B. Category: Complaints from clinical education sites**

All complaints from the clinical education sites should be directed to both the DPT Program Director and the Director of Clinical Education. Collectively they will develop a course of action and follow-up with the individual if needed. Depending on the complaint the issue may also be brought to the attention of the Chair, the Director of Curriculum, and the faculty. A record of the complaint, course of action, and the associated documentation should be placed in the “Complaints Outside the Realm of Due Process” folder on the S drive.
C. Category: Complaints from employers of graduates.

Complaints from employer graduates regarding the UFDPT should be directed to the Chair and the DPT Program Director. If the complaint is an issue that warrants input or reflection on the part of the faculty, the complaint will be brought up at the next faculty meeting. A record of the complaint and the associated documentation is placed in the “Complaints Outside the Realm of Due Process” folder on the S drive, as well as notes on any course of action.
## Appendices

### Appendix A: DPT Curriculum Overview and Course Syllabi

See [UFDPT Curriculum Overview and Course Syllabi](#)

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Appendix B: Standard Contract Template

Clinical Experience Affiliation Agreement

Appendix C: Online CPI Training Guide

APTA PT Student CPI 3.0 Training

Appendix D: Professional Behavior Assessment Tool (PBAT)

Professional Behavior Assessment Tool

Appendix E: Final Evaluation of Clinical Experience (PTSE1)

Link to resource found on page 4.

Appendix F: Clinical Experience Practice Setting Categories

**Category I (C1) (Required)**
(Low Medical Management Complexity/High level of health & independence)
Outpatient Ortho
Outpatient Sports
Outpatient General
Outpatient Other (this is specific to the site.)

**Category 2 (C2)(Required)**
(Moderate Medical Management Complexity/Moderate level of health & independence) Rehab General
Rehab Neuro
Rehab Ortho
Skilled Nursing Facility
Outpatient Neuro
Outpatient Peds (except for pediatric or adolescent sports)
Inpatient Rehab
Rehab Peds
School System
Pediatrics Early Intervention
Home Care
Outpatient Oncology
Outpatient Other (this would be specific to the site.)

**Category 3 (C3) (Required)**
(High Medical Management Complexity/Low level of health & independence) Acute General
Acute Ortho
Acute Neuro
Acute
Other
Acute
Pediatric
Acute
Oncology

**Category 4 (C4): Specialty (Does not meet a required setting criteria)**
Outpatient Pelvic Health (typically requires student taking a pre-course)
Outpatient Pediatric/Adolescent Sports
Outpatient Other (specific to the site.) Other (specific to the site.)

*Other - C1, C2, C3, or C4
**Outpatient Other - C1, C2, or C4

To complete a C4 clinical experience, you must also have a C1, C2, and C3.