

**The University of Texas at El Paso
College of Health Sciences
Doctor of Physical Therapy Program**

PT 6311

Musculoskeletal I: Spine

Summer 2021

COURSE SYLLABUS

Credit Hours: 3

Contact Hours: 75
Lecture: 30; Lab: 45; Clinic: 0

Schedule:

Monday	8:15 – 10:10 am	Lecture, Rm 113, All, ZOOM
	1:30 – 4:30 pm	Lab, Rm 113, Group A
Wednesday	1:30 – 4:30 am	Lab, Rm 113, Group B
Friday	10:30 – 12:10 pm	Lecture, Rm 113, All ZOOM
	1:30 – 3:30 pm	Lab, Rm 113, Group A
	3:30 – 5:30 pm	Lab, Rm 113, Group B

COVID-19 Notice: This course has temporarily transitioned to a blended learning format with a mix of virtual (online) and face-to-face (F2F) delivery and assessment. **Blue italicized text indicates syllabus additions to align with this transition.**

Coordinator/Instructor(s):

Faculty: Bryan Boyea, PT, DPT, OCS
Office: Campbell Building, Rm # 310
Phone: 915.346.9631 (cell)
E-mail: blboyea@utep.edu
Office Hours: Mon 11:00-12:30; Wed 11:30-1:30, Fri 12:00-1:00 pm
To schedule: go to <https://calendly.com/dr-boyea>
Virtual Hours are via Zoom platform.
The Calendly application automatically creates a Zoom meeting.
I HIGHLY recommend adding the appointment to your calendar.
VERIFY the appointment is set at the correct time on your calendar (to avoid missing meetings due to time zone issues).

Teaching Assistants:

TBD – potentially assist during lab sessions (virtual or F2F)
Harry Koster, PT, MDT, Volunteer Lab Assistant
WBAMC DPT Interns, Supervised Lab Assistants

The following guest lecturers developed and presented the following essential lectures and associated content for this course.

- Kathy Roth, PT, DPT
 - Introduction to Pelvic Floor Dysfunction and Urinary Incontinence. Student Contact Lecture Time: 1.5 hours

- Introduction to Temporomandibular Joint Dysfunction. Student Contact Lecture Time: 1 hour
- Hector Rodriguez, PT, DPT, FAAOMPT, Dip. Osteopractic
 - Sacroiliac Joint Dysfunction, Student Contact Lecture Time: 1 hour
 - Cervicogenic Headaches, Student Contact Lecture Time: 1.3 hours

Course Description: This course focuses on the examination, evaluation, and management of patients/clients with surgical and non-surgical orthopedic conditions of the cervical, thoracic, and lumbar spines; temporomandibular joint, pelvis, sacroiliac and pubis joints including the management of orthotics.

Course Prerequisites for DPT Students: The UTEP DPT Program curriculum is a lock-step curriculum. Therefore, students must pass all courses in the prior semester of the DPT Program to enroll in courses in the subsequent semester. Faculty may consider exceptions for PT 6116 PT Capstone Project I and PT 6117 PT Capstone Project II.

Course Objectives: Upon completion of this course, for patients/clients with common surgical and non-surgical spinal musculoskeletal conditions in direct access and referral-based patient care settings, the student should be able to:

Overarching Objectives:

- Demonstrate a safe, evidence-based, and efficient patient-centered psychomotor examination skills, diagnosis, goals establishment, intervention prescription, and management plan of care including referral as indicated. [Bloom's Taxonomy=Application]
- Evaluate (defend) the clinical reasoning supporting your examination, diagnosis, goals, interventions, management, and referral decisions accurately and consistent with evidence-based practice and The UTEP DPT Program Clinical Reasoning Framework. [Application]

Composite Objectives:

- 1) Demonstrate professional behaviors that reflect integrity, positivity, confidence, mutual respect, and self-assessment. (7D4, 7D5) [Application]
- 2) Demonstrate communication that is effective, professional, and appropriate. (7B-Communication, 7D7) [Application]
- 3) Demonstrate subjective examinations that are patient centered, relevant, and evidence-based using intake forms, focused questions, review of systems, medical records, medication history, diagnostic and ancillary studies, and other sources as needed. (7D17) [Application]
- 4) Demonstrate physical examinations that are relevant, efficient, and evidence-based to identify pain and dysfunction of musculoskeletal and non-musculoskeletal origin. (7B-EBP, 7D18) [Application]
- 5) Select tests and measures that are safe, relevant, and evidence-based including: [Evaluation]
 - a) Peripheral nerve integrity (7B-Clinical Reasoning (CR), 7B-EBP, 7D19g)
 - b) Gait (7B-CR, 7B-EBP, 7D19i)

