Physical Therapist Assistant Program

Program & Application Information

The Physical Therapist Assistant Program is designed to provide students with the experiences and knowledge necessary to function as an integral part of the rehabilitation team. Graduates will work under the supervision and direction of a physical therapist in treating patients and clients ranging from pediatric to geriatric with varying diagnoses, utilizing treatments such as therapeutic exercise, electrical stimulation, ultrasound, manual techniques and gait training. Learning experiences include classroom and laboratory activities as well as directed clinical practice under the supervision of a clinical instructor. The Physical Therapist Assistant graduate will be eligible to take both the licensure examination required by the State of Ohio and the National Exam (NPTE).

More information about the program and application materials are attached.

Application Deadline: January 24, 2019, at 5:00 p.m.

FACULTY:

Lori L. Wahl, PT, DPT  
Office: HSH 325B  
Phone: 740.588.1312  
lwahl@zanestate.edu

Helen F. Rollins, PTA, BS  
Office: HSH 325B  
Phone: 740.588.4112  
hrollins@zanestate.edu

The Physical Therapist Assistant Program is fully accredited by: The Commission on Accreditation in Physical Therapy Education  
American Physical Therapy Association  
1111 N Fairfax St  
Alexandria, VA 22314-1488  
(703) 684-2782
HEALTH PROGRAMS APPLICATION COVER PAGE

Name: _______________________
Address: ______________________

____________________
Phone #: ______________________
E-Mail: ________________________
Student ID #: __________________

Programs Applying For:

- Applicants are required to indicate a minimum of two and a maximum of three programs/degrees, ordered according to your preference as number 1, 2, or 3.
- You must submit ALL required application materials for EACH of your 1st, 2nd, and 3rd program selections below. Duplicate requirements for two or more programs can be noted as, “See page ___ of section ___.”

<table>
<thead>
<tr>
<th>Selective Programs</th>
<th>Non-selective Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ Medical Laboratory Technician (MLTP)</td>
<td>___ Health Information Management (HIMT)</td>
</tr>
<tr>
<td>___ Occupational Therapy Assistant (OTAP)</td>
<td>___ Medical Assisting (MEDA)</td>
</tr>
<tr>
<td>___ Physical Therapist Assistant (PTHA)</td>
<td>___ Sport and Fitness Science (SFSC)</td>
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<tr>
<td>___ Radiologic Technology (RADT)</td>
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</tbody>
</table>

_____ I do not desire to apply to a second Health program, but will pursue the ASCI transfer degree.

Completed folders are to be submitted in one of two ways:

Mailed to:
Zane State College/Health Science Hall
1555 Newark Rd
Zanesville, OH 43701

or dropped off in the reception area of
Health Science Hall, H325
COMMON HEALTH PROGRAMS APPLICATION CHECKLIST for 2019-2020 Academic Year

- PUT YOUR NAME, ADDRESS, AND STUDENT ID# ON THE FRONT OF THE FOLDER
- Folders must be three-pronged – not three ringed.
- Include and complete this checklist as the second page of your application folder.
- Place all items in numbered page protectors, and include one tab divider for each program to which you are applying. Label these dividers with the four letter program code indicated on the Application Cover Page. The tab(s) is/are to be placed after Page 8 from the list below.

<table>
<thead>
<tr>
<th>Page 1</th>
<th>Health Programs Application Cover Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Page 2</td>
<td>Common Health Programs Application Checklist (this page)</td>
</tr>
<tr>
<td>Page 3</td>
<td>Evidence of application to and/or acceptance to the College. Clearly indicate your name and Zane State College Student ID number on this document. (e.g. Acceptance letter, copy of Student ID card, Z-Online document)</td>
</tr>
<tr>
<td>Page 4</td>
<td>Official transcripts from all other colleges you have attended. These should include grades through the end of fall semester prior to application. Unofficial Zane State College transcripts that include current GPA are acceptable.</td>
</tr>
<tr>
<td>Page 5</td>
<td>Copy of transfer credit awarded by Zane State College for courses taken at other institutions. Submission of official transcripts to the Registrar’s Office should be no later than December 20, 2018, so that there is ample time for review.</td>
</tr>
<tr>
<td>Page 6</td>
<td>Accuplacer scores if you have not previously completed college-level math and English with a grade of “C” or better.</td>
</tr>
<tr>
<td>Page 7</td>
<td>Copy of ACT scores and/or Health Occupations Aptitude Exam score. Required for MLTP, OTAP, PTHA, and RADT.</td>
</tr>
</tbody>
</table>
| Page 8                         | Evidence of readiness for or completion of BIOL 2400/2410 by indicating the following:  
  _____ I have taken a high school level advanced biology or anatomy and physiology (A&P) in the past three years and passed it with a “C” or higher.  
  _____ I have taken college level A&P in the past five years and passed both lecture and lab sections with a “C” or higher. This course, if taken at another institution, has been approved for transfer credit by the Zane State College Registrar’s Office.  
  _____ I have taken college-level A&P greater than 5 years ago and understand that I will be required to retake and successfully complete both lecture and lab sections with a “C” better.  
  _____ I have taken BIOL 1210 and passed it with a “C” or better.  
  _____ I am scheduled to take BIOL 1210 _____ semester. |

