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Section I

Professional Behaviors

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Section I

Professional Behaviors

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Student's Name _____

Skill 1 Professionalism

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Introduces self as a student.
- b. Adheres to legal practice standards, including all federal, state, and institutional regulations and APTA Core Ethics Documents.
- c. Confirms informed consent from patient or responsible party.
- d. Projects professional image at all times (e.g., dress and behavior).
- e. Maintains patient/client confidentiality in accordance with best practice and legal standards.
- f. Manages personal affairs in a manner that does not interfere with professional responsibilities.
- g. Respects authority and complies with decisions of those in authority.
- h. Implements, in response to an ethical situation, a plan of action that demonstrates sound moral reasoning congruent with core professional ethics and values.
- i. Participates in profession-related organizations/activities.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 2
Commitment to Learning

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Demonstrates willingness to evaluate own performance.
- b. Identifies problems and information/learning needs.
- c. Seeks and utilizes appropriate resources to facilitate learning.
- d. Incorporates new knowledge into clinical performance.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 3 Interpersonal Skills

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)	Pediatric (IP/OP/ISD)	OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health			

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Maintains professional demeanor in all interactions.
- b. Demonstrates respect for patients'/clients' differences, values, preferences (including but not limited to differences in age, gender, race, nationality, religion, ethnicity, sexual orientation, social or economic status, lifestyle, health or disability status, or learning style).
- c. Responds appropriately to unexpected situations.
- d. Interacts appropriately to establish rapport and trust with others.
- e. Demonstrates understanding, acceptance, and appropriate execution of multiple roles of the student PTA.
- f. Delegates tasks to personnel utilizing effective and appropriate interpersonal skills.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 4 Communication

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)	Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health		

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Initiates and completes verbal and written communication in a timely manner.
- b. Chooses appropriate time, place, topic, and audience for communication.
- c. Uses English language effectively.
- d. Writes legibly.
- e. Communicates effectively with all stakeholders (including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers).
- f. Adjusts verbal and nonverbal communication to each person and situation.
- g. Listens actively (including re-stating, reflecting, and clarifying messages).

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 5
Effective Use of Time and Resources

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Identifies and prioritizes tasks to be accomplished.
- b. Plans and adheres to a realistic and appropriate schedule.
- c. Uses resources effectively, including unscheduled time and alternative treatment delivery methods.
- d. Determines tasks appropriate for delegation to support personnel.
- e. Demonstrates flexibility when presented with unforeseen circumstances.
- f. Performs multiple tasks effectively and efficiently.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 6 Use of Constructive Feedback

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Assesses own performance accurately.
- b. Seeks feedback.
- c. Demonstrates positive attitude toward feedback.
- d. Incorporates feedback into future experiences.
- e. Provides appropriate feedback to others, including modification of feedback according to recipient's need.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

**Skill 7
Problem Solving**

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)	Pediatric (IP/OP/ISD)	OP Ortho	LTC/SNF	ICU/CCU/NICU	Home Health						

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Identifies and states problems clearly.
- b. Prioritizes problems.
- c. Considers assets, limitations, and resources.
- d. Identifies possible solutions and probable outcomes.
- e. Implements solutions.
- f. Identifies outcomes and presents recommended modifications to supervising physical therapist or clinical instructor.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

**Skill 8
Clinical Decision-Making**

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Articulates relevant questions and ideas.
- b. Synthesizes all available information and recognizes deficiencies in knowledge base.
- c. Examines currently accepted treatment methods within the context of available evidence-based practice and within the supervising physical therapist's established plan of care.
- d. Formulates solutions to questions.
- e. Assesses outcomes of the selected and alternative solutions.
- f. Monitors and adjusts interventions within the plan of care in response to patient/client status and clinical conditions.
- g. Reports any changes in patient/client status or progress to the supervising physical therapist.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 9 Responsibility

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Completes regular duties and assignments accurately and in a timely manner.
- b. Arrives prior to the start of all scheduled activities.
- c. Accepts responsibility for own actions and outcomes.
- d. Recognizes need for help and seeks assistance.
- e. Offers assistance to others as appropriate.
- f. Reports to appropriate authorities suspected cases of abuse of vulnerable populations and/or cases of fraud and abuse related to utilization of payment.
- g. Advocates for the profession and the healthcare needs of society.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 10 Stress Management