- c) Joint integrity and mobility (7B-CR, 7B-EBP,7D19k)
 - d) Motor function (7B-CR, 7B-EBP, 7D19n)
 - e) Muscle Performance (7B-CR, 7B-EBP,7D19o)
 - f) Pain (7B-CR, 7B-EBP, 7D19q)
 - g) Posture (7B-CR, 7B-EBP, 7D19r)
 - h) Range of motion (7B-CR, 7B-EBP, 7D19s)
 - i) Reflex integrity (7B-CR, 7B-EBP, 7D19t)
 - j) Sensory integrity (7B-CR, 7B-EBP,7D19u)
 - k) Skeletal integrity (7B-CR, 7B-EBP, 7D19v)
- 6) Evaluate data from a patient/client examination to establish the need for further examination or consultation by a physical therapist or a referral to another health care professional. This is diagnostic Clinical Reasoning. (7A-Dx Imaging, 7A-Pharmacology, 7A-Psychosocial Aspects, 7B-CR, 7C-DDX, 7C-Musculoskeletal, 7C-Nervous System, 7D16, 7D20, 7D22, 7D35) [Evaluation]
 - 7) Evaluate data from a patient/client examination to establish a clinical diagnosis using hypothesis stratification to make clinical therapeutic decisions. This is therapeutic Clinical Reasoning. (7B-Common Med-Surg Conditions, 7B-CR, 7C-DDX, 7C-Musculoskeletal, 7C-Nervous System, 7D20, 7D22) [Evaluate]
 - 8) Formulate relevant impairments in body structure and function that lead to patient/client activity limitations and/or participation restrictions. (7C-Musculoskeletal, 7D21) [Synthesis]
 - 9) Formulate rehabilitation goals that align relevant impairments, patient/client goals, contextual factors and prognosis to enhance the patient/client's functioning. (7C-Musculoskeletal, 7D10, 7D11, 7D23) [Synthesis]
 - 10) Select interventions that are safe, evidence-based, and relevant to achieve the established goals, including: [Evaluation]
 - a) Assistive technology (orthoses or prostheses) (7B-CR, 7B-EBP, 7D27b)
 - b) Functional training (7B-CR, 7B-EBP, 7D27d)
 - c) Manual Therapy techniques (7B-CR, 7B-EBP, 7D27f)
 - d) Motor function training (including gait) (7B-CR, 7B-EBP, 7D27g)
 - e) Patient/client education (7A-Neuroscience, 7B-CR, 7B-EBP, 7D27h)
 - f) Therapeutic exercise (7B-CR, 7B-EBP, 7D27i)
 - 11) List appropriate patient-reported health outcomes measures and standardized tests and measures that address impairments, functional status, and participation. (7D31) [Knowledge]
 - 12) Demonstrate documentation of components of the patient/client encounter in a manner that communicates clear, concise, and complete information. (7D32) [Application]
 - 13) List clinical criteria and indications for referral to other medical providers for patients/clients presenting with conditions outside the scope of physical therapy. (7D33) [Knowledge]
 - 14) Apply the lessons learned from your participation in an interprofessional educational experience that would contribute to effective interprofessional collaborative practice in your future physical therapist practice. (7D39) [Application]

- 15) Establish a safe, evidence-based, and effective plan of care for patients/clients with common musculoskeletal conditions in collaboration with patients/clients, family members, and other healthcare professionals. (7B, 7D20, 7D24) [Synthesis]

***NOTE** "Patients/clients" refers most commonly to simulated patients/clients in written cases.

Methods of Instruction: A wide variety of instructional methods are utilized to facilitate acquisition of course objectives. Both synchronous (all students together at the same time) and asynchronous approaches (complete lectures and activities on your own time by assigned due dates) are utilized. Methods include Lecture, assignments and readings, active and experiential learning activities, team-based learning, video tape self-analysis and self-reflections, virtual (video) skill demonstrations and F2F hands-on practice of psychomotor skills, role playing, and use of simulated patient cases.

Methods of Evaluation: Student competence and attainment of course objectives are assessed using a variety of methods. These methods and their contribution to the final grade are listed in the table below.

<u>Item</u>	<u>Grade Composition</u>
Quizzes	20%
Lab Assignments	10%
Midterm Skills Check (F2F)	10%
Midterm Exam	15%
Final Practical Exam (Comprehensive) (F2F)	20%
Final Exam (Comprehensive)	25%
Total	100%

Grading Scale: The following letter grade scale is used for the UTEP Doctor of Physical Therapy Program:

<u>Letter Grade Scale</u>	<u>Numerical Grade Scale</u>
A	90-100
B	80-89
C	75-79
F	Below 75

Technology Requirements

1. *Computing device with video camera is required. The computer device must be able to support Respondus Lock Down Browser used to enhance the integrity of quizzes and exam completed online. Note: Tablets and cell phones are poorly suited to accomplish most doctoral level readings, assignments, activities, and research requirements of the program.*
2. *Reliable internet connection and data access.*
3. *Cloud Storage. Students will need to establish and become proficient with Microsoft OneDrive for Business ([link](#)). This cloud service works like google drive as it allows multiple users to share and work simultaneously on a document. The*

benefit of OneDrive for Business over google drive and others is document formatting is retained (this formatting is often lost when you export your google doc to a word document).