NOTE: No page should be left blank. If the item required on a page is not applicable to you, please provide a brief explanation as to why it does not pertain to you on the appropriate page.

Program Specific Requirements: Following Page 8, place your program specific documents behind the appropriately labeled tab divider. Each document should be in a numbered page protector. They are to be in the order specified in the program specific requirements checklist. Duplicate requirements for two or more programs can be noted as, “See page __ of section __.”

- Sample application folders are available for review in the One Stop for Student Services, on the Cambridge Campus, and in the Health Science Hall reception area. The sample may also be viewed on the College website under each health program’s tab.
GENERAL INFORMATION

We are currently accepting applications for summer term 2019. All of the outlined requirements for applying should be met by 5:00 p.m., January 24, 2019, to be considered for entry into the PTA Program. If you mail your folder, it must be postmarked on or before January 24, 2019. Please familiarize yourself with this information if you plan to apply.

Although you are not eligible to begin PTA classes at the present time, you may elect to apply to the College and enroll in general and related courses which are part of the PTA course of study. You must apply separately for admission to the PTA Program. You may enroll in these other general courses at the beginning of any academic semester or term.

Please feel free to contact the program director with any questions. The e-mail address is lwah1@zanestate.edu, and e-mail is her preferred method of communication.

Employment opportunities for physical therapist assistants may be found in hospitals, rehabilitation centers, skilled nursing facilities, outpatient and sports clinics, schools, and through home health.

1. The PTA Program is five academic semesters in length (one summer and four full semesters). This program includes two semesters of practicum experience in three separate clinical placements. Students must be 18 years old prior to participating in practicum coursework.

2. The PTA Program can only be formally entered during the summer term. **If you are accepted and have completed all summer course of study courses, you may begin PTHA courses in the fall.** It is expected that students complete the full sequence of PTHA courses once admitted to the program. Students may elect to take non-PTHA courses before applying to or being accepted into the PTA Program. Students interested in the PTA Program who are not eligible to begin the program in the summer term of any given year may pursue another degree offered here on Campus and apply to the PTA Program in the next application cycle.

3. In addition to completion of the program, most states, including Ohio, require applicants to pass a licensure examination and a state laws examination before practicing as a PTA. There is considerable cost associated with required testing. (Approximately $740 at the time of this publication.)

4. **The PTA Program at Zane State College is competitive and accepts a limited number of students each year.** This means that typically there are many more students applying than there are available seats. Given that information, it is important that you identify a secondary educational goal to work towards while also applying to the PTA Program.

5. Students interested in the PTA Program must complete two separate application processes:
   A. Application and acceptance to the College
   B. Submission of Health Programs application folder

6. Students accepted into the PTA Program must meet the PTA Program admission criteria listed in the college catalog and any new criteria as identified by the Program Director. Criteria for admission are available no later than July of the year prior to the summer/fall semester for which the applicant is applying.
7. Students will be required to travel during the fieldwork courses. Although every attempt possible is made to minimize distances between the student's home or the College and the fieldwork facility, students will likely need to travel for practicum courses. Students are responsible for their own transportation to and from clinical sites, and effort is made to keep one way travel time at or under 90 minutes. If you lease or are considering leasing a car, consider how this required travel will affect the allowable mileage.

8. It is possible that certain clinical sites may require drug screening, parking passes, etc. If a student is assigned to such a site, they are responsible for all additional costs.

