

# Doctor of Physical Therapy Program Phoenix Metro STUDENT HANDBOOK

Effective March 2026

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# 1. Introduction

Doctor of Physical Therapy Program Phoenix Metro (DPT AZ) faculty and students are expected to comply with the regulations and standards set forth in the Southern California University of Health Sciences (SCU) Academic catalog. This handbook provides information regarding procedures and requirements specific to the DPT AZ program not otherwise covered by University policies or defined in the SCU Academic catalog. Faculty employed and students enrolled in the program are expected to review and familiarize themselves with the information in this handbook.

SCU reserves the right to change any provision or requirement within this handbook at any time. Questions related to the content of the handbook should be directed to the DPT AZ Program Director.

## 2. Program Overview

The Doctor of Physical Therapy Program, culminating in the Doctor of Physical Therapy (DPT) qualification, is a 114-credit, professional degree program delivered through a hybrid model of online didactic and in-person hands-on instruction in the Phoenix Metro area in Arizona. The curriculum is delivered via an integrated sequence of asynchronous online sessions, online interactive synchronous sessions, in-person immersion laboratories, and on-ground clinical experiences. To complete the program, students are required to enroll full-time for 6 consecutive 16-week terms, including summer, for a total of 96-weeks of instruction over a 2-year period. Each 16-week term is subdivided into two 8-week sub-terms, of which 6-weeks is dedicated to asynchronous and synchronous didactic instruction, and 2-weeks is dedicated to in-person immersion laboratories. For clinical education courses, a full 8-week sub-term is dedicated to each of the first two full-time clinical experiences, while a full 16-week term is dedicated to the terminal clinical experience. For the didactic portion of the curriculum, asynchronous sessions are completed on the students' own time. Synchronous sessions are generally scheduled Monday through Friday from 8 am - 5 pm MST, although they may be scheduled on weeknights depending on program needs. In-person immersion laboratories are scheduled Monday through Sunday, depending on the number of laboratory hours associated with each laboratory-containing course, and may be scheduled at any time including during the evenings and on national and University holidays as required.

## 3. Program Vision Statement

DPT AZ will develop transformative leaders in integrative and whole-person care, who champion equitable and sustainable healthcare through humility and collaboration.

## 4. Program Mission Statement

DPT AZ prepares competent, caring, professional, and innovative Doctors of Physical Therapy who lead with integrity and deliver evidence-informed, equitable, and integrative healthcare. We foster an inclusive, collaborative learning environment imbued with kindness, humor, and determination, by engaging faculty, staff, and students in meaningful service within the program and the community. Our graduates thrive as leaders on interprofessional teams, advancing whole-person health.

## 5. Program Core Values

1. **Competent:** Demonstrates the knowledge, skills, and ethical reasoning commensurate with excellence in evidence-informed physical therapy practice. The competent entry-level physical therapist applies sound clinical judgment, integrates scientific evidence with patient/client values, preferences, and circumstances, and maintains professional standards to deliver safe, effective, and high-quality care.
2. **Caring:** Demonstrates authentic kindness, inclusivity, and cultural humility in all professional interactions. The caring entry-level physical therapist fosters trust through empathy, respect, and human connection, recognizing

the individuality of each patient/client and professional colleague while promoting whole-person well-being and compassion in the therapeutic and professional environments.

3. **Professional:** Demonstrates integrity, accountability, and a collaborative spirit in the service of patients/clients, colleagues, and the profession. The professional entry-level physical therapist practices within ethical and legal boundaries, integrates interprofessional perspectives into patient/client management, and advocates for equitable access to care for all communities.
4. **Innovative:** Demonstrates a commitment to lifelong learning through curiosity, creativity, resiliency, and evidence-informed adaptability in clinical practice. The innovative entry-level physical therapist actively seeks new knowledge, integrates emerging evidence and technologies, and applies reflective problem-solving to improve patient outcomes, advance the profession, and respond effectively to evolving healthcare environments.
5. **Evidence-informed:** Demonstrates the ability to integrate best available research evidence with clinical expertise and patient/client values, preferences, and circumstances to guide decision-making in physical therapy practice. The entry-level, evidence-informed physical therapist critically appraises scientific literature, interprets and applies data ethically and appropriately, and contributes to advancing professional knowledge through inquiry and dissemination.
6. **Equitable:** Demonstrates a commitment to fair and just access to healthcare for all. The equitable entry-level physical therapist identifies and addresses barriers to participation, actively advocates for underserved populations, and works to eliminate disparities related to social determinants of health in health-related outcomes.
7. **Integrative:** Demonstrates the ability to function effectively as part of a whole-person, interprofessional healthcare team. The integrative entry-level physical therapist values collaboration across disciplines, synthesizes diverse perspectives, and contributes to coordinated, patient-centered care that addresses the biopsychosocial needs of the individual.
8. **Inclusive:** Demonstrates active engagement with diversity in all forms. The inclusive entry-level physical therapist values cultural, socioeconomic, and individual differences, fostering a learning and clinical environment where all participants feel valued and empowered to contribute.
9. **Integrity:** Demonstrates honesty, ethical consistency, and transparency in all professional interactions. The entry-level physical therapist with integrity upholds the trust placed in the profession by adhering to moral and professional principles, even under pressure, and modeling ethical leadership in all care contexts.

## 6. Program-level Goals

### 6.1. Student Goals

#### 1. **Competent, Caring, and Integrative Clinical Practice**

Students will develop foundational clinical competencies and progress toward entry-level practice, demonstrating professionalism, ethical behavior, and integrity while providing whole-person, integrative care in collaboration with interprofessional teams.

#### 2. **Evidence-Informed Clinical Reasoning**

Students will apply evidence-informed clinical reasoning to conduct patient-centered evaluations and deliver safe, effective, and contextually relevant interventions in supervised learning environments.

#### 3. **Professionalism, Integrity, Inclusivity, and Equity**

Students will exhibit professionalism, integrity, inclusivity, and equitable care consistent with APTA Core Values, ethical standards, and contemporary practice expectations.

#### 4. **Innovation and Lifelong Learning**

Students will engage in innovative, self-directed learning, critical thinking, and reflective practice to remain current and adaptable within a dynamic and evolving healthcare environment.

## 6.2. Graduate Goals

### 1. **Competent, caring, evidence-informed, and integrative practice**

Graduates will provide competent, caring, evidence-informed, integrative care consistent with contemporary practice and whole-person health while engaging in lifelong learning to advance clinical expertise.

### 2. **Professionalism and integrity in practice**

Graduates will demonstrate compliance in their practice settings by demonstrating professionalism, accountability, collaboration, and integrity.

### 3. **Equitable and inclusive interprofessional collaboration**

Graduates will thrive as members of collaborative interprofessional teams advancing equitable, inclusive, and whole-person health within the communities they serve.

## 6.3. Faculty Goals

### 1. **Excellence in Teaching and Mentorship**

Faculty will demonstrate excellence in teaching and mentorship by fostering an inclusive, innovative, and caring environment imbued with kindness, humor, and integrity that promotes student and professional growth.

### 2. **Professional development and scholarship**

Faculty will engage in evidence-informed scholarship and continuous professional development that advances physical therapy education, practice, and the profession.

### 3. **Interprofessional collaboration and whole-person health**

Faculty will model professional and ethical practice through interprofessional collaboration, community engagement, and service to advance whole-person health and the profession.

## 6.4. Program-level Goals

### 1. **Mission-Driven Curriculum and Outcomes**

The program will maintain a mission-aligned curriculum grounded in the core values that prepare graduates to meet or exceed accreditation standards and contemporary practice expectations.

### 2. **Environment of integrity, inclusion, and collaboration**

The program will foster an inclusive, supportive learning environment grounded in integrity and collaboration that enables student and faculty success.

### 3. **Continuous Quality Improvement**

The program will engage in evidence-informed assessment and continuous quality improvement to ensure student, graduate, faculty, and program success.

### 4. **Collaborative and community partnerships**

The program will foster partnerships that support equitable, interprofessional, and community-engaged education and advance whole-person health across diverse settings.

## 7. Program Application Requirements

Applicants for the DPT degree must submit the following through the Physical Therapist Centralized Application Service (PTCAS):

- Completed application.
- Official transcripts from all accredited, post-secondary institutions attended. Transcripts must provide evidence of completed or pending graduation from a bachelor's degree, which includes a minimum of 25 core prerequisite credits, at the time of PTCAS application. For full admission, a total of 38 core prerequisites is required, as detailed below. This means that an applicant may be working toward completing the additional 13 core prerequisite credits at the time of application, but all 38 core prerequisites are required to be completed before matriculation into the program.

- Personal statement detailing reasons for pursuing the DPT degree (i.e., career plans, background, previous experience, interest, and/or values).
- Program-specific requirements.

## 8. Program Admissions Standards

**If the University does not hold authorization or exemption to provide both online (didactic) and in-person (clinical) components of the DPT degree in the student's state, the student will not be eligible for admission to the DPT AZ program.**

Applicants for the DPT degree must meet the following admissions standards:\*

- A bachelor's degree with a minimum of 90 semester credits or higher from an institution accredited by an agency recognized by the U.S. Department of Education or an equivalent foreign accrediting agency.
  - Contingent admission may be awarded with pending graduation from a bachelor's degree, provided that: (1) graduation will occur prior to matriculation into the program, and (2) the 38 core prerequisites will be completed prior to matriculation into the program.
- A minimum cumulative grade point average (GPA) of 3.0 on a 4.0 scale for all submitted coursework.
- A minimum cumulative science grade point average (GPA) of 3.0 on a 4.0 scale for all science-related coursework submitted.
- 38 Core prerequisite semester credits including:
  - 8 semester credits of Anatomy and Physiology 1 and 2 with lab (completed within the last 10 years)
  - 8 semester credits of Biology 1 and 2 with lab
  - 8 semester credits of Chemistry 1 and 2 with lab
  - 8 semester credits of Physics 1 and 2 with lab
  - 3 semester credits of Statistics
  - 3 semester credits of General Psychology.
- 40 hours of Observation (paid or volunteer) in a Physical Therapy setting.
- Applicants must meet the Technical Standards as defined in the Technical Standards Form (Appendix A) set by the program to successfully complete the program, with or without reasonable accommodation.
- No GRE is required.
- No Letters of Recommendation are required.

\*Exceptions to the admissions standards may be made by the Program Director on a case-by-case basis.

### 8.1. Transparency and Consistency

While a competitive academic track record is an important component of admission success, the DPT AZ program follows SCU's lead and prides itself in a holistic admissions process that intentionally balances academic qualifications with personal attributes that reflect those valued in healthcare, with the aim of fostering a learning community built on shared growth, excellence, and the strength of diverse perspectives.

To decrease the risk of academic qualification bias, the program's holistic admissions process is supported by a standardized rubric which reflects the intentional balance between academic qualifications and valued healthcare-related attributes. Additionally, Admissions Committee members are trained prior to participation in the applicant review process to improve selection consistency. Final determinations are made by the Admissions Coordinator and the Program Director based on the recommendations of the Admissions Committee.

## 9. Program Transfer Credit Eligibility

The Doctor of Physical Therapy program does not accept transfer credits.

## 10. Program Degree Completion Requirements

Students are required to complete all credits at Southern California University of Health Sciences to qualify for degree completion.