Video-Audio Recording (an additional need during COVID-19 virtual labs):

1. *Ability to record video and audio and share video performance of psychomotor skills (tests & measures and interventions). The preferred method is the ability to “live stream”.*
2. *Many methods exist including webcams, cell phones, and Go Pro type video devices. A relatively low-cost (~\$20) option is to purchase a cell phone holder (head, chest, or tripod mounted). Alternatively, if you have extra hands available, another person can hold the recording device. The goal is to free up your hands so you can demonstrate various psychomotor skills.*
3. If you encounter technical difficulties of any kind, contact the [Help Desk](#).

Required Texts – Primary

Note: These 4 resources will be used in MSK-I, II & III (semesters 4, 5, & 6).

1. Magee DJ. *Orthopedic Physical Assessment*. 6th ed. St. Louis, MI: Elsevier Health Sciences; © 2014. ISBN: 9781455709779
2. Magee DJ, Quillen WS, Manske RC et al. *Pathology and Intervention in Musculoskeletal Rehabilitation*. 2nd ed. Elsevier Health Sciences; © 2016. ISBN: 9780323310727
3. Dutton M. eds. *Dutton's Orthopaedic Examination, Evaluation, and Intervention*. 4th ed. McGraw-Hill; © 2017. FREE Online at the UTEP Library Accessphysiotherapy site ([link](#)) (be sure to use the 4th ed).
4. *PhysioU Clinical Pattern Recognition* [Computer software]. Version 2.8.19. Claremont, CA: Michael Wong, Clinical Pattern Recognition, LLC; 2021 ([link](#))

Required Texts (Foundational resources used in prior DPT coursework):

1. Biel A. *Trail Guide to the Body Workbook. Book of Discovery*. 5th ed; Parson; © 2014. ISBN: 9780982978665
2. Ciccone CD. *Pharmacology in Rehabilitation. 5E*. © 2016. ISBN: 9780803640290 FREE online at the UTEP library Accessphysiotherapy, F.A. Davis Site ([link](#))
3. Goodman CC, Heick J, Lazaro R. *Differential Diagnosis for Physical Therapist*. 6th Ed. © 2018. ISBN: 9780323478496
4. Hislop HJ, Avers D, Brown M. *Daniels and Worthingham's Muscle Testing, Techniques of Manual Examination and Performance Testing*. 9th ed. Saunders; © 2014. ISBN: 9781455706150
5. Kisner C, Colby LA, Borstad J. *Therapeutic Exercise: Foundations and Techniques*. 7th ed; F.A. Davis Company; © 2018. ISBN: 9780803658509 FREE online at the UTEP library Accessphysiotherapy, F.A. Davis Site ([link](#))
6. McKinnis, LN. *Fundamentals of Musculoskeletal Imaging*. 4th Ed. © 2014. ISBN: 9780803638211 FREE online at the UTEP library Accessphysiotherapy, F.A. Davis Site ([link](#))
7. Neumann DA. *Kinesiology of the Musculoskeletal System: Foundations for Rehabilitation*. 3rd ed. Mosby (Elsevier); © 2017. ISBN: 9780323287531

8. Norkin CC, White DJ. *Measurement of Joint Motion, A Guide To Goniometry*. 5th ed. F.A. Davis; ©2017. ISBN: 9780803645660
FREE online at the UTEP library Accessphysiotherapy, F.A. Davis Site ([link](#))
9. O'Sullivan S, Schmitz T. *Physical Rehabilitation*. 6th ed. Thomson Delmar Learning; © 2014. ISBN: 9780803625792
FREE online at the UTEP library Accessphysiotherapy, F.A. Davis Site ([link](#)) (7th ed., © 2019 not yet available)

*Note: There may be selected assignments from these textbooks but also, as they are foundational knowledge textbooks, you should refer to these to solidify prior knowledge as needed in the absence of specific assignments. Additionally, you should refer to journal articles and other peer-reviewed sources to develop your musculoskeletal acumen. Peer reviewed sources could include published clinical practice guidelines, systematic reviews on evaluative and interventional topics, and randomized controlled trials. When former sources are not available lower levels of evidence can be utilized.