9. Although some students may be able to work during the PTA Program, working full or part-time may be unrealistic or unmanageable during semesters when practicum courses are required.

10. We will do everything in our means to make reasonable accommodations for students who have special needs or disabilities. It is the responsibility of the student to request accommodations. No student or potential student will be denied acceptance into the program due to disability, age, race, color, sex, sexual orientation, religion, national origin, or ancestry. Accepted students will need to demonstrate appropriate physical skill, sensory function, communication function and cognitive/social/behavioral functions to be successful. For more detail on these essential functions, please contact the PTA Program Director via email.
REQUIREMENTS FOR APPLICATION INTO THE PHYSICAL THERAPIST ASSISTANT PROGRAM

Because of the importance of the role played by the Physical Therapist and the Physical Therapist Assistant in the recovery and well-being of injured and ill clients, standards for the profession are established by the American Physical Therapy Association and practice is regulated by licensure from the State of Ohio. In order to provide a program that facilitates success for its graduates, it is essential to select students who meet rigorous requirements.

Please be aware that students are admitted on a competitive, selective admissions basis. Application does not guarantee admission, and there is NO WAIT LIST.

The following criteria have been established as mandatory for all students interested in entering the Physical Therapist Assistant Program. It is recommended that applicants allow a minimum of one month to meet these criteria. Allowing two to three months to pursue the application process is most beneficial. These criteria and any documentation required as evidence of meeting the criteria must be submitted prior to admission. *Note that the Program Director reserves the right to request additional materials.

1. Acceptance to Zane State College evidenced by a letter from the College, a copy of your Zane State College student ID, a recent transcript or a degree audit. (Acceptance to the College in no way implies acceptance to the PTA Program.)

2. Completion of high school and/or previous college work with a minimum grade point average of 2.5. Transcripts from past college work must be submitted both to the Registrar and within the application folder. High school transcripts are highly encouraged. Applicants without high school diplomas may provide documentation of completing the GED. Have one copy of college transcripts and your high school transcript sent to you for inclusion in your folder. They may be unofficial copies for the application folder.

3. Completion of the College's Assessment and Placement Test (Accuplacer) administered through the Testing Center. The applicant must place into ENGL 1500 and MATH 1050 or 1650 or have ACT sub-scores of English 18 and Math 21-22. If the applicant places into pre-college level work, the applicant must be able to complete the pre-college work prior to the deadline for submission of materials. Being currently enrolled in developmental coursework is not sufficient. It must be completed. The Accuplacer should be taken as soon as possible after applying to the college. Contact the Testing Center for more information about this testing. Note that a student receiving transfer credit for Math and English courses required in the PTHA curriculum will not need to take the Accuplacer exam.

4. Completion of the Health Occupations Aptitude Examination (HOAE) with a minimum average percentile score of 50. Students must register to take the test through The Testing Center, 740-588-1323. Applicants should take the test and have received their scores by the application deadline. Applicants may retake the exam only once. The highest score will be utilized in application scoring. This testing can be waived if the applicant provides documentation of an ACT score of 20 or above. Please note that higher scores
receive more points in the application process. **If an applicant has lower than a 25 on the ACT, it is highly recommended that they take the HOAE.**

*Note that study guides are available for purchase through the ZSC Campus Bookstore and other outlets. Preparation for the HOAE is strongly recommended.*

5. **Completion of a minimum** of 16 hours of observation of Physical Therapy practice with either a licensed Physical Therapist or PTA. The total should include time spent in at least two different types of Physical Therapy settings. It is strongly encouraged that the experience includes 8+ hours in each setting. **Examples of setting types are: Inpatient, outpatient, skilled nursing facility, home health, schools, etc.** Written verification of the observation must be submitted in the application folder. Forms must be signed by a PT or PTA. Forms are enclosed in this information packet. Applicants are encouraged to complete their observation experience early in the application process as this assists them in understanding the breadth of the field of physical therapy. It is the prospective student's responsibility to arrange the experience and see that the Observation Validation Forms are completed. Students must follow the observation guidelines established by each individual facility. General information can be found on the handout titled *Guidelines for Observation Experience Requirement.*

6. College transcripts (if work completed at college level). Transcripts from all colleges attended should be included. You MUST submit Zane State College transcripts, too. If you have questions about which courses will transfer, those questions must be directed to the Registrar’s Office. Again, unofficial transcripts are accepted in the application folder.