The Doctor of Physical Therapy degree may be conferred upon those who have fulfilled the following requirements:

- Completed 114 credits within the following required categories of coursework:
  - 19.5 credits in Foundational Sciences
  - 49.5 credits in Physical Therapy Reasoning and Skills
  - 14 credits in Professional Behaviors
  - 31 credits in Clinical Education Experience
- Completed a minimum of 1,085 Direct Patient Care hours and an associated 155 Patient Management Preparation Activity hours.
- Earned a minimum cumulative GPA of 3.0 on a 4.0 scale.
- Successful demonstration of the knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving capabilities required for entry-level physical therapy practice, as assessed throughout the curriculum and clinical education experiences.
- Completed all degree requirements within a maximum of 4 years of matriculation into the program.
- Submitted a Petition to Graduate to the Registrars' Office triggering a final audit of the student's academic records to confirm that all program requirements for graduation have been met.

## 11. Student Employment

While the program technically allows employment, the intensity of coursework and clinical experiences makes working extremely challenging. Students are discouraged from working while enrolled in the program. Course and clinical rotation schedules will not be modified for students who are employed.

## 12. Program Pre-Matriculation Requirements

Successful matriculation into the Doctor of Physical Therapy Program is contingent upon reviewing and signing the institutional enrollment agreement and fulfillment of the requirements detailed within the sections below.

### 12.1. Documentation Requirements

Upon acceptance to the program, students must submit all program-specific documentation detailed below through the University's clinical documentation management system, Exxat. Each document must remain current throughout the duration of the program, until completion of the program and conferral of the degree.

- Copy of a government-issued photo ID (driver's license, passport, etc.) demonstrating an age of at least 18 years.
- Technical Standards Form signed by the student (Appendix A).
- Student Immersion Laboratory Participation Informed Consent signed by the student (Appendix B).
- DPT Consent for Release of Information Form signed by student (Appendix C).
- Proof of American Physical Therapy Association (APTA) student membership (for the student's own cost).
- Completion of University-mandated HIPAA, FERPA, OSHA/BBP, Title IX, and Mandated Reporter training evidenced by uploaded completion certificates for each.
- Documented evidence of a physical examination completed by a licensed healthcare provider qualified to perform such examinations. The examination must verify that the student is able to meet the program's technical standards and participate in required instructional activities and learning experiences, with or without reasonable accommodations
- Documented evidence of current immunization status as outlined in the Immunizations section below.

- Criminal background check as outlined in the Criminal Background Check and Drug Screening section below (at the student's own cost).
- Proof of Medical Insurance as outlined in the Student Health Insurance section below.
- Personal information as outlined in the Personal Information section below.

## 12.2. Immunizations

Students are required to keep all immunization records current within the University's clinical documentation management system, Exxat. Specific requirements for Hepatitis B, Measles, Mumps, Rubella, and Varicella immunity are outlined within Exxat, and should be referenced accordingly. A Tetanus/Diphtheria/Pertussis (Tdap) booster must have been received within the last 10 years. Annual influenza vaccination will be required prior to clinical education courses.

Clinical sites may have additional immunization requirements, including COVID-19 vaccination. Non-compliance with site-specific immunization requirements may prevent the student from being able to participate at an assigned clinical site. The program is not obligated to identify a clinical site that will accommodate the student, which means that the student may be at risk of a delayed graduation or of administrative dismissal from the program due to an inability to complete the degree requirements.

## 12.3. Criminal Background Check and Drug Screening

The program contracts with Universal to provide criminal background checks and drug screens. Students must successfully complete a criminal background check through Universal prior to matriculation into the DPT program. Additional background checks and/or drug screens may be required by an assigned clinical site, and students will be notified in advance of this requirement where both known and required. If required, site-specific background checks and/or drug screens must be completed in accordance with site-specific policies prior to the assigned deadline to allow for processing time. All costs associated with background checks and drug screens are the responsibility of the student.

### **Drug Screening Policy**

The DPT AZ Program operates within the framework of the University's Drug and Alcohol Awareness Program. In addition, and consistent with the requirements of affiliated clinical education sites, the program reserves the right to require mandatory random drug screening for enrolled students as a condition of continued enrollment and clinical placement.

### **Random Screening Process**

Random selection will be conducted through a documented, standardized process applied equitably across the enrolled student population. Students selected for screening will be notified directly by the program and will be required to complete screening within the timeframe specified in the notification.

### **Review of Results**

All screening results will be reviewed by a qualified Medical Review Officer (MRO) prior to any programmatic action. The MRO review process provides students the opportunity to report lawfully prescribed medications or other documented medical explanations for a confirmed positive result. No adverse action will be initiated on the basis of an unreviewed or MRO-unconfirmed result.

### **Student Response and Documentation**

If the MRO identifies a confirmed positive result following review, the program will notify the student in writing. The student will have ten (10) business days from the date of written notification to provide documentation or explanation to the program. Documentation may include verification of a lawful prescription from a licensed healthcare provider or other relevant medical documentation.

### **Adverse Action and Due Process**

A confirmed positive result that is not resolved through MRO review or student-provided documentation may constitute grounds for further review under the University's student conduct process. Any adverse action, including but not limited to suspension from clinical education, remediation, or dismissal, will be taken only in accordance with the University's established academic standing and student conduct procedures, which include notice, an opportunity to be heard, and a right to appeal. The program will not take unilateral adverse action outside of these established institutional processes.

### **Confidentiality**

Drug screening results are treated as confidential medical information. Results will be shared only with the MRO, program officials with a legitimate educational interest, and clinical site personnel as required by affiliation agreements, consistent with applicable federal and state law.

## **12.4. Student Health Insurance**

Students are required to maintain active health insurance while enrolled in the program. A copy of the current insurance card(s) should be uploaded through the University's clinical documentation management system, Exxat, and will require program approval prior to matriculation into the program. Students are responsible for the cost of any and all emergency and/or routine medical services required during both on- and off-campus education activities and on-ground clinical experiences.

## **12.5. Personal Information**

Students are required to maintain current personal information within the University's clinical documentation management system, Exxat, which includes current residential address, cell phone number, email address, and emergency contact information, among other pertinent information.

## **13. Student Code of Conduct**

The University and the program are committed to providing an academic environment that is safe and secure, allows students to develop personally and professionally, and reflects the values of the University and core values of DPT AZ. Students are expected to exercise civility and mutual respect at all times, behaving in ways that are respectful of the rights of all members of the learning community to learn, work, practice, and teach. Enrollment at the University is a privilege, not a right, and carries certain obligations of conduct both inside and outside the classroom. The University's policies contained within the SCU Catalog related to Academic Freedom, Academic Integrity, Student Rights and Responsibilities, and the Student Code of Conduct should be referenced in this regard.

## **14. Standards of Professional Appearance**

DPT AZ students are expected to maintain a professional appearance that reflects competence, safety, and respect for patients, peers, faculty, staff, and the profession. These standards apply during all scheduled program activities, including community, classroom, immersion laboratory, and online sessions, whether held via Zoom or any other online platform, held within campus facilities, or when engaged in off-campus learning activities within the community.

Standards of professional appearance must be adhered to unless an approved accommodation is granted for medical or religious reasons through the Accessibility and Disability Services Office and/or Student Services Office. Details of the accommodations policy and process and the legal and regulatory framework governing standards of professional appearance are outlined in the DPT AZ Clinical Education Handbook.

Failure to follow the standards of professional appearance outlined within the DPT AZ Clinical Education Handbook and those included within this handbook may be considered a violation of SCU's Student Code of Conduct, as detailed within the SCU Academic Catalog under "Student Rights and Responsibilities".

## 14.1. Universal Baseline Standards of Professional Appearance

The following requirements apply in all SCU-affiliated education and clinical settings, at all times when a student is present in a didactic, community, patient care, or clinical learning environment.

### Identification

Students must wear an official SCU-provided ID badge or nametag that identifies the student by name, identifies their program, and indicates their status as a student. ID badges may not reflect prior credentials, licenses, or professional titles that are not associated with the current program enrollment. Where a clinical site issues its own ID, both the site ID and SCU identification must be displayed unless the site explicitly instructs otherwise.

### General Attire Standards

1. Clothing must allow faculty, staff, patients, and visitors to easily identify students.
2. All clothing must be clean, unwrinkled, and undamaged.
3. Attire must be free of images, wording, or logos except those required by the site, program embroidery, the student's embroidered name, or the required ID.
4. Clothing must provide full, opaque coverage appropriate to a professional clinical environment and may not expose undergarments or private body areas in any position when performing typical work tasks (e.g., bending, squatting) or become transparent under clinical lighting or when wet.
5. Clothing must not restrict safe and necessary movement, be overly tight or sheer, or expose skin below the neckline or above the upper arm or lower thigh.

### Footwear

Closed-toe, closed-heel footwear with non-skid soles that protects the foot is required in most settings. Sneakers, athletic shoes, or aquatic shoes are permitted where allowed by the site. Safety, foot protection, and functional appropriateness are always the primary considerations. Exceptions apply in settings where closed footwear is considered by a clinical site during a clinical education experience to be inappropriate or unsafe based on the specialized clinical context. In such case, footwear appropriate to the setting is required, as determined by the clinical site.

### Jewelry

Jewelry must not dangle, protrude, or create entanglement or puncture risk during patient, standardized patient, peer, or faculty interactions and/or when moving and working within the clinical environment. Additional site-specific restrictions may apply during clinical education experiences.

### Personal Hygiene and Grooming

- **General hygiene:** Students must maintain personal hygiene consistent with a clinical healthcare environment, including avoidance of strong odors from any source.
- **Fragrance:** Perfumes, colognes, scented lotions, and scented aftershave products must not be worn. Unscented personal care products are required.
- **Hair:** Hair must be clean, groomed, and managed so as not to interfere with patient care or clinical function. Protective and natural hairstyles, including but not limited to locs, braids, twists, and Bantu knots are fully permitted. No restriction is imposed based on hair texture or cultural hair practices.
- **Facial hair:** Facial hair, if present, must be neatly groomed. Site-specific requirements regarding facial hair for respiratory protection compliance take precedence.
- **Fingernails:** Natural nails must be clean, well-manicured, and short (extending no more than 2mm beyond the fingertip). If nail polish is worn, when permitted by the clinical site, it must be freshly applied, unchipped, and a solid color or clear. Artificial nails, gel nails, nail wraps, or any nail enhancements must not be worn during direct patient care or when performing tasks that require hand hygiene, per Center for Disease Control and prevention (CDC) infection control guidance.

- **Cosmetics:** Cosmetics, if worn, must be conservative and not distracting in a clinical education environment; determination of compliance with this standard is made at the site level.

### **Tattoos and Body Piercings**

Visible tattoos and body piercings are permitted in SCU-affiliated clinical settings unless a specific site requires otherwise. Tattoos depicting offensive, discriminatory, or graphic content must be covered in all clinical settings. Students must confirm site-specific tattoo and piercing policies before beginning a clinical education experience, as requirements vary.

### **Permitted Attire (unless a clinical education site dictates otherwise)**

- Professional dress consistent with the setting
- Scrubs - solid color, clean, unwrinkled, appropriately sized
- Polo with solid-color dress slacks (black, navy, grey, brown, or khaki)

## **14.2. Program-specific Standards of Professional Appearance**

### **14.2.1. Standards of Appearance: Clinical Education Courses**

During courses that involve patient care or standardized patients, including Clinical Education courses, students must adhere to the Standards of Professional Appearance outlined in the DPT AZ Clinical Education Handbook. Standards must be adhered to unless an approved accommodation is granted for medical or religious reasons through the Accessibility and Disability Services Office and/or Student Services Office. Details of the Clinical Education Accommodations Policy and process and the Legal and Regulatory Framework governing Standards of Professional Appearance are outlined in the DPT AZ Clinical Education Handbook.