Recommended Texts and Resources – Online and FREE thru UTEP library:

1. Anatomy.TV online ([link](#))
2. Brumitt J. *Physical Therapy Case Files: Orthopaedics*. McGraw Hill Professional; © 2013. ISBN: 9780071763776 ([link](#))
3. Boyles R, Flynn T, Whitmann J, Wainner R, Mintken P. *Spinal & Extremity Manipulation: The Basic Skill Set*. 2nd ed. © 2012. ISBN 978097147928 ([link](#))
4. Brumitt J, Jobst E. *Physical Therapy Case Files, Sports*. McGraw Hill Professional; © 2015. ISBN: 9780071821520 ([link](#))
5. Carp SJ. *Peripheral Nerve Injury*. FA Davis; © 2015. ISBN: 9780803625600
FREE online at the UTEP library Accessphysiotherapy, F.A. Davis Site ([link](#))
6. Shamus E. eds. *Quick Answers: Physiotherapy*. McGraw-Hill; © 2017. eISBN 9780071816113 ([link](#))
7. Wise CH. *Orthopaedic Manual Physical Therapy: From Art to Evidence*. © 2015. ISBN: 9780803614970 ([link](#))
8. Vald Telehab (Free) Exercise Prescription Platform ([link](#)) for practitioners, guided exercise for patients. (Web based, not fully developed for mobile phones or tablets).

Resources Available for Student Success:

- UTEP technology Support (Help Desk): Available via phone call, email and chat sessions. (915)747-4357, helpdesk@utep.edu, www.utep.edu/technologysupport

Confidential Resources:

- **Center for Accommodations and Support Services (CASS):** If you have or suspect a disability and need accommodations, you should contact the Center for Accommodations and Support Services (CASS) at 747-5148. You can also e-mail the office at cass@utep.edu or go by their office in Union Building East, room 106 (next to the UTEP post-office). For additional information, visit the CASS website at <http://sa.utep.edu/cass>.

- **The UTEP Student Health Center:** Union East Suite 100; 915.747.5624; www.utep.edu/chs/shc
- **The UTEP Counseling and Psychological Services:** 202 Union West, 915.747.5302; www.utep.edu/student-affairs/counsel

Additional Resources:

- Division of Student Affairs. 915.747.5076, www.utep.edu/student-affairs
- DPT Library Research Guide: <http://libguides.utep.edu/pt>
- University Writing Center: 915.747.5112. <https://uwc.utep.edu>
- Computer Labs: Independent Learning Center (ILC), 1st floor Campbell Building
- Military Student Success Center: 915.747.5342, www.utep.edu/student-affairs/mssc
- Student Wellness Program. 915.747.6738, www.utep.edu/chs/wellness
- **RefWorks:** A bibliographic citation tool; check out the RefWorks tutorial and Fact Sheet and Quick-Start Guide. www.refworks.com/refworks2/?groupcode=RWUTEIPaso

University Policies: All students are responsible for following UTEP policies and procedures found in the Handbook of Operating Procedures at www.utep.edu/vpba/hoop

Program Policies: All DPT students are responsible for following all policies and procedures documented in the current DPT Student Handbook. Course policies found in the DPT Student Handbook apply to all courses in the DPT curriculum. The current DPT Student Handbook may be found on the DPT Student Resources site on Blackboard.

Academic Integrity: The UTEP DPT Program has a “zero tolerance policy” for scholastic dishonesty. DPT students must demonstrate academic integrity at all times. The current DPT Student Handbook outlines specific definitions, expectations, details, and consequences related to academic integrity and scholastic dishonesty. Additional information related to academic integrity is available through the UTEP Division of Student Affairs at www.utep.edu/student-affairs/osccr/student-conduct/academic-integrity.html

Course-Specific Policies:

1. **Attendance Policy - Absences:** Refer to current DPT Student Handbook “Attendance and Classroom Behavior” for the DPT Program policy. Additional course-specific policy are as follows:
 - During **synchronous** classes and labs: Congruent with life’s unpredictability, I permit ONE excused absence of a single class or lab period per course per semester for any reason. For your first absence to be considered excused, you must email me at blboyea@utep.edu at least 2 hours in advance if you will not be attending class or lab. I do not require you to give me a reason. A phone call, text or message from one of your classmates is NOT acceptable.
 - If you miss a second (or more) class or lab for any reason, the additional missed time will be considered unexcused unless it is due to documented

illness or emergency. In these cases, you must email me to arrange a meeting to discuss why you missed class. Documentation will be required for any additional absence (e.g., doctor's note documenting illness or treatment). I will notify you after our meeting and review your documentation to determine if the absence will be considered excused or unexcused.

