



SCHOOL OF HEALTH PROFESSION AND EDUCATION
DOCTOR OF PHYSICAL THERAPY PROGRAM

Clinical Observation Form

Knowledge of the profession through clinical observation, work or volunteer experiences with a licensed physical therapist is required before starting the Doctor of physical therapy program at Utica College to provide a broad overview of the profession. Candidates must complete a total of **forty** (40) hours, in two different practice settings with a minimum of **ten** (10) hours of observations in an inpatient setting (see page 3 for details). Complete this Clinical Observation Form for each experience separately.

The time you spend with a Physical Therapist should provide you with a realistic perspective of the physical therapy practice. Please have the supervising Physical Therapist complete and sign this form. You must return the completed form to the following address: School of Health Professions & Education, Utica College, White Hall # 230, 1600 Burrstone Road, Utica, NY 13502.

All observation forms must be completed and **submitted by June 1st**.

Student Name _____

Facility Name _____

Facility Address _____

Facility Phone: _____

Type of Setting: Outpatient Acute Rehab Other _____

Total Observation Hours: _____

In what capacity? Observation Volunteer Work Other specify) _____

Additional Comments: *On the reverse of this form or on a separate sheet, please identify qualities of this student that you believe will help the student successfully complete the DPT program at Utica College.*

Signature of supervising Physical Therapist, Institution and Department

Print Name, Title and Date

Thank you for your assistance. We greatly appreciate your willingness to allow our potential students to observe and participate.



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Guidelines for Volunteer Hours of Physical Therapy Experience

The following are recommended experiences for the required 40 volunteer hours:

1. Observe the initial examinations of patients including physical therapy measurement of strength, range of motion, gait, function, and other specialized tests and measures.
2. Observe physical therapy interventions such as therapeutic exercise, manual therapy, functional training, gait training, and adjunct treatment modalities.
3. Become familiar with the equipment and technology used in the physical therapy department.
4. View a blank patient billing sheet and physical therapy notes/documentation in various physical therapy settings.
5. Observe physical therapy interventions with patients who have a variety of conditions.
Examples:
 - a) Orthopedic (Patients with the diagnoses of low back strain, cervical/neck strain, rotator cuff tear, total knee replacement)
 - b) Neurologic (Patients with the diagnoses of cerebral vascular accident (CVA) – stroke, traumatic brain injury, spinal cord injury)
 - c) Cardiopulmonary (Patients with the diagnoses of chronic obstructive pulmonary disease, myocardial infarction)
 - d) Pediatric (Patients <21 years with diagnoses of cerebral palsy, spina bifida, muscular dystrophy)
 - e) Geriatric (Patients >65 years with diagnoses of osteoporosis, total hip replacement, cancer, Parkinson's disease, Alzheimer's).
6. Please find opportunities to observe in a variety of settings. It is required that at least 10 of the 40 hours of observations in an in-patient facility such as:
 - a) Acute Care Hospitals
 - b) Short-term Inpatient Rehabilitation
 - c) Skilled Nursing Facilities
 - d) Long-term Inpatient Rehabilitation
7. Please find opportunities to observe in a variety of settings. It is required that the at least 10 of the 40 hours of observations in other facilities such as:
 - a) Outpatient physical Therapy Clinic
 - b) School Systems
 - c) Home Health