Full details of the standards of appearance for clinical education are similarly outlined within the DPT AZ Clinical Education Handbook.

### **14.2.2. Standards of Appearance: Practical and Skills-based Courses**

Where laboratory or skills-based activities require certain body parts to be easily accessible, students may need to partially disrobe in a manner consistent with effective participation. Acceptable clothing for these activities may include shorts and sports-bras or tank tops, where appropriate. Students may also be required to wear patient gowns when appropriate for immersion laboratory activities. Students will be instructed in the use of a sheet to ensure modesty through appropriate draping during laboratory and/or skills-based activities. An SCU-provided ID badge or nametag is required to be worn at all times.

### **14.2.3. Standards of Appearance: Practical Examinations**

Students are required to wear either scrubs that are a solid color, clean, wrinkle-free, and properly fitted or business-casual clothing for all practical examinations conducted within the program. Closed-toe, closed-heel shoes with nonskid soles that protect the foot are also required, and sneakers are permitted. An SCU-provided ID badge or nametag is required to be worn at all times.

### **14.2.4. Standards of Appearance: Community Engagement**

Students are required to wear either scrubs that are a solid color, clean, wrinkle-free, and properly fitted or business-casual clothing for all community engagement activities conducted within the program. Closed-toe, closed-heel shoes with nonskid soles that protect the foot are also required, and sneakers are permitted. An SCU-provided ID badge or nametag is required to be worn at all times.

## 15. Program Delivery Model

The DPT AZ program constitutes a blended model delivered through a mix of asynchronous and synchronous instruction classified as online interactive delivery, and in-person immersion laboratories classified as on-ground delivery. All 36 courses contained within the curriculum include at least 6 weeks of didactic instruction (online interactive delivery). A total of 21 courses within the curriculum include an immersion laboratory component which requires in-person attendance in Arizona during weeks 7 and 8 of each 8-week sub-term (on-ground delivery), with the exception of Term 4.1, Term 5.2, and Term 6.1/6.2. The total number of days of in-person attendance in Arizona is 74 days, divided as 55.5 immersion laboratory days in Year One, 13.5 immersion laboratory days in Year Two, and 5 days for graduation-related activities during week 8 of Term 6.2. The number of days of in-person attendance in Arizona are subject to change based on student progression and program needs, with students receiving advanced notification should such changes occur. Three full-time clinical education experiences complete the curriculum, occurring during Term 4.1 (8 weeks in duration), Term 5.2 (8 weeks in duration), and Term 6.1/6.2 (15 weeks in duration).

	Term	Didactic instruction (online interactive)	Immersion Laboratories (on-ground in AZ)	Full-time Clinical Education Experiences (at an approved clinical site within the U.S.)
Year One	1.1	6 weeks	5.5 days	-
	1.2	6 weeks	10.5 days	-
	2.1	6 weeks	7.5 days	-
	2.2	6 weeks	10.5 days	-
	3.1	6 weeks	10.5 days	-
	3.2	6 weeks	11 days	-
Year Two	4.1	6 weeks	-	8 weeks
	4.2	6 weeks	5.5 days	-
	5.1	6 weeks	8 days	-
	5.2	6 weeks	-	8 weeks
	6.1	6 weeks	-	8 weeks
	6.2	6 weeks	5 days - Graduation	7 weeks
	TOTAL	72 weeks	74 days	31 weeks

## 16. Curriculum-level Program Learning Outcomes

The DPT AZ curriculum is designed to meet the following Program Learning Outcomes:

1. **Demonstrate Clinical Competence in Evidence-Informed Patient/Client Management:** Graduates will integrate examination, evaluation, diagnosis, prognosis, and intervention skills using contemporary evidence, clinical reasoning, and patient/client values, preferences, and circumstances to design and deliver safe, effective, high-quality care across the lifespan and healthcare continuum.
2. **Provide Caring, Inclusive, and Culturally Humble Care:** Graduates will demonstrate empathy, kindness, respect, and cultural humility while creating welcoming environments that honor diversity, promote belonging, and support individualized, patient-centered care.
3. **Practice with Professionalism and Integrity:** Graduates will uphold ethical principles, legal standards, and professional responsibilities while demonstrating honesty, transparency, reliability, and sound judgment in all professional and community interactions.
4. **Demonstrate Innovation, Adaptability, and Self-Reflective Practice:** Graduates will engage in continual professional growth, integrate emerging technologies and evidence into practice, self-reflect on performance

and adapt accordingly, and demonstrate adaptability, creativity, and resilience in evolving healthcare environments.

5. **Advance Health Equity and Social Responsibility through Community Collaboration:** Graduates will recognize and address health disparities related to social determinants of health, advocate for equitable access to care for all, and collaborate and participate in community and professional initiatives that promote justice, wellness, and patient-centered public health.
6. **Engage in Effective Education, Communication, and Interprofessional Collaboration:** Graduates will communicate clearly and respectfully with patient/clients, caregivers, and healthcare professionals using appropriate education and communication methods, and will actively contribute to integrative, team-based, whole-person care that optimizes patient/client outcomes.
7. **Demonstrate intellectual humility by contributing to Quality Improvement, Scholarship Initiatives, and the Advancement of the Profession:** Graduates will participate in the collection, analysis, and application of outcomes data to improve patient/client care; engage in scholarly enquiry and quality improvement initiatives; and support the advancement of physical therapy through leadership, service, and dissemination of knowledge.

## 17. Program Sequence

Course Code	Course Category	Course Name	Year / Term of instruction	Immersion Laboratory (Yes/No/Clinical)	Credits
DPT 610A	PB	Professional Competencies I	Year 1, Term 1.1	No	1
DPT 611A	PB	Evidence-informed Practice I	Year 1, Term 1.1	No	2
DPT 616A	FS	Human Anatomy I	Year 1, Term 1.1	Yes	3.5
DPT 612A	FS	Human Physiology & Pathophysiology	Year 1, Term 1.1/1.2	No	3
DPT 615A	PT	Physical Therapy Fundamentals	Year 1, Term 1.1/1.2	Yes	3
DPT 617A	FS	Human Anatomy II	Year 1, Term 1.2	Yes	3.5
DPT 613A	PT	Therapeutic Interventions I	Year 1, Term 1.2	Yes	2.5
DPT 624A	PT	Health Promotion & Fitness Management	Year 1, Term 1.2	Yes	2.5
DPT 614A	PT	Movement Science	Year 1, Term 2.1	Yes	2.5
DPT 625A	PT	Musculoskeletal Practice I	Year 1, Term 2.1	Yes	4
DPT 651A	FS	Integrative Pain Sciences	Year 1, Term 2.1	No	2
DPT 627A	FS	Clinical Neuroscience	Year 1, Term 2.1/2.2	Yes	3.5
DPT 621A	PB	Evidence-informed Practice II	Year 1, Term 2.2	No	2
DPT 623A	PT	Therapeutic Interventions II	Year 1, Term 2.2	Yes	1.5
DPT 626A	PT	Musculoskeletal Practice II	Year 1, Term 2.2	Yes	3
DPT 632A	PT	Neuromuscular Practice I	Year 1, Term 3.1	Yes	2.5
DPT 634A	PT	Management of the Aging Adult	Year 1, Term 3.1	Yes	2.5
DPT 635A	PT	Musculoskeletal Practice III	Year 1, Term 3.1	Yes	4
DPT 637A	PT	Cardiopulmonary Practice	Year 1, Term 3.1/3.2	Yes	3.5
DPT 633A	PT	Neuromuscular Practice II	Year 1, Term 3.2	Yes	2.5
DPT 636A	PT	Musculoskeletal Practice IV	Year 1, Term 3.2	Yes	3
DPT 631A	PB	Mindful Patient Management	Year 2, Term 4.1	No	2
DPT 645A	CE	Physical Therapy Practice I	Year 2, Term 4.1	Clinical	8
DPT 641A	FS	Pharmacology	Year 2, Term 4.2	No	2
DPT 642A	FS	Advanced Diagnostics	Year 2, Term 4.2	No	2
DPT 643A	PT	Management of the Pediatric Patient	Year 2, Term 4.2	Yes	2.5

DPT 644A	PT	Management of the Complex Patient	Year 2, Term 4.2	Yes	4.5
DPT 622A	PT	Bracing, Prosthetics, & Orthotics	Year 2, Term 5.1	Yes	1.5
DPT 652A	PT	Primary Care Physical Therapy	Year 2, Term 5.1	No	2
DPT 653A	PT	Advanced Therapeutic Interventions	Year 2, Term 5.1	Yes	2
DPT 654A	PB	Business Management & Entrepreneurship	Year 2, Term 5.1	No	2
DPT 655A	CE	Physical Therapy Practice II	Year 2, Term 5.2	Clinical	8
DPT 705A	PB	Capstone Course I	Year 2, Term 5.2	No	1
DPT 661A	PB	Professional Competencies II	Year 2, Term 6.1/6.2	No	2
DPT 665A	CE	Physical Therapy Practice III	Year 2, Term 6.1/6.2	Clinical	15
DPT 706A	PB	Capstone Course II	Year 2, Term 6.1/6.2	No	2

**Course Category Abbreviations:**

CE = Clinical Education Experience

FS = Foundational Sciences

PB = Professional Behaviors

PT = Physical Therapy Reasoning and Skills

Please see the end of this handbook for course descriptions for each course contained within the curriculum.

## 18. Program Mode of Delivery - Didactic Curriculum

Substantive, regular, monitored, and planned interaction between students and course faculty will occur throughout the didactic portion of the curriculum through an integrated sequence of asynchronous online sessions, online interactive synchronous sessions, and in-person immersion laboratories.

### 18.1. Asynchronous Online Sessions

Consists of recorded, faculty-authored micro-lectures designed to promote regular and substantive interactions between students and course faculty through structured, faculty-initiated learning activities and timely feedback. Lectures introduce important concepts, professional behaviors, and patient management skills related to the course and walk students through clinical examples that prepare them for deeper discussion and hands-on practice. Lecture content is available in audio/visual and transcript format to support diverse learning preferences, and students may pause, rewind, and replay content to enhance understanding. All materials remain available throughout each course, allowing students to revisit concepts as needed. Each lecture is typically embedded with coursework activities such as a short, low-stakes coursework activity such as a case-based quiz, brief documentation exercise, recorded movement analysis, skills demonstration upload, or short reflection. These activities require the student to apply newly learned material and serve as a primary mechanism for substantive interaction, as course faculty review the student work, monitor student progress, and provide individualized or group feedback to guide student learning. Faculty review and respond to submitted coursework activities within the agreed timeline, initiate contact with students who haven't submitted required coursework or who are showing pattern errors, and post group feedback on coursework activities prior to the associated live synchronous session. This ongoing cycle of coursework activity completion and faculty feedback ensures regular and substantive interaction and allows course faculty to identify areas requiring clarification prior to live sessions.