7. Applicants holding a degree or certificate should provide evidence of it. **Hands-on** health related fields will be recognized in the scoring process.

**ALL MATERIALS MUST BE TURNED IN AT ONE TIME IN A FLAT, THREE-PRONGED FOLDER – NO THREE RING BINDERS. USE BOTH THE COMMON HEALTH PROGRAMS APPLICATION CHECKLIST AND THE PTA PROGRAM APPLICATION CHECKLIST. INCLUDE MATERIALS IN YOUR APPLICATION FOLDER IN THE ORDER THEY ARE LISTED. NO ITEM SHOULD BE SENT INDIVIDUALLY INCLUDING TRANSCRIPTS, LETTERS OF RECOMMENDATION OR OBSERVATION VALIDATION FORMS. **ALL ITEMS SHOULD BE IN NUMBERED PAGE PROTECTORS AS INDICATED ON THE PROVIDED CHECKLISTS.**

*The Program Director reserves the right to request additional information or items to validate readiness for admission.*

Students **must** provide proof of meeting all of the above minimum criteria to be considered for admission into the PTA Program. There are also other activities/experiences which may prove beneficial for prospective students in the event of an objective scoring tie. These include volunteer or job experience working directly with people in some helping capacity. Examples are volunteering at school programs, nursing homes, etc., working in a rehabilitation center or as a physical therapy aide.
Prospective students who have these kinds of experiences may be considered more qualified applicants than those who may not have these experiences. Specific documentation of volunteer work or job experience should be verified in writing by the employer or supervisor. Applicable life experiences may be written up in a short essay and submitted as a separate document.

Upon acceptance into the PTA Program, at their expense, the student will be requested to have a physical examination completed by his/her family physician (or other acceptable healthcare provider), provide proof of Hepatitis B immunity, and to complete a TB skin test. A form for the physical will be provided and must be completed by the established deadline. All necessary medical testing must also be completed by the established deadline. Documentation will be turned in as an assignment in PTHA 1010 during the first fall semester. *Note that a waiver can be signed should a student decline Hep B immunizations.

At the expense of the student, a physical examination and a two-step TB (Mantoux) skin test must also be completed prior to the second year of the program.

Students are also required to have a criminal background check (through fingerprinting, at their own expense) in order to work with children and seniors during clinical/practicum courses. If a student is found to have a criminal background, he/she may not be eligible to complete practicum courses or work in certain facilities. Completion of all practicum coursework is required for successful accomplishment of the PTA Program curriculum. Individuals with a criminal background may also be ineligible to take the licensure exam. Applicants who find themselves in this situation are encouraged to contact the PTA Program Director.
Eligibility and Selection Procedures

An eligible applicant for the PTA Program is that individual who has:

1. Submitted all required materials/documentation.
2. Met all admission requirements.

Only those students who meet eligibility as defined will be considered for admission.

All applicant folders will be reviewed and scored. Applicants will be rank ordered on an objective point system from the most qualified to the least qualified. The students with the highest number of points will be accepted into the program. Number of students accepted may vary from year to year as may the scoring rubric based on input from the PTA Program Advisory Committee. It is the responsibility of the applicant to stay abreast of these changes.

Identification of most qualified applicants versus least qualified is guided by the following statement: The PTA Program Application Requirements reflect minimum standards. Therefore, eligible applicants who exceed these requirements will be scored higher and considered more qualified than those eligible applicants who only meet the minimum requirements.

FOR EXAMPLE:

An applicant with a high school grade point average of 3.0 exceeds the minimum requirement of 2.5 and, therefore, will receive more qualifying points than an applicant with a GPA of 2.5. Additionally, high school students who have successfully completed an advanced biology and/or pre-calculus will earn more points than students completing only standard biology and algebra.

An applicant who has successfully* completed college level work closely related to skills needed by a PTA will receive points. Those courses are: English, math, biology, anatomy and physiology, and medical terminology. A student who has successfully* completed work in psychology, sociology, or basic skills courses will not receive points for that coursework. Additionally, overall college GPA is not considered.