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Recognizes stress in self and others.
- b. Identifies probable sources of stress in self and others.
- c. Seeks assistance for self or others as needed.
- d. Demonstrates effective stress management/coping mechanisms.
- e. Prioritizes multiple commitments in personal and professional life.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 11 Colleague or Community Education

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Identifies audience and clearly defines material to be taught.
- b. Develops and communicates learning objectives.
- c. Uses appropriate teaching methods (including language and use of media).
- d. Presents appropriate information effectively and accurately.
- e. Responds to/interacts with learner(s) (e.g., answers questions, gives feedback).
- f. Evaluates learning experience via learner performance or feedback of learner.
- g. Assesses feedback in relation to future teaching and modifies teaching as indicated.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Section II

Plan of Care

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Section II

Plan of Care

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Skill 14 Modification within the Plan of Care	31
Skill 15 Patient Related Instruction	33
Skill 16 Discharge Planning	35

Student's Name _____

Skill 12

Plan of Care: Patient History and Chart Review

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Identifies pertinent information by performing an organized review of patient record prior to intervention.
- b. Utilizes the initial evaluation to obtain information regarding initial patient status, problems, treatment goals, and treatment plans.
- c. Maintains patient confidentiality.
- d. Reviews all appropriate progress reports and health records (e.g. lab values, diagnostic tests, consults, MD orders) prior to carrying out the physical therapy plan of care.
- e. Demonstrates effective interview skills in collecting patient information to include prior and current level of function and general health status (red flags).
- f. Consults and reports to supervising physical therapist or clinical instructor any relevant changes in patient status.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 16
Plan of Care: Discharge Planning

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Provides information to the supervising PT pertinent to discharge planning, within a reasonable time, prior to discharge.
- b. Asks the patient and/or family appropriate questions about home environment.
- c. Discusses with the supervising PT the need for follow-up care (e.g., DMEs, out-patient treatment, referral to home health care agency, or vocational training).

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Section III

Interventions in

Patient/Client Management

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Student's Name _____

Skills 17.1-17.5 Interventions: Therapeutic Exercise

Rate the student's performance for each type of therapeutic exercise. The CI initials equipment or techniques used and may also add unlisted equipment or techniques.

17.1 Aerobic Activities

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Elliptical Trainer _____ Stationary Bike _____ UE Ergometer _____ Stair Stepper _____ Treadmill _____ Interval Training												

17.2 Balance Activities

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Static Sitting _____ Static Standing _____ Dynamic Sitting _____ Dynamic Standing												

17.3 Coordination Activities

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ _____												

17.4 Breathing Exercises

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Coughing/huffing _____ Pursed Lip _____ Paced Breathing												

17.5 Inhibition/Facilitation

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Joint Approximation _____ Rubbing _____ Weight bearing _____ Rocking _____ Tapping												

Student's Name _____

Skills 17.6–17.10 Interventions: Therapeutic Exercise

Rate the student's performance for each type of therapeutic exercise. The CI initials equipment or techniques used and may also add unlisted equipment or techniques.

17.6 Relaxation

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Breathing Strategies _____ Visual Imagery _____ Jacobson's Techniques _____												

17.7 Manual Strengthening

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Active-Resistive _____ Manual Resistance												

17.8 Mechanical Strengthening

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Elastic Resistance _____ Pulleys _____ Shuttle _____ Free Weights _____ Total Gym _____ Universal Gym												

17.9 Motor Development Training

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Developmental Activities training; e.g., kneeling, half kneeling, quadruped, etc. _____ Neuromuscular education/reeducation; e.g., PNF, NDT, etc.												

17.10 Posture Awareness

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Posture Exercises _____ Stabilization Activities												

Student's Name _____

Skills 17.11–17.12
Interventions: Therapeutic Exercise

Rate the student's performance for each type of therapeutic exercise. The CI initials equipment or techniques used and may also add unlisted equipment or techniques.