- Missing 50% or more of a class or lab will be considered an absence.
- There will be NO accommodations offered for missed class/lab time. Specifically, I will NOT offer the opportunity to make up in-class quizzes or written examinations, either in advance or after the scheduled class, or provide individual tutoring for missed content. Additionally, late work caused by your absence will not be accepted. You should make prior arrangements with a classmate to find out what you missed, turn in any work, and/or pick up any hand-outs.
- An exception may be considered for documented serious illness or emergency, but the exception is not automatic and must be requested by student to the professor in writing within 24 hours of return to DPT class attendance.
- Policy exception may be considered for documentable internet failure and connectivity issues.
- Due note, the quality of your internet experience can be monitored with BBCU.
- For each incident of an unexcused absence, 2.5% will be deducted from your final semester grade consistent with the UTEP DPT Handbook.

2. **Attendance Policy - Tardiness & Early Departures:** Refer to current DPT Student Handbook "Attendance and Classroom Behavior" for DPT Program policy. Additional course-specific policy is as follows:

- During **synchronous** classes and labs: Students are expected to be on time and prepared to begin class at the scheduled class start time; therefore, students who are tardy will be penalized as these actions can negatively impact the learning of peers and are considered unprofessional.
- Due to life uncertainties, weather, and traffic issues, 1 tardiness or early departure of up to 15 minutes will be reluctantly tolerated and considered excused (primarily for safety purposes). If you are running late and you can SAFELY due so, contact me directly via email or text.
- Although discouraged, tardiness or early departure (for a Doctor's appointment for example) could potentially be an excused absence provided prior approval is granted by the professor. To request approval, you must email and discuss the request with me at least 24 hours prior to event. More commonly, these are coordinated days or weeks in advance during non-class times.
- It is the responsibility of the student to obtain any materials presented in class and to ensure assignments are turned in on time. Further, there will be NO accommodations offered for missed class/lab time (see attendance section above for specifics).
- Each unexcused incidence of tardiness &/or early departure will result in 1% deduction from your final semester grade.
- Note: I use the clock on the classroom computer to determine actual time.

- **NOTE:** Being “on time” in the online learning environment means that you have arrived into the virtual classroom & are fully “connected” PRIOR to the start of class.
3. **Electronic Devices:** Refer to current DPT Student Handbook “Electronic Devices” for DPT Program policy. Additional course-specific policy is as follows:
- Electronic devices are allowed in the classroom to perform educational related activities only.
 - Do not use electronic devices during class or lab for non-educational purposes (social media, texting, etc. are prime examples of non-approved usage).
 - Failure to comply will result in 1 verbal warning. Each incident beyond the initial verbal warning will result in written notification and a 1% grade point deduction from your final semester grade.
4. **Professional Behavior Policy:** See DPT Student Handbook “Attendance and Classroom Behavior”, “Professional Behaviors” and “Unprofessional Behavior:” for general program policy. Additional course-specific is as follows:
- As all program faculty do, I believe that doctoral students should demonstrate their commitment to the profession and respect for faculty, guest speakers, and colleagues by attending all classes/labs, and arriving to class on time.
 - Failure to foster a positive learning environment, arrive to class prepared and on time, to participate actively, or interfering with the learning of peers are a few examples of unprofessional behavior.
 - Failure to comply will result in 1 verbal warning. Each incident beyond the initial verbal warning will result in written notification and a 1% grade point deduction from your final semester grade.
 - If the student’s actions negatively impact the classroom environment, the student will be warned one time and if the behavior continues the student will be excused from class for the day and the class session will be considered an unexcused absence.
 - The online learning environment is generally not optimally conducive to promoting a professional environment. Dogs bark and kids scream, and most of us have “offices” in bedrooms. I understand that flexibility is necessary. However, I expect students to be sitting or standing upright during class – as opposed to lying down. Lying down would not be acceptable in a face-to-face classroom. Additionally, I expect your cameras to be turned on so that we may maximize our engagement with each other; I consider having your camera on to be a component of active participation. Mute your microphone when you are not contributing to the discussion in the virtual classroom to avoid being unnecessarily disruptive. If you must “leave” briefly (eg, to go to the toilet), then please use the relevant online symbol to indicate to me that you have “stepped out” or send me a private message in the Chat box.
 - If your Internet bandwidth is too poor to allow consistent use of video, please contact me to discuss it.
 - Due note, the quality of your internet experience can be monitored with BBCU.
 - **Netiquette** – Online activities and communications require additional considerations.