### 18.2. Online Interactive Synchronous Sessions

Live, faculty-led class meetings held via Zoom or other online platforms as needed, which occur once or two times per week for the duration of the didactic portion of each course. These sessions involve real-time, faculty-guided engagement, dialogue, and feedback, which builds directly on the students' asynchronous preparation. Course faculty review submitted work in advance and use trends in performance to guide instruction, ensuring that

learning activities are responsive to student needs. During sessions, students will participate in live activities such as case discussions, clinical reasoning exercises, documentation practice, interprofessional communication simulations, and collaborative problem-solving. Students may be asked to explain their diagnostic reasoning, determine when referral is appropriate, decide which components of care may be directed to support personnel, select outcome measures, or practice verbal patient handoffs, for example. Through questioning, discussion, and guided feedback, course faculty engage students in substantive interactions that promote analysis, synthesis, and clinical decision-making.

### 18.3. In-person Immersion Laboratories

In-person, hands-on learning activities where students practice and refine clinical skills under direct faculty supervision in a laboratory or clinical simulation environment. These sessions represent a critical setting for regular and substantive interactions, as course faculty provide considered observation, instruction, and real-time feedback while students perform clinical tasks. Prior to each laboratory, students are typically required to upload videos demonstrating assigned clinical skills. Course faculty review these submissions and provide feedback, ensuring substantive interaction before students arrive and allowing them to address identified deficits. This preparatory process contributes to regular interaction by establishing an ongoing feedback loop between the student and course faculty across learning environments. During the laboratory, students will participate in guided activities such as manual joint mobilizations, vital sign assessment, administration of functional outcome measures, simulated interprofessional communication, patient and caregiver education, and work with peers or community volunteers. Course faculty provide constructive coaching, corrective instruction, and individualized feedback as students practice, ensuring that learning is interactive, applied, and closely supervised. Students are expected to arrive prepared by reviewing assigned materials and practicing required skills to ensure safe and efficient participation. During the laboratory, students rotate roles as clinician, patient, and observer; give and receive peer feedback; and apply faculty guidance to improve technique, communication, and clinical reasoning. Course faculty are also able to assess professional behaviors, patient management skills, and clinical decision-making and provide real-time feedback. Ongoing, regular interaction with course faculty during immersion laboratories supports the students' development into safe, competent, and reflective clinicians.

## 19. Attendance Policy

Regular attendance is essential to success in this hybrid program and will be monitored and recorded for all classes. Both online interactive synchronous sessions and in-person immersion laboratories are considered **required** program activities.

### 19.1. Online Interactive Synchronous Session Attendance

- Cameras are required to be on during all synchronous sessions. If a student has a specific reason not to have their camera on during a synchronous session, the student must let the instructor know in advance of the session whenever possible to obtain approval.
- If a student must miss a synchronous session for a valid reason, the student must contact the course faculty member in advance of the session whenever possible. The student is required to watch the recording of the missed session and meet with course faculty to demonstrate understanding of the missed content.
- Frequent requests to miss synchronous sessions will be referred to the Student Success Coordinator for further discussion and may result in remediation.
- Two unexplained synchronous session absences in total for all courses contained within a sub-term of 8-weeks and/or a failure to meet with course faculty to demonstrate understanding of the missed content in the event of an approved absence in any term may result in dismissal from the program.

## 19.2. In-person Immersion Laboratory Attendance

Attendance at in-person laboratories is mandatory and required.

Reference SCU's Academic Catalog "Attendance Policy" for further details regarding "Excused Absences, Unexcused Absences, and Online Attendance".

## 20. Laboratory Access for Students

The DPT AZ program laboratories are located within a shared facility and are subject to building access hours maintained by security coverage. Students may access laboratory spaces during the following hours:

- Monday through Friday: 6:30 am to 9:00 pm
- Saturday: 7:30 am to 5:00 pm
- Sunday: No independent student access without advanced program approval due to required advanced coordination with security to facilitate access.

Standard building hours of operation are Monday through Friday, 7:00 am to 9:00 pm, and Saturday, 9:00 am to 5:00 pm. Access outside of standard hours, including early morning entry on weekdays and all weekend access, is available within the security-covered windows listed above.

Students requiring laboratory access outside of posted hours must obtain advance approval from the Program Director or assigned designee. Unauthorized access outside of approved hours is not permitted.

DPT AZ students are expected to maintain the laboratory in a clean and organized condition, return all equipment to its designated location, and secure the space upon departure. Any damage, safety concerns, or security issues observed during laboratory use should be reported to program administration promptly.

## 21. Clinical Education Experiences

Full-time clinical experiences are offered in Term 4.1 (8 weeks), Term 5.2 (8 weeks), and Term 6.1/6.2 (15 weeks) for a total of 31 full-time clinical experience weeks. These experiences provide students with the opportunity to apply their knowledge and skills from the didactic curriculum to clinical settings to safely and effectively refine patient management skills under the direct supervision of experienced licensed physical therapists and in collaboration with interprofessional and intraprofessional healthcare teams.

Please consult the DPT Clinical Handbook for full details.

## 22. Clinical Education Sites

Clinical Education Experiences are offered through a network of clinical partners locally, regionally, and nationally. All logistical management pertaining to full-time Clinical Education Experiences occurs through the Exxat platform. Each enrolled student is granted access to this platform prior to matriculation into the program and will be accountable for maintaining an updated profile in addition to uploading and maintaining all compliance documentation required.

To meet the program's goals for the clinical education portion of the curriculum, clinical placements should provide the quality, quantity, and variety of expected experiences required to prepare students for their roles and responsibilities as physical therapists.

Please consult the DPT AZ Clinical Handbook for full details.

## 23. Clinical Education Course Requirements

Clinical education experiences are designed for students to develop the knowledge, skills, and behaviors necessary for professional practice. Each clinical education experience is paired with an associated clinical education course which includes related coursework activities. During clinical education experiences, students participate in patient care and engage in other associated educational experiences under the supervision of a licensed physical therapist. Students earn course completion credit by completing a minimum of 1,085 Direct Patient Care hours and an associated 155 Patient Management Preparation Activity hours at approved clinical sites across the three full-time clinical experiences. Additionally, satisfactory completion of written and practical assignments and clinical skills assessments associated with each clinical education course is also required for successful course completion. Students must be in good academic standing, as defined in the SCU catalog and extended within this handbook, and be deemed by the program core faculty as competent and safe to progress to clinical education prior to each clinical education experience.

Course Code	Course Name	Term	Credits	Clinical hours	Location
DPT 645A	Physical Therapy Practice I	4.1	8	320 hours	Approved Clinical Site
DPT 655A	Physical Therapy Practice II	5.2	8	320 hours	Approved Clinical Site
DPT 665A	Physical Therapy Practice III	6.1/6.2	15	600 hours	Approved Clinical Site

Please consult the DPT AZ Clinical Education Handbook and the clinical education course syllabi for full details.

## 24. Program Mode of Delivery - Clinical Education

Substantive, regular, monitored, and planned interaction between students and clinical education faculty (clinical instructors and/or Site Coordinators of Clinical Education) will occur throughout each clinical education experience within the curriculum through experiential practice and associated patient management preparation activities described below, and relevant coursework activities detailed within individual clinical education course syllabi.

### 24.1. Experiential Practice

A full-time, supervised clinical education experience in which students apply knowledge, clinical reasoning, psychomotor skills, and professional behaviors in the provision of patient-centered physical therapy services. During on-ground clinical experiences, students will participate in direct patient care under the supervision of a licensed physical therapist serving as their clinical instructor. Learning activities include performing components of the physical therapy examination, contributing to evaluation and plan-of-care decisions, implementing interventions, documenting patient care, communicating with patients and caregivers, and collaborating with members of the healthcare team, among other patient care activities. Students are expected to progressively assume greater responsibility for patient management as appropriate for their level of training while consistently demonstrating safe, ethical, and professional practice. Throughout the clinical experience, students must comply with all applicable state laws and regulations governing physical therapy practice, as well as facility-specific policies, procedures, and standards of professional conduct. This experience allows students to integrate academic preparation with authentic clinical practice while developing the competencies required for entry-level physical therapist practice.

### 24.2. Patient Management Preparation Activities

Students are required to complete a structured patient management preparation checklist for each patient that they treat during clinical experiences. This activity is designed to promote regular and substantive interactions between the student and their clinical instructor (CI) through ongoing communication, guided clinical reasoning,

and targeted feedback that supports safe, evidence-informed patient care. In this activity, students use information from the chart review, patient interview, examination findings, response to treatment, and communication within the care environment to complete a guided clinical reasoning exercise. First, students analyze the available patient data to generate and prioritize a list of differential diagnoses. They then research the most plausible competing explanations for the patient's presentation and narrow the list based on the patient's symptoms, systems review findings, red flags, test and measure results, and overall clinical picture. Next, students determine whether the patient would benefit from consultation with, or referral to, another member of the care team and provide a brief rationale for that decision based on the patient's presentation, safety needs, and plan of care. Students also complete a focused search of the literature to identify a best-practice physical therapy intervention and select a base therapeutic exercise or activity with appropriate progression, regression, and dosing. In addition, students will use appropriate health informatics to complete a medication reconciliation, identify medication-related factors that may influence physical therapy management and suggest any necessary modifications. Students are also required to identify contextual factors that may influence the patient's participation, access, safety, and/or adherence, and explain how these factors shape the plan of care. Throughout this process, students are expected to engage in substantive interactions with their CI by identifying aspects of the proposed plan of care that require clarification, confirmation, or modification prior to implementation. Students discuss their clinical reasoning, differential diagnoses, referral decisions, and planned interventions with their CI and incorporate feedback into the plan of care. Through consistent regular and substantive interaction with their CI, students refine their clinical decision-making, strengthen their professional communication, and directly support successful patient management outcomes.

## 25. Program Benchmarks for Progression

### 25.1. Program Benchmark for Each Course

The benchmark for progression within the program's lock-step curriculum is an average grade of  $\geq 70\%$  for each individual course.

### 25.2. Program Benchmark for Practical Examinations

The benchmark for passing all laboratory-based practical examinations is  $\geq 80\%$ .

### 25.3. Program Grading Scale

Letter grade

A = 90% - 100%

B = 80% - 89.99%

C = 70% - 79.99%

F = 0.0% - 69.99%

### 25.4. Program Benchmark for Academic Good Standing

At the program-level, the benchmark for academic good standing is a cumulative GPA of  $\geq 3.0$  out of 4.0. The same benchmark applies for clearance to enter each Physical Therapy Practice course.

Cumulative GPAs will be calculated at the end of each 8-week sub-term. Students with a cumulative GPA below 3.0 out of 4.0 will be subject to academic probation and will be placed on an academic development plan (ADP), as described below.

If a student's cumulative GPA falls below 2.75 out of 4.0 at the end of any term within the curriculum, they will be subject to academic dismissal.

A final cumulative GPA of  $\geq 3.0$  out of 4.0 is required for graduation from the program and conferment of the DPT degree.

Please reference the SCU Academic Catalog for the University-specific Academic Good Standing policy.

## 25.5. Program Benchmark for Entry into Clinical Education

Please consult the DPT AZ Clinical Handbook for program benchmarks related to Clinical Education.

## 26. Program Deceleration Policy

Students with an approved leave of absence as well as any student who fails to meet the Program Benchmark for Each Course, the Program Benchmark for Academic Good Standing, and/or the Program Benchmark for Entry into Clinical Education outlined above, may be subject to deceleration. Deceleration is the process where a student is moved from their original cohort to a subsequent cohort within the DPT AZ program delaying their graduation.