17.11 Range of Motion

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Active _____ _____ Active Assistive _____												

17.12 Stretching

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Manual _____ Prolonged stretch _____ _____ Self-Stretch _____ PNF hold relax, contract relax _____												

Student's Name _____

Skill 18
Interventions: Functional Training-ADLs
See Individual Skills

Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)						
Acute	Rehab (IP/OP)	Pediatric (IP/OP/ISD)	OP Ortho	LTC/SNF	ICU/CCU/NICU	Home Health

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Identifies patient's readiness for functional training.
- b. Utilizes correct functional sequence/technique in training process.
- c. Adjusts amount of assistance in keeping with the patient's needs and level of independence.
- d. Incorporates breathing control into functional activity.
- e. Participates in the selection of adaptive equipment by providing the supervising PT with accurate and complete information and appropriate recommendations.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skills 18.6–18.7
Interventions: Functional Training-ADLs

Rate the student's performance for each technique. The CI initials techniques used and may add unlisted techniques.

18.6 Transfers

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Minimum Assistance _____ Maximum Assistance _____ _____ Moderate Assistance _____ _____												

18.7 Wheelchair Mobility

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ _____												

Student's Name _____

Skill 19.1
Interventions: Passive Range of Motion

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Determines patient appropriateness for exercising.
- b. Determines exercise parameters (duration, speed).
- c. Uses manual techniques, body mechanics, and equipment safely and effectively.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 19.2
Interventions: Therapeutic Massage

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Selects and provides appropriate technique based on the POC established by the supervising PT.
- b. Positions patient properly to achieve desired results.
- c. Applies techniques correctly (e.g., hand placement, body mechanics, direction, stabilization, grade of movement, force, pressure, strokes).

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 19.3
Interventions: Joint Mobilization

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)	Pediatric (IP/OP/ISD)	OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health			

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Selects and provides appropriate technique based on the POC established by the supervising PT.
- b. Positions patient properly to achieve desired results.
- c. Applies techniques correctly (e.g., hand placement, body mechanics, direction, stabilization, grade of movement).
- d. Detects normal and abnormal joint movement.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 20
Interventions: Biophysical Agents
See Individual Skills

Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)						
Acute	Rehab (IP/OP)	Pediatric (IP/OP/ISD)	OP Ortho	LTC/SNF	ICU/CCU/NICU	Home Health

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Familiarizes self with equipment prior to delivery of treatment.
- b. Inspects area to be treated before and after treatment.
- c. Verifies absence/presence of contraindications and/or precautions.
- d. Positions patient appropriately with proper alignment.
- e. Applies biophysical agent according to established guidelines.
- f. Monitors patient's response to treatment (during and after) and modifies parameters (intensity, time, duration, and frequency) accordingly.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skills 20.1–20.5 Biophysical Agents: Individual Skills

Rate the student's performance for each physical agent used. The CI initials equipment used and may add unlisted equipment.

20.1 Biofeedback

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Reeducation _____ Relaxation												

20.2 Continuous Passive Motion

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Knee _____												

20.3 Cryotherapy

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Cold Pack _____ Ice Massage _____ Cryocuff _____												

20.4 Electrotherapeutic Agents

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ FES _____ IFC _____ NMES _____ HVPC _____ Iontophoresis _____ TENS												

20.5 Hydrotherapy

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Contrast Baths _____ Whirlpool _____ Pulsed Lavage _____												

Student's Name _____

Skills 20.6–20.10 Biophysical Agents: Individual Skills

Rate the student's performance for each physical agent used. The CI initials equipment used and may add unlisted equipment.