- Students will be professional, courteous, and respectful with all written communications. Remember, written posts are for eternity – think before you hit the “enter” button.
 - When reacting to someone else’s message, address the ideas, not the person. Post only what anyone would comfortably state in a F2F situation.
 - Inappropriate online activity will not be tolerated. Instances of perceived Cyber-Harassment, Cyberbullying, Cyberstalking and Flaming will be immediately forwarded to OSCCR for investigation and potential sanctions.
 - Blackboard is not a public internet venue; all postings to it are considered private and confidential. Whatever is posted on in these online spaces is intended for classmates and professor only. Do not copy documents and paste them to a publicly accessible website, blog, or other space.
 - Please refer to Netiquette Guide ([link](#)) for specific additional guidance
5. **Late or Missed Assignments and Assessments Policy:** See current DPT Student Handbook “Written Examination Policy”. Additional course-specific policy is as follows:
- Late or missed submissions of assignments will result in a grade of zero for the assignment. Under rare, extenuating circumstances, partial credit may be awarded at the discretion of the faculty.
6. **Skills Check Policy:**
- Refer to the DPT Student Handbook “Skills Check Policy” for details.
 - Do not discuss details of your skills checks or practical examination with peers. This includes not discussing the cases, specific T&M, details about the examination process, feedback received, or other information that might give your peer a "heads-up" and unfair advantage. Sharing of this information is considered cheating by both the giver(s) and the receiver(s).
7. **Practical Exam Policy:**
- Refer to the DPT Student Handbook “Practical Exam Policy” for details.
 - Do not discuss details of your skills checks or practical examination with peers. This includes not discussing the cases, specific T&M, details about the examination process, feedback received, or other information that might give your peer a "heads-up" and unfair advantage. Sharing of this information is considered cheating by both the giver(s) and the receiver(s).
8. **Expectations to promote Success**
- Students attaining a grade below 80% on any quiz, exam, or assignment are expected to schedule a meeting with Dr. Boyea. The goal is to ensure comprehension of the material, identify strategies to improve student performance, and determine if alternative teaching methods may enhance learning. Our goal is for your success.
 - Students will practice orthopedic evaluation and intervention psychomotor skills on a variety of body types for at least 3-4 additional hours weekly outside of dedicated lab times. This is the minimal time required to attain basic competence and reliable/valid orthopedic physical exam testing. Repeatedly performing the MSK examination process on multiple body types is essential to

develop the precision, efficiency and the mental adaptability that will be required during clinical rotations. Practice, practice, practice.

- Additionally, it is essential to practice manual therapy intervention techniques on multiple body types to refine your palpation, joint mobility and soft-tissue assessment precision and efficiency. Students will not develop the required competency and efficiency if they only practice these skills in scheduled lab sessions.

9. Academic Integrity (continued): In addition to the information presented above, additional course specific details follow.

- **Junior Cohorts:** NO COURSE content will be shared with junior cohorts.
- **Testing:** To accurately reflect the individual's knowledge contained within their grey matter and ensure a fair, unbiased and unassisted testing, I reserve the right to control the test environment. Controls may include (non-exhaustive list) assigned seating, issued blank paper, randomized questions, use of security software (such as Respondus Lock Down Browser [with webcam](#)) and ensuring all electronics and other materials that might contain or be able to record information is stowed away from student's access.
- **Recording:** Students' are not authorized to record and/or share any testing activities (quizzes, exams, skills checks, practical exams, or other testing scenarios). Further, graded assignments and activities will not be shared unless assignment directions specifically state the activity will be shared. "Recording" includes but not limited to any method used to retain information for future use to include but not limited to audio or video capture, screen shots, pictures, etc. The recording and/or sharing of graded materials is considered cheating regardless of how obtained, distributed or used (or not used).
- **Recording:** Student recording of classroom lectures, labs, or other activities is not authorized. If you feel recording of a specific non-graded activity is needed, students must attain instructor approval PRIOR TO recording. Further, authorization by student(s) being recorded must be attained. If approved, recordings are for local, UTEP student educational use only and will not be posted to unsecure, public social media sites. Acceptable site is Microsoft OneDrive (and share the file), email through your UTEP email account.
- **Labs:** Labs are generally divided into two groups to enhance professor to student ratio and student learning. Do not share answers, outcomes, cases or other materials used during the labs with the other lab group. Actively completing labs assignments (without the answers) from start to finish is essential to the active learning, retention, reflection, and clinical reasoning process.

10. Discussion Boards (TIPS from UTEP's Center for Instructional Design):

- **Language:** Given the absence of face-to-face clues, written text can easily be misinterpreted. Avoid the use of strong or offensive language and the excessive use of exclamation points. If you feel particularly strongly about a point, it may be best to write it first as a draft and then to review it, before posting it, to remove any strong language.
- **Be Forgiving:** If someone states something that you find offensive, mention this directly to the instructor. Remember that the person contributing to the

discussion is also new to this form of communication. What you find offensive may quite possibly have been unintended and can best be cleared up by the instructor.