The process by which the student must decelerate will be determined on a case-by-case basis by the Program Director in consultation with core faculty and will be implemented based on program capacity.

## 27. Program Assessment Policies

In order to demonstrate student competency in all areas of the DPT curriculum, students will be administered formative and summative assessments suited to the content of each course.

Assessments can include but are not limited to written examinations, practical examinations, skill checks, low-stakes quizzes, and coursework activities.

While all practical examinations are taken in-person during on-ground immersion laboratories, the majority of written examinations are taken online in the remote testing format using a Lock Down browser called ExamSoft and its' associated ExamSoft Monitor/webcam to monitor and proctor students throughout the examination.

### 27.1. Remote Testing Policies

- Students are required to download examinations **at least 24 hours** prior to the examination to prevent and respond to technical difficulties that may arise. Submissions/uploads of downloaded and completed examinations may be used to determine attendance.
- Cellular phones must be put on silent and not be on the students' person. The cell phone should be placed face down on the floor directly behind the student so that it is retrievable in webcam view if needed for technology assistance.
- Items not permitted on the students' person or within the students' testing area during all assessments include but is not limited to; all wristwatches, hats, pencil/pen cases, outerwear, purses, backpacks, electronic devices, wearable technology including eyewear, food, and beverages.
- A whiteboard, dry erase marker, and whiteboard eraser are permissible during assessments. Both sides of the whiteboard must be shown to the webcam at the beginning AND end of the assessment regardless if used or not. Students are required to erase the whiteboard in view of the webcam just before the assessment is electronically submitted.
- If a student is unable to secure a private location for their online assessment, course faculty should be advised at least 24-hours prior to the start of the assessment. This period may be modified depending on circumstances on a case-by-case basis.
- Students can use the Notes feature within ExamSoft to write comments about specific questions. The "Request Feedback" feature will be activated within ExamSoft so that course faculty are able to view and address any student comments within two (2) business days.

- The instructor reviews them after the exam is uploaded/completed, not during the live exam session
- Students are required to remain in their seat at their desk/workstation for the duration of the remote online assessment until the assessment is submitted. In the unlikely event of an emergency (feeling ill, GI distress, etc.), the student must state out loud the reason for the need to leave the testing area. In situations such as this, the exam will be stopped, as exam integrity cannot be insured. The student will then be afforded the opportunity to take a deferred assessment within a suitable time period decided by course faculty. Students who are determined to be using this provision as a means to defer the assessment for reasons other than an emergency situation may be subject to dismissal from the program.

## 28. Program Remediation Policies

For students who do not meet the minimum required performance standards on written and/or practical examinations, and/or Laboratory Skills Checks, the program-specific remediation policy applies. Remediation policies are designed to support student success, ensure patient and/or client management competency, and uphold academic and professional standards.

All remediation occurrences will be recorded by the Student Success Coordinator in the appropriate student's records.

### 28.1. Program Remediation Policy for Written Examinations

- Scoring below 70% on a summative examination (i.e. midterm or final examination) will result in a scheduled, faculty-led structured remediation, followed by a single opportunity to retake a like exam to achieve a passing score.
- The maximum score that a student can achieve on a retake written examination is 70%.
- If a student fails the retake, the higher score of the two failing scores will be recorded as the assessment grade.

### 28.2. Program Remediation Policy for Laboratory Skills Checks

Select program-specific clinical readiness skills will be assessed during each immersion laboratory.

- Laboratory skills checks will be graded as Pass (P)/No Pass (NP).
  - A result of NP for any laboratory skills check will result in peer-level remediation of that skill and a faculty-led skills check retake during the laboratory immersion.
  - Another NP will result in structured remediation with course faculty during the laboratory immersion to ensure skills-related competency prior to the practical examination.

### 28.3. Program Remediation Policy for Practical Examinations

- Practical examinations will take place at end of each lab immersion.
- The benchmark for passing all laboratory-based practical examinations is 80%.
  - Tier 1 safety skills will be graded as P/NP. A result of NP for a Tier 1 safety skill will result in skills-specific remediation with a faculty member.
  - Scoring <80% for a practical examination will result in same day remediation with a course faculty member.
  - After remediation for either a Tier 1 safety skills NP and/or achieving a score <80%, a retake will be required. Achieving another NP on a Tier 1 safety skill and/or <80% will result in failure of the course and an inability to progress to the next term in the lock-step curriculum.
- Standardized grading rubrics will be used for all practical examinations to ensure objectivity.
- The maximum score that a student can achieve on a retake practical examination is 80%.

- In circumstances where a student achieves a score of <80% and course faculty determine that unstandardized testing occurred during the students first examination, course faculty may grant a practical examination retake on a case-by-case basis with the potential for the student to earn a full score (as opposed to the minimum passing grade of 80%).

## 28.4. Program Remediation Policy for the Clinical Readiness Skills Check

- Remediation for the Clinical readiness Skills Check which clears students for entry into DPT 645A: Physical Therapy Practice I follows the process described in the Remediation Policy for Practical Examinations described above, with the exception that the Clinical Readiness Skills Check is graded as a P/NP.
- An inability to achieve a grade of Pass after faculty-led remediation and a retake Clinical readiness Skills Check will result in the student not being cleared to attend the first clinical experience. As successful completion of all components of the curriculum is required for progression within the program's lock-step curriculum, a NP for the Clinical Readiness Skills Check may result in academic deceleration.

## 29. Academic Development Plan (ADP)

Academic Development Plans (ADPs) are intended to support students who may be at-risk academically. ADPs are typically developed by the student's program of study and are intended to support the student in meeting program-level academic expectations. Please consult the SCU Catalog for full details.

In the DPT AZ program, an ADP will remain in place for at least one sub-term of 8-weeks, and will consist of one or more of the following activities depending on student needs:

- Completion of individualized assignments.
- Participation in mandatory exam preparation workshops.
- Participation in mandated tutoring.
- Participation in mandated remediation.
- Attendance of one-on-one advising sessions with the Student Success Coordinator.
- Attendance of one-on-one coaching sessions with faculty coach.
- Participation in additional skills labs or technique sessions.
- Other activities as determined by the course faculty, faculty coach, student success coordinator and/or Program director.

An ADP is assessed on a Pass/No Pass basis. Successful completion of an ADP is defined as a pass on all of the action items defined in the ADP and a return to Academic Good standing. The designation of Pass will be determined by the Program Director.

Failure to comply with or meet any of the requirements of an ADP may result in further academic disciplinary action such as deceleration or dismissal from the program.

## 30. Program Professional Expectations and Behavioral Standards

Professionalism in physical therapy extends far beyond clinical competence. It is the foundation of trust between the student and their patients, colleagues, and the broader healthcare community. Unlike technical skills mastered through repetition, professional behaviors must be consistently demonstrated from the first day of the program through the

entirety of a student's career. This section exists to provide clear, actionable standards that will guide the development of each student as a healthcare professional.

Please refer to the following American Physical Therapy Association (APTA) documents to provide context in this regard: (1) the [APTA Code of Ethics for the Physical Therapist](#), and (2) the [APTA Core Values for the Physical Therapist and Physical Therapist Assistant](#).

While the APTA Code of Ethics and Core Values provide essential guidance, more concrete direction for daily decisions and actions is provided by the operationalized definition of professionalism adopted by the program:

*Professionalism is consistent demonstration of behaviors that build trust, maintain competence, and honor responsibilities to patients, colleagues, and the profession. It means showing up prepared, following through on commitments, communicating respectfully and transparently, accepting accountability for one's actions, continuously developing one's skills, and treating everyone with dignity, most especially when it is difficult or inconvenient.*

In simpler terms: Professionalism is doing what was committed to, when it was committed to, in a way that respects everyone involved, and owning the consequences when our efforts fall short.

## 30.1. Professional Behaviors in Practice

To make these concepts tangible, here are specific examples of professional and unprofessional behaviors across different contexts students may encounter:

### 30.1.1. In the Classroom & Online Learning:

- **Professional behavior:** Arriving prepared having completed required readings, having the camera on as per program expectations, participating meaningfully in discussions, and submitting assignments on time or communicating proactively if unforeseen circumstances prevent this.
- **Unprofessional behavior:** Multitasking during synchronous sessions, making excuses after missing deadlines, and being unprepared and relying on others to carry the load for group work.

### 30.1.2. During Immersions Laboratory Sessions:

- **Professional behavior:** Arriving on time with appropriate attire, treating classmates and standardized patients with respect, and acknowledging when additional practice or clarification is needed.
- **Unprofessional behavior:** Arriving late without appropriate communication, dismissing feedback from instructors, and practicing techniques on peers without consent or appropriate draping.

### 30.1.3. In General and Clinical Communication:

- **Professional behavior:** Responding to emails within 24-48 hours, using person-first language in all communication, and assuming positive intent and asking clarifying questions before reacting.
- **Unprofessional behavior:** Leaving messages unread for extended periods, referring to patients by diagnosis or room number, and responding defensively to constructive feedback.

### 30.1.4. In Team Settings:

- **Professional behavior:** Following through on commitments to group members, addressing conflicts directly and respectfully with the involved person, and offering specific help to struggling classmates.
- **Unprofessional behavior:** Complaining about team members to others without addressing issues directly, taking credit for group work when your own contribution was below that reasonably required, and being competitive rather than collaborative.

## 30.2. When Mistakes occur

- **Professional behavior:** "I made an error in my documentation. Here is what happened and here is how I am correcting it. What can I learn from this?"
- **Unprofessional behavior:** Blaming circumstances, instructors, or classmates, minimizing the impact of the mistake, and avoiding accountability.

## 30.3. When Professionalism Concerns Arise

The program recognizes that professional development is a journey, and missteps are opportunities for growth rather than character indictments. If a faculty member raises a professionalism concern with a student, the student is encouraged to:

1. Listen fully before responding. The goal is understanding, not defending.
2. Ask clarifying questions: "Can you help me understand specifically what behavior was concerning?"
3. Take appropriate responsibility, even if circumstances were difficult.
4. Develop a concrete plan for addressing the behavior moving forward.
5. Follow through and demonstrate growth over time.

While repeated or severe professionalism concerns may result in a formal remediation plan and even program dismissal, the first approach of the program is always developmental. The program and its faculty are invested in student growth in this regard.

# 31. Student Success

The educational journey unfolds across six consecutive terms, two transformative years that will reshape not just what students know, but how they think and who they become as healthcare providers.

## 31.1. Understanding the Stress Response

The intensity and pace of DPT education serves a purpose beyond academic rigor; it prepares students for a profession that routinely demands performance under pressure. Understanding one's stress response is not just about surviving a DPT program; it is about developing the self-awareness that will sustain students through decades of practice.

During this program, students will be invited to complete stress assessments such as the [Holmes-Rahe Life Stress Inventory](#) and [Perceived Stress Scale](#) not as diagnostic tools but as modes for self-reflection.

## 31.2. Building a Resilience Toolkit

Resilience is not about becoming impervious to difficulty; it is about further developing the capacity to recover, adapt, and even grow through challenges. Students are encouraged to consider the evidence-based strategies described below as a means by which to grow in this arena:

**Mindfulness and Grounding:** Not as escape from difficulty but as ways to stay present in whatever situation arises. The ability to remain centered when everything feels chaotic is a skill that will serve both the student and their future patients.