20.6 Compression Therapies

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Bandages _____ Compression Garments _____ _____ Compression Devices _____ _____ _____												

20.7 Superficial Thermal

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Fluidotherapy _____ Paraffin _____ _____ Hot Packs _____ _____ _____												

20.8 Deep Thermal

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Diathermy _____ Ultrasound _____ _____ Phonophoresis _____ _____ _____												

20.9 Traction

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ Cervical _____ _____ Lumbar _____												

20.10 Light Therapies

Clinical Experience	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
_____ _____												

Section IV

Tests and Measures

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Student's Name _____

Skill 21.2

Tests and Measures: Arousal/Mentation/Cognition

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Recognizes patient's orientation to time, person, place, and situation.
- b. Determines patient's ability to process commands.
- c. Recognizes patient's awareness of safety and judgment skills.
- d. Recognizes changes in patient's arousal, attention, mentation, and cognition. (MMSE, LOCF)
- e. Recognizes patient's recall ability (e.g., short term memory, long term memory).
- f. Identifies gross expressive and receptive communication deficits.
- g. Identifies factors influencing patient motivation.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 21.3
Tests and Measures: Assistive Technology

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Identifies the individual's and caregiver's ability to utilize the device.
- b. Recognizes and addresses improper alignment and fit of device.
- c. Inspects skin for related changes after use of device.
- d. Monitors patient's response and identifies safety factors while using the assistive device.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 21.4

Tests and Measures: Gait, Locomotion, and Balance

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Observes patient from all directions.
- b. Identifies gait/locomotion characteristics with and without use of assistive, adaptive, orthotic, prosthetic, or protective devices.
- c. Recognizes effect of various terrain and environments on gait/locomotion.
- d. Identifies deviations and their effect on gait/locomotion.
- e. Discusses with the physical therapist or clinical instructor possible causes and solutions for gait and locomotion deviations.
- f. Administers appropriate gait and balance tools as delegated by the physical therapist.
- g. Determines the safety, status, and progression of patients while engaged in gait, locomotion, and balance mobility.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 21.5

Tests and Measures: Functional Outcome Assessments

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Identifies appropriate information to be utilized in outcomes assessment.
- b. Administers standardized outcome assessments as established by the supervising PT.
- c. Applies and reports the results of standardized outcome assessments.
- d. Assesses and responds to patient and family satisfaction with delivery of care.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 21.6
Tests and Measures: Skin Integrity

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Identifies patients at risk for integumentary disruption.
- b. Examines skin and subcutaneous tissues for integumentary disruption.
- c. Examines skin for signs of infection, healing, bleeding, and/or breakdown.
- d. Differentiates between normal signs of inflammation and signs of infection.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 21.8

Tests and Measures: Muscle Performance—Strength, Power, & Endurance

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Correctly performs muscle testing by manual testing and/or dynamometry techniques (e.g., position, stabilization, resistance grading).
- b. Identifies the presence or absence of muscle mass along with how these deficits influence muscle performance.
- c. Recognizes the influence of muscle tone and/or pain on muscle performance.

The CI initials area tested.

_____ Cervical	_____ Shoulder	_____ Wrist	_____ Knee
_____ Thoracic	_____ Elbow	_____ Hand	_____ Ankle
_____ Lumbar	_____ Forearm	_____ Hip	_____

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 21.9
Tests and Measures: Neuromotor Function

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Identifies the presence or absence of reflexes, associated reactions, or abnormal tone.
- b. Identifies gross and fine motor skills.
- c. Identifies gross and fine motor milestones.
- d. Differentiates between upper motor neuron and lower motor neuron findings.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 21.13

Tests and Measures: Ventilation, Respiration, and Circulation

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Identifies physiologic response to performance of ADLs and instrumental ADLs.
- b. Measures standard vital signs (BP, pulse, and respiration) at rest, during, and after activities.
- c. Monitors cardiopulmonary status at rest, during activity, and post exercise by:
 - 1. Auscultation of heart and lungs.
 - 2. Observing chest wall movement and breathing patterns.
 - 3. Performing pulse oximetry.
 - 4. Recognizing cyanosis and abnormalities of capillary refill.
 - 5. Identifying changes in coughing and sputum.
 - 6. Differentiating pitting edema.
 - 7. Detecting signs and symptoms of respiratory distress.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Section V

Healthcare Environment

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Student's Name _____

Skill 22
Healthcare Environment: Safety

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Recognizes and remedies safety concerns during patient care.
- b. Asks for assistance when unable to independently manage patient safely.
- c. Uses appropriate body mechanics and guarding techniques.
- d. Demonstrates standard precautions (e.g., hand washing, clean techniques).
- e. Demonstrates safe handling of patient and equipment (e.g., catheters, IVs, O₂ tanks, orthoses).
- f. Familiarizes self with and practices risk management policies of the facility and school (e.g., falls, burns, nosocomial infections, safety hazards, emergency procedures, disaster plans, and incident report procedures).