- **This is Permanent:** Think carefully about the content of your message before contributing it. Once sent to the group, there is no taking it back. Also, although the grammar and spelling of a message typically are not graded, they do reflect on you, and your audience might not be able to decode misspelled words or poorly constructed sentences. It is a good practice to compose and check your comments in a word-processor before posting them.
- **Test for Clarity:** Messages may often appear perfectly clear to you as you compose them but turn out to be perfectly obtuse to your reader. One way to test for clarity is to read your message aloud to see if it flows smoothly. If you can read it to another person before posting it, even better.
- **Remember Your Place:** A Web-based classroom is still a classroom, and comments that would be inappropriate in a regular classroom are likely to be inappropriate in a Web-based course as well. Treat your instructor and your fellow students with respect.
- **Follow the Parameters/ Stick to The Point:** Follow the posting requirements and parameters set up by your professor. Contributions to a discussion should have a clear subject header, and you need to stick to the subject. Don't waste others' time by going off on irrelevant tangents.
- **Read First, Write Later:** Don't add your comments to a discussion before reading the comments of other students unless the assignment specifically asks you to. Doing so is tantamount to ignoring your fellow students and is rude. Comments related to the content of previous messages should be posted under them to keep related topics organized, and you should specify the person and the particular point you are following up on.

Course Content and Schedule: Comprehensive orthopedic-based examination of the spine including the cervical, thoracic, lumbar spine and pelvis in disease, injury and post-surgical conditions using evidence-based tests, measures and specialized evaluative techniques. Clinical reasoning developed to establish physical therapy diagnosis and evidence-based treatment interventions focusing on manual therapy and therapeutic exercise. (Note: Students will be notified of changes via Blackboard or email. Additional details may be available in supporting course documents provided by the course instructor).

Additional Content:

- **Interprofessional Education (IPE):** Refugee Case Discussion, date per schedule. This is a mandatory class experience. Non-attendance will result in a 2% deduction in course final grade. Grade for required reflection paper is a component of lab assignment grades.

Course Outline:

- Course outline/schedule subject to change
- See weekly assignments and objectives posted to BB.

- See course schedule document posted to BB.

As we discussed in Kin lab briefly, to make the semester most manageable, there will be some work that needs to be done prior to semester start.

- *Week 0 Preparatory Assignments and objectives – recommend completing by early next week.*
- *Week 1 Assignments and objectives - recommend completing by May 31.*

COURSE OUTLINE / SCHEDULE:

- Course outline/schedule subject to change
- See weekly assignments and objectives posted to BB.

Weeks will be numbered Week 0 thru Week 9

Week 0 = Preparatory week

- NO CLASSES OR LABS
- Preparatory work prior to actual course start date as previously discussed.

Week 1 = Start of Zoom classes and F2F labs

NOTES:

- **Bolded items** in table below are variations from standard schedule.
- **Times: Only showing times different from syllabus**
- **Assignments:** See blackboard “Assignments” for assignment instructions.

Week 0	Activity	Content
No class/labs	Self-Review	<ul style="list-style-type: none"> • Preparatory Assignments and objectives posted to blackboard • Recommend completing by May 27-28
Week 1		
June 01, Tue	Assignment	<ul style="list-style-type: none"> • Objective Exam outline (See BB for details)
June 02, Wed 1:30-4:30	Quiz Lecture (via Zoom)	<p>DAY 1 – WELCOME ALL 23'S (BOTH LABS)</p> <p>Quiz:</p> <ul style="list-style-type: none"> • All Wk0 & Wk1 Wed assignments & objectives • We will break approx. 30 minutes into lecture to take 30 min quiz via Respondus with webcam then return to Zoom for lecture. <p>Lecture:</p> <ul style="list-style-type: none"> • Intro, MSK series overview • Clinical Reasoning • LBP TBC Intro / Symptom Modulation Category
June 04, Fri 10:30-12:10	Lecture (All)	<ul style="list-style-type: none"> • Quiz Review & Study Guidance • TBC SM Review • Activity: Objective Exam & Precis • Lab Prep: Palpation, Access Mobility
June 04, Fri	--	No Labs (moved to Saturday)
June 04, Fri	Assignment	Subjective Exam outline
June 04, Fri	Assignment	LQ Neuro Screen Video Quiz