**Cognitive Flexibility:** Learning to recognize when thoughts are helping versus hindering. The stories students tell themselves about their struggles profoundly impacts their capacity to navigate them.

**Physical Practice:** Ironic though it may seem, DPT students often neglect their own movement health. Regular physical practice is not just self-care; it is a way of staying connected to the very subject of study.

**Connection & Community:** Isolation amplifies struggle. Whether through study groups, social gatherings, or simply checking in with classmates, maintaining connection is protective against burnout.

### 31.3. Vulnerability to Strength: A Growth Framework

The most profound growth often emerges from moments of vulnerability. When a student struggles with a concept, fails an exam, or feels overwhelmed by the magnitude of what is being learned; these are not signs of inadequacy but invitations to deeper engagement.

### 31.4. Community, Connection, and Leadership

Students are encouraged to consider joining the APTA's Student Assembly or running for class representative. These roles offer more than resume building; they provide practice in the leadership and advocacy skills essential to advancing the profession.

## 32. Academic Coaching

Upon matriculation into the program, each student is paired with a **Faculty Coach**. The Faculty Coach serves multiple roles as follows:

- Academic advisor for degree requirements and program navigation
- Professional development guide for career planning and skill building
- Trusted resource for addressing challenges that impact student success
- Connector to additional University resources and support services

### 32.1. What to Expect in Coaching Meetings

The Faculty Coach will guide students through a supportive decision-tree approach that addresses:

- Academic performance and study strategies
- Career goals and professional aspirations
- Clinical skill development
- Personal well-being and work-life balance
- Feedback and self-reflection practices
- Progress towards goals

Coaching relationships are private and separate from the students' course instructors' evaluations. This creates an environment where real challenges can be discussed without fear of impact on academic standing. Faculty coaches meet one-on-one with their assigned students at least once per 8-week sub-term, with meeting frequency determined by the needs of the student. All coaching meetings notes are recorded in the students records.

## 33. Program Concerns/Complaints

If a student has concerns regarding the DPT program at SCU's Phoenix Metro location, they are encouraged to pursue the issue with appropriate faculty and/or University administration.

## 33.1. Concerns/Complaints Regarding Clinical Education

Please refer to the policy found in the DPT Clinical Education Handbook: “Handling Clinical Education Complaints/Concerns”

## 33.2. Concerns of Complaints Regarding the Program

A complaint from an employer of SCU’s Phoenix Metro DPT alumni or from the public will be directed to the Program Director. The Program Director will address and resolve the complaint when immediate remediation is needed. Complaints about the Program Director or Director of Clinical Education can be made directly to the Dean of the College of Health Professions or appropriate SCU administration. Complaints regarding curriculum and program planning will be maintained and reviewed annually as part of the program assessment plan. Additionally, students are encouraged to contact the American Physical Therapy Association and/or the Commission on Accreditation in Physical Therapy Education (CAPTE) via information found on the program’s website.

## 33.3. Student Grievances

Please refer to the policy and procedural steps in the SCU Academic Catalog: “Student Grievances”

# 34. Scholarship Opportunities

Beyond federal aid, students experiencing financial hardship are encouraged to consider the scholarship opportunities listed below:

- **APTA Minority Scholarship Award:** Up to \$5,000 for minority PT students in their final year .
- **APTA Mary McMillan Scholarship Award:** Up to \$5,000 for students within 12 months of graduation from an entry-level DPT program.
- **SCU Institutional Scholarships:** Internal scholarship opportunities for SCU students.

# 35. Incident Reports

Any student, visitor, or faculty injured or involved in an incident in the physical therapy laboratory or on other Program premises that results in trauma or injury must report the incident using the University Laboratory Incident Report Form.

An “Incident” is defined as “any event which is not consistent with the routine business of the University” and may be an accident or a situation that might result in an accident.

A student, visitor, or faculty member who experiences a safety and security incident on campus should report it to the Campus Police Department and complete an Incident Report with Campus Police.

# 36. Licensure Examination Eligibility

Graduation from a physical therapist education program accredited by the Commission on Accreditation in Physical Therapy Education, 3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305-3085; phone; 703-706-3245; accreditation@apta.org is necessary for eligibility to sit for the physical therapy licensure examination, which is required for lawful practice in all states.

Candidacy is considered to be an accredited status, as such the credits and degree earned from a program with Candidacy status are considered, by CAPTE, to be from an accredited program. Therefore, students in the charter (first) class should be eligible to take the licensure examination even if CAPTE withholds accreditation at the end of the candidacy period.

That said, it is up to each state licensing agency, not CAPTE, to determine who is eligible for licensure. Information on licensing requirements should be directed to the Federation of State Boards of Physical Therapy (FSBPT: [www.fsbpt.org](http://www.fsbpt.org)) or specific state boards. A list of state boards and contact information is available on FSBPT's website.

Southern California University is seeking accreditation of a new physical therapist education program from CAPTE. The program is planning to submit an Application for Candidacy, which is the formal application required in the pre-accreditation stage, on May 1, 2026. Submission of this document does not assure that the program will be granted Candidate for Accreditation status. Achievement of Candidate for Accreditation status is required prior to implementation of the professional/technical phase of the program; therefore, no students may be enrolled in professional/technical courses until Candidate for Accreditation status has been achieved. Further, though achievement of Candidate for Accreditation status signifies satisfactory progress toward accreditation, it does not assure that the program will be granted accreditation.

## 37. Program Course Descriptions

### 37.1. Foundational Sciences

#### DPT 612A: Human Physiology and Pathophysiology

This course examines the foundational principles of human physiology and pathophysiology essential to physical therapist practice. Students explore the physiological mechanisms underlying health and physical activity across the lifespan and analyze how disruptions in these systems contribute to disease and disability. Emphasis is placed on integrating knowledge of body system interactions, clinical manifestations, and physiological adaptations to exercise to inform differential diagnosis, clinical reasoning, and management strategies within physical therapy practice.

#### DPT 616A: Human Anatomy I

This course introduces foundational knowledge of human gross anatomy and neuroanatomy with emphasis on structures and functions that underlie human movement across the lifespan. Students examine the clinical relevance of embryology, histology, and functional anatomy as they relate to physical therapy evaluation and intervention. Laboratory experiences promote three-dimensional understanding through the use of virtual anatomy platforms, living and surface anatomy palpation, and synthetic human models. Anatomical regions of focus include the lumbar spine, pelvis, and lower extremities.

#### DPT 617A: Human Anatomy II

This course advances foundational knowledge of gross anatomy and neuroanatomy with emphasis on the cervical and thoracic spines, thorax, and upper extremities. Learners will examine the structural and functional relationships between musculoskeletal, nervous, vascular, and visceral systems as they relate to human movement, posture, and functional performance across the lifespan. Clinical perspectives are integrated through the application of embryologic and histologic principles to common movement dysfunctions and pathologies. Laboratory experiences utilize three-dimensional anatomy software, living and surface anatomy, palpation, and synthetic human anatomical models.

#### DPT 651A: Integrative Pain Sciences

This course examines the multidimensional nature of pain and the evidence-informed management of individuals with chronic pain conditions. Students explore contemporary models of pain physiology, psychosocial contributors, and mechanisms underpinning persistent pain. Emphasis is placed on comprehensive pain assessment, outcome measurement, and the selection of integrative, interdisciplinary, and patient-centered interventions. Current best evidence and clinical reasoning guide discussions on optimizing functional outcomes and enhancing quality of life for individuals across diverse clinical settings.

## DPT 627A: Clinical Neuroscience

This course examines the neuroscientific foundations of the movement system, emphasizing the neuroanatomical structures and neurophysiological processes that underlie motor control, sensory integration, and functional movement. Students develop a working understanding of how the central and peripheral nervous systems contribute to typical and atypical movement across the lifespan. Laboratory experiences focus on fundamental components of the neurologic examination, including screening procedures, movement system assessment strategies, and the application of common outcome measures and evidence-based assessment tools.

## DPT 641A: Pharmacology

This course introduces foundational pharmacologic principles, including pharmacokinetics and pharmacodynamics, and applies these concepts to evidence-informed patient management across the lifespan. Emphasis is placed on understanding how medications influence clinical presentation, therapeutic timing, safety considerations, and physical therapy outcomes. Content addresses pharmacologic management across major body systems including cardiovascular, pulmonary, neurological, gastrointestinal, musculoskeletal, urogenital, rheumatologic, and integumentary systems.

## DPT 642A: Advanced Diagnostics

This course introduces foundational pharmacologic principles, including pharmacokinetics and pharmacodynamics, and applies these concepts to evidence-informed patient management across the lifespan. Emphasis is placed on understanding how medications influence clinical presentation, therapeutic timing, safety considerations, and physical therapy outcomes. Content addresses pharmacologic management across major body systems including cardiovascular, pulmonary, neurological, gastrointestinal, musculoskeletal, urogenital, rheumatologic, and integumentary systems.

## 37.2. Physical Therapy Reasoning and Skills

### DPT 615A: Physical Therapy Fundamentals

This course introduces foundational knowledge, skills, and behaviors essential to physical therapist practice across clinical settings. Students develop proficiency in the foundational components of the patient and client management model, including the patient interview, systems review, and performance of basic examination procedures. Laboratory experiences emphasize palpation, assessment of range of motion, manual muscle testing, vital signs, myotome and dermatome screening, reflex testing, and anthropometric measurements. Students also practice principles of professional documentation, goal writing, and interpretation of basic test findings within the framework of evidence-informed decision-making and patient-centered care.

### DPT 613A: Therapeutic Interventions I

This course introduces the foundational biomechanical, physiological, and clinical principles that underpin therapeutic interventions within physical therapist practice. Students explore the evidence-informed application of therapeutic exercise, manual therapy, and movement-based strategies to promote tissue healing, manage pain, and restore mobility and function. Emphasis is placed on clinical reasoning, patient-centered decision-making, and selection, instruction, and progression of interventions consistent with best available evidence, professional standards, and the human movement system framework.

### DPT 624A: Health and Fitness Promotion and Prevention

This course introduces principles of lifestyle medicine, health promotion, wellness, and fitness within the context of physical therapist practice. Students explore evidence-based strategies for optimizing health and preventing injury in apparently healthy populations, with attention to nutritional influences, fitness assessment, and exercise prescription. Emphasis is placed on the biopsychosocial components of wellness and their integration into the ICF framework. Through case-based learning and laboratory application, students design, implement, and adapt

individualized and population-based wellness and injury prevention programs using appropriate clinical reasoning, professional communication, and safe procedural skills.

### **DPT 614A: Movement Science**

This course examines the foundational principles and clinical relevance of motor control, motor learning, normal and abnormal gait, and movement analysis. Emphasis is placed on integrating theoretical frameworks with structured analysis of everyday functional activities using the International Classification of Functioning, Disability, and Health (ICF) model. Students apply these concepts to develop sound clinical reasoning and inform decision making in physical therapist practice.

### **DPT 625A: Musculoskeletal Practice I**

This course introduces the clinical application of biomechanics, functional movement analysis, and examination principles for musculoskeletal conditions of the lumbar spine, pelvis, and hip. Students explore the etiology, epidemiology, and clinical presentation of common disorders encountered in physical therapist practice within these regions. Emphasis is placed on developing foundational psychomotor skills in regional palpation, examination, and evidence-informed intervention. Learning experiences integrate patient education, manual therapy, and therapeutic exercise within a clinical reasoning framework to support safe, effective, and patient-centered care.