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 24
Healthcare Environment: Documentation

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Navigates the facility's documentation system effectively.
- b. Follows guidelines and format, using appropriate terminology, as required by the facility.
- c. Documents care consistent with guidelines and requirements of regulatory agencies and payors.
- d. Performs all documentation in a timely manner.
- e. Uses English language effectively (e.g., grammar, spelling, organization, and sequencing).
- f. Produces documentation that demonstrates sound clinical decision-making.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 25
Healthcare Environment: Billing and Payment

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Assumes responsibility for cost-effective, efficient, quality care (e.g., use of support personnel, flexible scheduling, group patient activities, maintaining expected productivity).
- b. Identifies reimbursement issues in managed care environment.
- c. Recognizes budgetary process of the facility and own role therein.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Section VI

Site Specific Skills

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Student's Name _____

Skill 27
Site Specific Skill: Airway Clearance

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Recognizes signs and symptoms of impaired respiratory function.
- b. Incorporates results of supervising PT's respiratory assessment in treatment.
- c. Performs appropriate airway clearance technique (e.g., positioning, percussion, vibration, coughing, suctioning).
- d. Instructs patient in appropriate breathing strategies.
- e. Alerts supervising PT in case of adverse patient response.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 28

Site Specific Skill: Amputation and Prosthetic Management

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Instructs patient in care of residual limb and/or prosthesis.
- b. Compares involved and uninvolved limbs for ROM and strength.
- c. Instructs patient in the correct application of the prosthesis.
- d. Provides training in ambulation and/or functional activities with or without prosthesis.
- e. Identifies gait abnormalities, malalignment, abnormalities in fitting, changes in skin condition, and their probable cause(s) and reports to the supervising PT.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 29
Site Specific Skill: Aquatic Therapy

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Utilizes the principles of water to achieve patient goals.
- b. Recognizes inappropriate referrals or decline in status of patients.
- c. Identifies indications/contraindications for aquatic therapy.
- d. Progresses patient appropriately within the POC, including use of land therapies.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 30

Site Specific Skill: Environmental Barriers

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Recognizes present and potential barriers with possible modifications and reports to the supervising PT.
- b. Administers established questionnaires and conduct interviews as delegated by the supervising PT.
- c. Measures physical space and physically inspects the environment.
- d. Monitors progress on referrals made by the supervising PT to implement recommendations for barrier removal.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 31

Site Specific Skill: Ergonomic Assessment and Work Conditioning

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Simulates tasks related to specific job, considering sources of potential injury, essential functions, and physiological demands during therapy.
- b. Documents an individual's ability to perform selected tasks, including preferred postures, dexterity, coordination, and safety.
- c. Identifies and reports to the supervising PT possible sources of actual and potential trauma, cumulative trauma, and repetitive stress in the workplace.
- d. Refers patient to local resources for supplemental information and other services.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

Student's Name _____

Skill 34
Site Specific Skill: Wound Management

Clinical Experience #	1		2		3		4		5		6	
	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final	Mid	Final
Student Rating												
CI Rating												
Practice Setting: Enter Clinical Experience # and facility initials for applicable setting(s)												
Acute	Rehab (IP/OP)		Pediatric (IP/OP/ISD)		OP Ortho		LTC/SNF		ICU/CCU/NICU		Home Health	

Objectives applicable to this skill; score student on objectives that are applicable at your facility:

- a. Follows facility infection control policy and procedures while performing wound care.
- b. Identifies precautions for dressing removal.
- c. Performs cleansing/debridement to appropriate tissue according to the POC using safe and effective techniques.
- d. Recognizes signs of intolerance and limits treatment time to patient's tolerance.
- f. Monitors changes in wound status and reports to the supervising PT.
- g. Selects appropriate wound dressing and applies correctly based on POC as established by the supervising PT.

Comments: required with rating of NI or U

Date	Objectives/behaviors requiring practice or improvement	CI	Facility