An applicant who submits validation of 17 or more observation hours will receive more qualifying points than an applicant that submits the minimum number of 16 hours. Note that I do not publish the maximum number of hours for which points are awarded.

*Successful completion of a course is defined as a grade of A, B, or C except English – only A & B receive points; higher grades receive more points.

Please not that an applicant will receive points for either their high school transcript or their college transcript. Both will be scored and credit given for the one earning the applicant the most points.

Please DO NOT contact Dr. Wahl regarding your admission status. She will send letters to all applicants.
CURRENT SCORING CRITERIA AND WEIGHT

1. Up to 14 points for:
   a. High school GPA and grades
   OR
   b. College grades
   *per noted guidelines

2. Up to five (5) points for standardized testing scores (ACT or HOAE).

3. Up to two (2) points for readiness to begin/completion of the General Education portion of the PTA Program curriculum (BIOL, ENGL, MATH courses).

4. Up to two (2) points for observation hours.

5. One-half (1/2) points for re-applicants who met minimum requirements in a prior application cycle. Re-applicants must show evidence of additional relevant coursework, testing or observation hours.

6. One (1) point for having previously completed a degree or certificate in a hands-on health-related field (as determined by the PTA Program Director).

*It is the responsibility of the applicant to stay abreast of any changes to these criteria via the PTA Program Faculty/PTA Program Web Page/Advisors.
PTA PROGRAM APPLICATION CHECKLIST

- Please place this checklist after the tab divider labeled PTHA; The following items are specific to the PTA Program

<table>
<thead>
<tr>
<th></th>
<th>PTHA Page 1</th>
<th>PTA Program Application Checklist (this page) to ensure that you have included all items</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>PTHA Page 2</td>
<td>High School Transcript (minimum GPA 2.5) or GED certificate. Current high school students must include grade report from the first two 9 week grading periods.</td>
</tr>
<tr>
<td></td>
<td>PTHA Page 3</td>
<td>If applicable, proof of any degree or certificate you currently hold, the institution from which you graduated and the year of graduation. A copy of your diploma or certificate is preferable.</td>
</tr>
<tr>
<td></td>
<td>PTHA Page 4</td>
<td>If desired, a self-composed letter regarding applicable life experience. * This page will only be considered if there is a tie in objective scoring.</td>
</tr>
<tr>
<td></td>
<td>PTHA Page 5</td>
<td>If desired, letter(s) of recommendation. The contact information of the person composing the letter must be included. * This page will only be considered if there is a tie in objective scoring.</td>
</tr>
<tr>
<td></td>
<td>PTHA Page 6</td>
<td>If you applied to the PTA Program in any previous year and met minimum requirements, let me know this and indicate the year of application. You should also indicate ways in which you have worked to improve your file since the time of your last application. (e.g. names of courses you took or re-took, completion of additional observation hours, completed HOAE a second time, …)</td>
</tr>
<tr>
<td></td>
<td>PTHA Page 7</td>
<td>All Observation Validation Forms. Please indicate a “grand total” on the front of this page protector. Do not include lunch breaks in your total time.</td>
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</tbody>
</table>

**NOTE:** No page should be left blank. If the item indicated on a page is not applicable to you, please provide a brief explanation as to why it does not pertain to you on the appropriate page.
*Note: Please read carefully before beginning your observation experience.

**PHYSICAL THERAPIST ASSISTANT PROGRAM**
**GUIDELINES FOR OBSERVATION EXPERIENCE REQUIREMENT**

Observation or volunteer experience in physical therapy program is an essential requirement for application to the Physical Therapist Assistant Program. This is your opportunity to judge your interest in the field and learn more about physical therapy. Therapists or assistants providing this experience will be requested to verify your participation in writing. Forms are included in this packet. Sixteen hours, divided between at least two different types of facilities, are requested to meet minimum application criteria. It is your responsibility to arrange this experience. You may observe more than two facility types and/or complete more than 16 hours to show effort and interest beyond minimum requirements.

1. Call ahead to arrange an appointment for observation. Explain your interest in a career in the field. In general, physical therapy clinicians are glad to share information. Most facilities have specified times scheduled to spend time with students. Note: You may complete observation hours at any facility that is willing to host you.

2. Expect that it may be one to two weeks before the observation time can be scheduled. Most facilities are quite busy with patient/client treatment and need to plan ahead for observation experiences. Do not wait until the last minute to schedule observation hours.