### **DPT 623A: Therapeutic Interventions II**

This course examines the principles, indications, and clinical application of physical agents used to manage pain, support tissue healing, and address impairments in mobility, strength, and motor control. Emphasis is placed on integrating current evidence with sound clinical reasoning to guide the safe and effective selection, instruction, and progression of therapeutic interventions.

### **DPT 626A: Musculoskeletal Practice II**

This course advances students' clinical reasoning and psychomotor skills in the examination, evaluation, and management of musculoskeletal dysfunction of the lower extremity. Emphasis is placed on applying biomechanical principles, functional movement analysis, and region-specific examination strategies to common orthopedic conditions of the knee, ankle, and foot. Students integrate knowledge of etiology, epidemiology, and characteristic clinical presentations, with evidence-informed interventions emphasizing patient-centered education, manual therapy, and therapeutic exercise across the lifespan.

### **DPT 632A: Neuromuscular Practice I**

This course introduces the patient-management principles essential to the care of individuals with neurologic health conditions, with emphasis on acquired brain injury, including cerebral vascular accident (CVA) and traumatic brain injury (TBI). Students examine neurophysiological and patho-kinesiological mechanisms underlying movement-system impairments and learn to interpret how these impairments contribute to activity limitations and participation restrictions across diverse contexts. The course integrates foundational concepts in motor control and motor learning with contemporary evidence to support sound clinical reasoning. Guided laboratory and learning experiences emphasize differential examination, movement analysis, outcome measurement, and the application of evidence-based interventions within the physical therapist patient/client management model.

### **DPT 634A: Management of Aging Adult**

This course examines the physiological, psychological, and social dimensions of aging, emphasizing how age-related changes, chronic conditions, and contextual factors influence movement, function, and participation in older adults. Students explore the impact of comorbidities, vascular compromise, fall risk, cognitive changes, and environmental demands on health and mobility in older adults. Laboratory and applied learning experiences focus

on evidence-based outcome measures, functional assessment, clinical reasoning, and the development of patient-centered management strategies to support safe, effective care of the older adult across diverse settings.

### **DPT 635A: Musculoskeletal Practice III**

This course examines the clinical application of biomechanics, functional movement analysis, and examination principles for musculoskeletal dysfunction of the cervical and thoracic spine. Students investigate the etiology, epidemiology, and clinical presentation of common conditions affecting this region, with emphasis on movement system impairments and contributing personal and environmental factors. Learning experiences focus on developing psychomotor proficiency in regional palpation, examination techniques, and evidence-based interventions, including patient education, manual therapy, and therapeutic exercise, within a patient-centered framework across the lifespan.

### **DPT 637A: Cardiopulmonary Practice**

This course examines the management of individuals with cardiovascular, metabolic, and pulmonary conditions that contribute to movement system dysfunction across diverse clinical settings. Emphasis is placed on integrating pathophysiology, clinical reasoning, risk assessment, interpretation of laboratory and diagnostic data, and evidence-informed decision-making to promote safe and effective patient care. Case-based learning reinforces effective communication, goal formulation, discharge planning, and interprofessional collaboration. Laboratory experiences include ECG interpretation, exercise testing, heart and lung auscultation, pulmonary function assessment, and implementation of therapeutic interventions to support cardiopulmonary health and functional performance, among others.

### **DPT 633A: Neuromuscular Practice II**

This course advances the study of examination, evaluation, and management of individuals with neurological health conditions, with emphasis on spinal cord injury, vestibular dysfunction, multiple sclerosis, Parkinson's disease, amyotrophic lateral sclerosis, neuromuscular disorders, and central nervous system malignancies. Students apply and integrate movement system principles, motor control and motor learning concepts, theoretical frameworks, and evidence-informed practice within the patient/client management model. Learning experiences emphasize clinical reasoning, functional movement analysis, outcome selection, intervention planning, and patient-centered management strategies across the continuum of care.

### **DPT 636A: Musculoskeletal Practice IV**

This course advances the clinical application of biomechanics, functional movement analysis, and evidence-informed examination principles for musculoskeletal dysfunction of the upper extremity. Emphasis is placed on the etiology, epidemiology, and clinical presentation of common conditions encountered in physical therapy practice. Learners refine psychomotor skills in palpation, regional examination, and intervention planning, including patient education, manual therapy, and therapeutic exercise. Instruction emphasizes patient-centered, lifespan-oriented care and the integration of contemporary best evidence within the patient/client management model.

### **DPT 643A: Management of the Pediatric Patient**

This course introduces fundamental principles for the physical therapy management of individuals with musculoskeletal, neurological, and cardiopulmonary impairments from birth to young adulthood, grounded in a framework of typical development. Students apply clinical reasoning to evaluate movement dysfunction, promote participation, and support family-centered care, with case-based learning emphasizing communication, safety, and the integration of contemporary evidence into pediatric patient management. Topics studied include developmental delay and disability, assistive technologies, and advocacy.

### **DPT 644A: Management of the Complex Patient**

This course develops clinical decision-making skills for the physical therapy management of medically complex patients across the lifespan. Using a case-based approach, students integrate examination, evaluation, and intervention strategies for individuals with multimorbidity, polypharmacy, and conditions involving the cardiovascular, pulmonary, metabolic, oncologic, lymphatic, and integumentary systems. Emphasis is placed on interpreting the influence of comorbidities and social determinants of health on patient presentation, prognosis, and outcomes. Students design evidence-informed plans of care and identify appropriate referral patterns for complex patients across clinical settings.

### DPT 622A: Bracing, Prosthetics, and Orthotics

This course develops foundational knowledge and clinical reasoning skills for the selection, application, and evaluation of orthotic, taping, splinting, bracing, and prosthetic interventions commonly used in physical therapy practice. Students explore the functional and surgical anatomy related to lower-limb amputations and conditions requiring lower-quarter orthotic and prosthetic management. Laboratory experiences emphasize gait and movement analysis, residual limb management, orthotics, prosthetics, and rehabilitation strategies for individuals with limb difference. Implementation, modification, and revision of biomechanical interventions based on clinical reasoning is emphasized.

### DPT 652A: Primary Care Physical Therapy

This course examines the physical therapist's role as an interdependent practitioner within a collaborative, patient-centered healthcare model. Emphasis is placed on promoting differential diagnostic principles, and students are presented with the clinical tools and decision-making processes necessary to collect, evaluate, and communicate screening and examination/evaluation data to support timely intervention, effective communication, and appropriate referral across patient populations.

### DPT 653A: Advanced Therapeutic Interventions

This course develops advanced clinical reasoning and intervention skills for the management of neuromusculoskeletal dysfunction across diverse patient presentations. Building on foundational coursework, students are progressed through evidence-informed approaches to spinal stabilization, movement impairment syndromes, and soft tissue dysfunction. Interventions include a progression of therapeutic exercise, manual therapy techniques, joint mobilization and manipulation, muscle energy techniques, proprioceptive neuromuscular facilitation, and an introduction to trigger point dry needling (TDN). Laboratory experiences use case-based scenarios to refine clinical reasoning and decision-making, ensure safe and effective technique application, and support the development and progression of comprehensive, patient-centered plans of care.

## 37.3. Professional Behaviors

### DPT 610A: Professional Competencies I

This course introduces the foundations of professional formation and ethical practice in physical therapy. Students examine the core values, roles, and responsibilities of the physical therapist and begin developing the behaviors and skills expected of a competent, caring, and ethical practitioner. Emphasis is placed on professional conduct, integrity, and the cultivation of lifelong learning habits essential for ongoing professional growth. Through reflective learning and guided discussion, students explore the impact of cultural humility, diversity, and inclusivity on communication and patient-centered care, fostering respect for individual and societal differences within the healthcare environment.

### DPT 611A: Evidence-informed Practice I

This course introduces the foundational principles of evidence-informed practice and research methodology as they apply to physical therapist practice. Students will explore the hierarchy of evidence, research designs commonly used in health sciences, and strategies for developing focused clinical questions. Emphasis is placed on effective literature searching, critical appraisal of research quality, and interpretation of findings to support sound

clinical reasoning and decision-making. Through guided inquiry, students begin to integrate evidence with clinical expertise and patient values to inform professional judgment and lifelong learning.

### DPT 621A: Evidence-informed Practice II

This course advances students' understanding of research design, measurement, and statistical analysis as foundations for evidence-informed clinical decision making. Emphasis is placed on developing the ability to critically appraise scientific literature, interpret statistical outcomes, and evaluate the strength and applicability of research evidence to physical therapist practice. Through integrated discussions and applied activities, students build the analytical skills necessary for subsequent coursework that explores the scientific and theoretical foundations of contemporary physical therapy practice.

### DPT 631A: Mindful Patient Management

This course advances the clinical application of biomechanics, functional movement analysis, and evidence-informed examination principles for musculoskeletal dysfunction of the upper extremity. Emphasis is placed on the etiology, epidemiology, and clinical presentation of common conditions encountered in physical therapy practice. Learners refine psychomotor skills in palpation, regional examination, and intervention planning, including patient education, manual therapy, and therapeutic exercise. Instruction emphasizes patient-centered, lifespan-oriented care and the integration of contemporary best evidence within the patient/client management model.

### DPT 654A: Business Management and Entrepreneurship

This course introduces the fundamental principles of practice management and applies them to leadership development, strategic planning, and operational decision-making within physical therapy practice. Students explore key components of healthcare management, including organizational structure, human resources, fiscal management, reimbursement, compliance, and quality improvement, and examine how these elements integrate to support ethical, sustainable, and patient-centered service delivery. Emphasis is placed on developing entrepreneurial thinking, fostering innovation, and preparing graduates to lead and manage physical therapy services across diverse practice settings.

### DPT 705A: Capstone Course I

This course guides the student through the development of a research proposal for the Capstone project and initiates structured preparation for the National Physical Therapy Examination (NPTE). For the latter, students complete the Practice Exam and Assessment Tool (PEAT) to establish a baseline measure of board readiness. Through structured self-reflection, students analyze their performance trends, complete a SWOT analysis, and develop an individualized study plan to enhance their preparation. Emphasis is placed on critical evaluation of strengths and weaknesses, strategic planning, and the application of effective, evidence-informed study techniques to optimize success on the NPTE. By the end of the course, students will have an approved research proposal for the creation of their final Capstone project and a targeted approach to address content gaps, strengthen test-taking strategies, and enhance preparedness for the licensure process.

### DPT 661A: Professional Competencies II

This course prepares students professionally and emotionally for entry-level clinical practice by strengthening the knowledge, behaviors, and reflective practices essential for ethical, legal, and culturally responsive physical therapy care. Students explore the structure and function of major health care delivery systems and examine how these systems interface with physical therapy services. Emphasis is placed on professional ethics, health care regulations, risk management, and the development of habits that support lifelong learning and the physical therapist's role as an educator and mentor for professional growth.

### DPT 706A: Capstone Course II

This course synthesizes the cumulative knowledge and clinical skills acquired throughout the DPT curriculum and prior clinical experiences and applies it to both the creation of the final Capstone Project and continued preparation for the professional licensure examination. For the latter, students engage in an integrated review of body systems, emphasizing pathophysiological mechanisms, examination procedures, and patient/client management strategies aligned with current evidence-informed clinical guidelines. Through independent study and practice examinations mapped to the FSBPT Content Outline, students refine their clinical reasoning, consolidate foundational knowledge, and enhance test-taking proficiency. By the end of the course, students will have disseminated a Capstone project focused on whole-body health equity and community wellness and will have enhanced preparedness for the licensure examination.