June 04, Fri	Assignment	Group Objective Exam
June 05, Sat 9:00-12:00	Lab A Lab B	<ul style="list-style-type: none"> • Lab Intro and Safety • Palpation • Accessory Mobility Testing
Week 2		
June 06, Sun	Assignment	LBP TBC Integrative Questions and Chart
June 07, Mon	Quiz Lecture (via Zoom)	<p><i>*Below is standard Monday lecture format.</i></p> <p>QUIZ (at 8:15):</p> <ul style="list-style-type: none"> • Prior to lecture, log directly into respondus. • Content: Assignments & objectives for Mon and prior Fri lecture/lab content. <p>Lecture (start 8:35 via Zoom)</p> <ul style="list-style-type: none"> • Quiz Review • TBC – Movement Control Category • Assignment Discussion: LBP TBC IQ & Chart • Assignment Review: LBP TBC Synthesis
June 07, Mon	Lab A	No Lab (moved to Wed due to Oral Def)
June 09, Wed 1:30-4:30	Lab A, 113 Lab B, 115	<ul style="list-style-type: none"> • Round Robins (prior lab skills) • MSRP and Additional Neuro Tests
June 11, Fri	10:30-12:10	• Lecture (All)
June 11, Fri	1:30-3:30	• Lab A
June 11, Fri	3:30-5:30	• Lab B
Week 3		
June 14, Mon	Time	• Activity
June 14, Mon	8:15-10:10	• QUIZ (at 8:15) followed by Lecture
June 14, Mon	1:30-4:30	• Lab A
June 16, Wed	1:30-4:30	• Lab B
June 17, Thu	Assignment	LBP TBC Synthesis Case Development
June 18, Fri	10:30-12:10	• Lecture (All)
June 18, Fri	--	• No Labs due to IPE, Labs moved to Saturday
June 19, Sat	8:30-10:30	• Lab A
June 19, Sat	10:30-12:30	• Lab B
Week 4		
June 21, Mon	8:15-10:10	• QUIZ (at 8:15) followed by Lecture
June 21, Mon	1:30-4:30	• Lab A
June 23, Wed	1:30-4:30	• Lab B
June 25, Fri	10:30-12:10	• Lecture (All)
June 17, Thu	Assignment	IPE Reflection Paper
June 25, Fri	1:30-3:30	• Lab A
June 25, Fri	3:30-5:30	• Lab B
Week 5		
June 28, Mon	8:15-10:10	• QUIZ (at 8:15) followed by Lecture
June 28, Mon	1:30-4:30	• Lab A
June 30, Wed	1:30-4:30	• Lab B
July 02, Fri	10:30-12:10	• MIDTERM via Respondus (No lecture)

July 02, Fri	1:30-3:30	• Lab A
July 02, Fri	3:30-5:30	• Lab B
Week 6		•
June 05, Mon	Assignment	LBP TBC Synthesis Case Development
July 05, Mon	8:15-10:10	• QUIZ (at 8:15) followed by Lecture
July 05, Mon	1:30-4:30	• Lab A
July 07, Wed	1:30-4:30	• Lab B
July 09, Fri	10:30-12:10	• Lecture (All)
July 09, Fri	1:30-3:30	• Lab A, Rm 115
July 09, Fri	1:30-3:30	• Lab B , Rm 113 (Note earlier time)
July 10, Sat	8:30-11:30	• SKILLS CHECK (Time varies per student)
Week 7		•
June 11, Sun	Assignment	Cspine Imp-STG-Int Documentation
July 12, Mon	8:15-10:10	• QUIZ (at 8:15) followed by Lecture
July 12, Mon	1:30-4:30	• Lab A
July 14, Wed	1:30-4:30	• Lab B
July 16, Fri	10:30-12:10	• Lecture (All)
July 16, Fri	1:30-3:30	• Lab A
July 16, Fri	3:30-5:30	• Lab B
Week 8	Time	• Activity
June 18, Sun	Assignment	Cspine CPG Synthesis
July 19, Mon	8:15-10:10	• QUIZ (at 8:15) followed by Lecture
July 19, Mon	1:30-4:30	• Lab A
July 21, Wed	1:30-4:30	• Lab B
July 23, Fri	10:30-12:10	• Lecture (All)
July 23, Fri	1:30-3:30	• Lab A
July 23, Fri	3:30-5:30	• Lab B
Week 9		•
July 26, Mon	8:15-10:10	• QUIZ (at 8:15) followed by Lecture
July 26, Mon	1:30-4:30	• Lab A
July 28, Wed	1:30-4:30	• Lab B
July 30, Fri	10:30-12:10	• Lecture (All)
July 30, Fri	1:30-3:30	• Lab A, Rm 115
July 30, Fri	1:30-3:30	• Lab B , Rm 113 (Note earlier time)
July 31, Sat	8:15-12:00	• PRACTICAL EXAM (Time varies per student)
Week 10		• FINALS WEEK
Aug 03, Tue	9:30-11:30	• FINAL WRITTEN EXAM
Aug 03, Tue	2:30-4:30	• Practical Retake (prn)