3. Some programs have a specific therapist, assistant, or volunteer coordinator designated to coordinate observation experiences; if so, ask to speak to this person.

4. Notify the PT department if you will be late or absent. Be sure to speak directly with the facility personnel or leave a message with the office staff. Reschedule as soon as possible. Avoid canceling at the last minute.

5. Dress professionally. Even though you are not a part of the program at this time, you are still viewed as a representative of Zane State College. Please be neat and clean and wear what is considered “professional and/or business wear” by the general public. This includes neat hair and nails and no jewelry in piercings other than in your ears. Specifically, no jeans (of any color), no shirts with advertising or writing on it, no athletic/workout clothing, no sandals, no hats, and nothing sleeveless should be worn. It is common to wear dress pants or khakis, polo type shirts, blouses, sweaters, and clean shoes—athletic shoes are acceptable. All clothing should be modest and fit appropriately.

6. It is absolutely unacceptable to use your cell phone during observation. Plan to leave it in your car or turn it off (not on vibrate).

7. Be interested. Research the field of physical therapy prior to observing. Do your homework but don’t be afraid to ask questions to learn. Be sensitive. Some questions may not be appropriate to ask in front of the patient.
8. Be ready to ask questions. However, if the therapist or assistant is involved in treatment, you may be advised to hold questions until treatment is completed.

9. Conform to any direction from the facility personnel immediately without question in the clinical setting. You may be asked to leave a treatment area if necessary. Wait in a non-treatment area and ask questions at a later time. Remember that the patient/client is the clinician’s first responsibility.

10. Understand that discussing a patient’s medical history, present illness, diagnosis, prognosis or treatment with other students, friends, or family is a violation of confidentiality. Uphold the patients' right to privacy. You may be asked to sign a written confidentiality form; take this seriously. It is a legal matter.

11. You may be requested to sign some forms to help with record keeping of observers/hospital visitors. Remember to ask the therapist or assistant to verify your observation in writing and include forms in your application folder.

12. When observing physical therapy, be sure to keep interactions related to the scope of physical therapy and the purpose of your visit. Remain professional at all times. If you become involved in a situation which is uncomfortable for you, seek assistance immediately.
Dear Clinician:

Thank you for allowing a potential Zane State College PTA student to observe in your facility. Your time is very much appreciated. Please complete the following checklist/comments at the student’s last observation time and return the form to the student for inclusion in their application folder. Additional comments via e-mail contact are welcome.

Thank you,
Lori Wahl, PT, DPT, Program Director
lwahl@zanestate.edu

Student Evaluation (please assess the student’s performance at your site)

Yes    No

☐    ☐ Punctuality/ Adhered to scheduled hours
☐    ☐ Actively participated in learning experience
☐    ☐ Demonstrated appropriate verbal and nonverbal communication skills
☐    ☐ Clothing/ appearance was professional and appropriate
☐    ☐ Refrained from using cell phone/wireless device

Additional comments (feel free to use the reverse of this page if necessary):

_______________________ has observed physical therapy in the Physical Therapy
Department at _____________________________ on the following dates and times:

(Facility Name)

Type of facility: ________________________________________
(please do not count lunch breaks as part of the total time)

Supervising PT/PTA
Signature (on lines below)

Date _____________     From ________ To ________  Total hours ___________  ______________________
Date _____________     From ________ To ________  Total hours ___________  ______________________
Date _____________     From ________ To ________  Total hours ___________  ______________________
Date _____________     From ________ To ________  Total hours ___________  ______________________
Date _____________     From ________ To ________  Total hours ___________  ______________________
Date _____________     From ________ To ________  Total hours ___________  ______________________

Total hours at this facility: ______

Clinic Contact Information:

___________________________           __________________ ____________
(Print Name)            (Phone Number)
Dear Clinician:

Thank you for allowing a potential Zane State College PTA student to observe in your facility. Your time is very much appreciated. Please complete the following checklist/comments at the student’s last observation time and return the form to the student for inclusion in their application folder. Additional comments via e-mail contact are welcome.

Thank you,
Lori Wahl, PT, DPT, Program Director
lwahl@zanestate.edu

Student Evaluation (please assess the student’s performance at your site)
Yes  No
☐  ☐ Punctuality/ Adhered to scheduled hours
☐  ☐ Actively participated in learning experience
☐  ☐ Demonstrated appropriate verbal and nonverbal communication skills
☐  ☐ Clothing/ appearance was professional and appropriate
☐  ☐ Refrained from using cell phone/wireless device

Additional comments (feel free to use the reverse of this page if necessary):

_______________________ has observed physical therapy in the Physical Therapy Department at _____________________________ on the following dates and times:

(Facility Name)

Type of facility: _________________________________________ (please do not count lunch breaks as part of the total time)

Supervising PT/PTA
Signature (on lines below)

Date _____________     From ________ To ________  Total hours ___________  ______________________

Date _____________     From ________ To ________  Total hours ___________  ______________________

Date _____________     From ________ To ________  Total hours ___________  ______________________

Date _____________     From ________ To ________  Total hours ___________  ______________________

Date _____________     From ________ To ________  Total hours ___________  ______________________

Date _____________     From ________ To ________  Total hours ___________  ______________________

Total hours at this facility: _______

Clinic Contact Information:

___________________________           __________________ ____________
(Print Name)            (Phone Number)
Dear Clinician:

Thank you for allowing a potential Zane State College PTA student to observe in your facility. Your time is very much appreciated. Please complete the following checklist/comments at the student’s last observation time and return the form to the student for inclusion in their application folder. Additional comments via e-mail contact are welcome.

Thank you,
Lori Wahl, PT, DPT, Program Director
lwahl@zanestate.edu

Student Evaluation (please assess the student’s performance at your site)

Yes  No

☐  ☐ Punctuality/ Adhered to scheduled hours
☐  ☐ Actively participated in learning experience
☐  ☐ Demonstrated appropriate verbal and nonverbal communication skills
☐  ☐ Clothing/ appearance was professional and appropriate
☐  ☐ Refrained from using cell phone/wireless device

Additional comments (feel free to use the reverse of this page if necessary):

_______________________ has observed physical therapy in the Physical Therapy
Department at _____________________________ on the following dates and times:

(Facility Name)

Type of facility: _________________________________________

(please do not count lunch breaks as part of the total time)

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<tr>
<th>Date</th>
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Total hours at this facility: _______

Clinic Contact Information:

___________________________           __________________ ____________
(Print Name)            (Phone Number)
# Physical Therapist Assistant (PTHA)
## Course of Study 2018-2019

### Summer Session I

<table>
<thead>
<tr>
<th>Course ID</th>
<th>Course Name</th>
<th>T/3/G</th>
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**Total:** 9

### Fall I

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**Total:** 15

### Spring I

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**Total:** 14

### Curriculum Summary:
- General (G)/Basic (B) = 30 Hours
- Technical (T) = 34 Hours
- Total Curriculum Hours = 64

### Fall II

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<tr>
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<td>PTHA 2300</td>
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**Total:** 14

### Spring II

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<td>*Social &amp; Behavioral Science Elective</td>
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**Total:** 12

### Summer Session II

**Total:**

**NOTE:** Students must complete the computer literacy requirement in order to graduate which may be met through competency testing or completion of a program specific computer course. Refer to the degree audit and consult with the program advisor for the appropriate course(s) that meet the computer literacy requirement.

**ADDITIONAL INFORMATION ON REVERSE**
**Students who plan to transfer to a four-year institution should select an OTM approved course**

<table>
<thead>
<tr>
<th>Arts &amp; Humanities Electives</th>
<th>Communication Electives</th>
<th>Mathematics Electives</th>
<th>Social &amp; Behavioral Science Electives</th>
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<tbody>
<tr>
<td>AMSL 1010  American Sign Language I</td>
<td>COMM 1220 Interpersonal Communication</td>
<td>MATH 1050 Quantitative Reasoning</td>
<td>PSYC 1010 Introduction to Psychology **</td>
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<td>ARTS 1010  Art History II**</td>
<td>COMM 2630 Public Speaking**</td>
<td>MATH 1050 Statistics**</td>
<td>SOCI 1010 Introduction to Sociology**</td>
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<td>ENGL 2500  American Literature: Civil War to Present**</td>
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<td>PHIL 1010  Introduction to Philosophy**</td>
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<td>PHIL 1020  Introduction to Ethics**</td>
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