## 37.4. Clinical Education Experiences

### DPT 645A: Physical Therapy Practice I

This first full-time clinical experience provides students with an 8-week integrative opportunity to apply foundational knowledge and emerging clinical skills in real-world practice settings. Under the direct supervision and mentorship of Clinical Instructor (CI) faculty at affiliated clinical sites, students participate in all aspects of patient/client management across the lifespan. Emphasis is placed on safe and ethical practice, professional communication, evidence-informed decision-making, and collaborative participation within interprofessional healthcare teams. This experience supports students' progression toward entry-level competence by integrating academic learning with authentic patient care.

### DPT 655A: Physical therapy Practice II

This second full-time clinical experience provides an 8-week immersive opportunity for students to advance their capabilities in patient/client management under the direct supervision of Clinical Instructor (CI) faculty at affiliated clinical sites. Students apply cumulative didactic and practical learning to deliver safe, evidence-informed care across the lifespan, engage in interprofessional collaboration, and refine clinical reasoning, professional behaviors, and communication skills consistent with contemporary physical therapy practice.

### DPT 665A: Physical Therapy Practice III

This terminal full-time clinical experience provides a 15-week immersive opportunity for students to integrate and apply the full scope of curricular knowledge and professional competencies in real-world practice. Conducted in collaboration with affiliated clinical sites, students engage in all aspects of patient/client management under the direct supervision and mentorship of Clinical Instructor (CI) faculty. Emphasis is placed on delivering safe, ethical, evidence-informed care within interprofessional teams, managing patients across the lifespan and continuum of care, and demonstrating clinical decision-making, communication, and professional behaviors expected of an entry-level physical therapist.

# 38. Appendices

## 38.1. Appendix A: Technical Standards and Essential Functions



### Introduction

#### What are Technical Standards?

Technical standards describe the essential abilities a student must be able to demonstrate, with or without reasonable accommodation, in order to successfully complete the Doctor of Physical Therapy (DPT) program and earn the degree. These standards are program requirements, not admissions criteria, and they are distinct from accommodations, which are determined through the Accessibility and Disability Services Office and the University’s accommodations process.

The DPT program at the Southern California University of Health Sciences Phoenix Metro campus in Arizona (DPT AZ) is delivered in a hybrid format combining online coursework with on-campus immersion laboratories and on-ground clinical experiences. The program is designed to prepare students to enter the profession as generalist physical therapists with the knowledge, skills, and professional behaviors required for entry-level practice.

The purpose of this document is to ensure that all students entering the program understand the essential functions and abilities required for successful completion. These technical standards reflect both the academic components of the program and the clinical practice expectations of the physical therapy profession.

#### Program Commitment to Accessibility

The University is committed to providing equal opportunity and reasonable accommodations to qualified individuals with disabilities in accordance with applicable federal and state laws. Students who believe that they may need accommodations to meet any of the technical standards described in this document should contact the Accessibility and Disability Services Office to initiate the accommodations process.

**Important Note on Clinical Education Sites:** The University uses independent clinical education sites that may or may not be willing or able to offer the same reasonable accommodations that are available at the University. The fact that the University offers reasonable accommodations to allow a student with a disability to complete the educational program is not a guarantee, implied or otherwise, that a graduate will be able to secure subsequent employment or clinical placement offering those same accommodations.

### Technical Standards

**Students must be able to meet the following technical standards with or without reasonable accommodation:**

1. COMMUNICATION

**Students must be able to:**

- Communicate effectively in English through multiple formats including written, verbal, and digital platforms.
- Exchange information accurately and efficiently with instructors, peers, patients, families, and members of interprofessional teams.
- Perceive and respond to both explicit and implicit communication, including nonverbal cues, when interacting with others.
- Document patient care information comprehensively and accurately using various formats (written, electronic).
- Participate actively and professionally in online discussions, virtual meetings, and synchronous learning activities.
- Seek and provide constructive feedback to support continuous learning and professional development.
- Establish professional rapport with patients and demonstrate cultural humility and responsiveness.

## 2. COGNITIVE AND INTEGRATIVE ABILITIES

### Students must be able to:

- Acquire, comprehend, retain, and apply complex information from various sources including texts, lectures, digital media, and clinical experiences, among others.
- Synthesize information from multiple domains to solve clinical problems.
- Demonstrate logical reasoning, critical thinking, and clinical judgment appropriate for physical therapy practice.
- Recognize the limits of their knowledge and abilities and identify when consultation or supervision is needed.
- Adapt to new or changing information and integrate it into clinical decision-making.
- Prioritize and manage multiple tasks effectively within situation- and site-specific time constraints.
- Develop and implement solutions to problems using evidence-informed approaches.

## 3. OBSERVATIONAL AND PERCEPTUAL ABILITIES

### Students must be able to:

- Perceive information presented in academic coursework through various modalities including visual, auditory, and tactile means, among others.
- Access and navigate digital learning platforms and electronic resources.
- Observe and distinguish relevant details during patient examination and assessment.
- Detect changes in patient status, responses to intervention, and environmental conditions.
- Recognize and interpret clinically relevant signs through observation and assessment.
- Discern dimensional and spatial relationships.

## 4. MOTOR AND TECHNICAL ABILITIES

### Students must be able to:

- Perform the psychomotor skills required for physical therapy examination and intervention.
- Execute coordinated movements necessary for patient care activities including examination techniques, therapeutic procedures, and patient handling, among others.
- Respond with sufficient speed and coordination to ensure patient safety in clinical situations.
- Operate equipment and technology required for coursework and clinical practice.
- Navigate physical environments typical of educational and clinical settings.
- Sustain the physical demands of clinical practice sessions and full-time clinical education experiences.

## 5. BEHAVIORAL, SOCIAL, AND PROFESSIONAL ATTRIBUTES

### **Students must be able to:**

- Demonstrate professional conduct, integrity, accountability, and ethical behavior consistent with the profession's core values and ethics.
- Manage the cognitive and emotional demands of an intensive professional program.
- Function effectively in situations involving uncertainty, ambiguity, or incomplete information.
- Adapt to varied educational and clinical environments that may change without warning.
- Work effectively with diverse populations and demonstrate cultural humility.
- Accept and integrate constructive feedback for professional growth.
- Maintain professional relationships and boundaries with patients, peers, faculty, and clinical instructors.
- Complete assigned responsibilities in a timely and thorough manner.
- Engage in self-assessment and reflective practice to support ongoing professional development.
- Demonstrate resilience and the ability to manage stress inherent in healthcare education and practice.

### HYBRID PROGRAM CONSIDERATIONS

#### **As a hybrid program, students must be capable of:**

- Engage effectively in both online and in-person learning environments.
- Manage technology requirements for online coursework including reliable internet access, video conferencing, and learning management systems, among others.
- Participate in synchronous online learning activities at scheduled times.
- Complete intensive on-campus immersion laboratories that require sustained engagement over extended periods.
- Transition between online learning and hands-on clinical skill development.
- Meet attendance and participation expectations for both online and on-campus components.

### ACKNOWLEDGMENT

By enrolling in the SCU DPT AZ program, students acknowledge that they have read, understand, and are able to meet the technical standards as described in this document with or without reasonable accommodation. Students who have questions or concerns about these standards or who wish to discuss potential accommodations should contact the Accessibility and Disability Services Office.

Students who require accommodations should initiate the accommodations process as early as possible to ensure appropriate supports are in place.

### REVIEW AND UPDATES

These technical standards are subject to periodic review and may be updated to reflect changes in educational delivery methods, professional practice standards, or legal requirements.

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#### ***For questions about these technical standards, please contact:***

Program Director, Doctor of Physical Therapy Program

Southern California University of Health Sciences - Phoenix Metro Campus, Arizona

## 38.2. Appendix B: Student Immersion Laboratory Participation Informed Consent



### STUDENT IMMERSION LABORATORY PARTICIPATION INFORMED CONSENT

#### **Purpose and Nature of Participation**

As part of the Doctor of Physical Therapy Phoenix Metro (DPT AZ) curriculum, students participate in immersion laboratories designed to develop psychomotor skills, clinical reasoning, and professional behaviors. These experiences are educational in nature wherein students serve as peer models or simulated patients for instructional purposes only and not as actual patients receiving individualized physical therapy treatment.

#### **Acknowledgment of Participation Requirements**

I understand and acknowledge that:

- I will be expected to actively participate in immersion laboratory activities as part of the curriculum, including, as appropriate, practicing techniques on classmates and serving as peer model or a simulated patient.
- Participation may involve physical contact, movement, and limited exposure of body regions reasonably necessary for instruction, with privacy protections consistent with standard physical therapy practice, conducted in a respectful and professionally appropriate manner.
- These activities support achievement of program learning outcomes and development of competencies as a future physical therapist. Participation in any specific activity remains subject to safety considerations, faculty direction, and applicable accommodation or modification processes.

#### **Risks and Responsibilities**

I understand that:

- Participation in laboratory activities may involve inherent risks, including minor discomfort, aggravation of pre-existing conditions, or, in rare cases, injury.
- I am responsible for informing faculty of any medical condition, injury, or circumstance (e.g., pregnancy, hypertension, implanted devices, musculoskeletal injury, or other health concerns) that may contraindicate or require modification of participation.
- I will exercise appropriate clinical judgment, professionalism, and care when performing techniques on classmates.
- I will stop immediately if directed by faculty or if a classmate withdraws consent for a specific activity.
- I will immediately report any injury, adverse event, concern, or safety issue to the supervising instructor or another designated official.

## **Safety and Faculty Supervision**

I acknowledge that:

- All laboratory activities are conducted under the supervision of qualified faculty.
- Faculty may modify or restrict participation to ensure safety, dignity, privacy, or educational appropriateness.
- Alternative learning experiences will be provided when participation is not appropriate, or consistent with course objectives, program requirements, and applicable law.

## **Professional Conduct Expectations**

I agree to:

- Treat all classmates with dignity, respect, and professionalism.
- Maintain professionalism and confidentiality regarding personal, health-related, or body-exposure information learned about classmates consistent with healthcare standards.
- Refrain from performing any examination or intervention without appropriate instruction, permission, and supervision.

## **Voluntary Participation and Right to Decline**

I understand that:

- While participation is generally required to meet course objectives, my consent to any specific activity is ongoing. I may raise a concern and request to stop, modify, or refrain from a specific activity when I believe there is a health, safety, privacy, or other concern.
- I understand that declining a specific activity does not automatically excuse me from meeting course competencies and may require completion of an approved alternative activity.
- I must communicate such concerns promptly to faculty.

## **Acknowledgment and Consent**

By signing below, I confirm that:

- I have read and understand the information provided above and have had an opportunity to ask questions.
- I acknowledge the risks, responsibilities and professional expectations associated with participation.
- I agree to participate in laboratory activities in a safe, professional, respectful, and responsible manner.

**Student Name (Printed):** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### 38.3. Appendix C: DPT Consent for Release of Information



#### ***Consent for Release of Information***

As a student/graduate of SCU, there will be occasions when SCU is requested to provide information concerning your academic and clinical education performance to third parties, including, but not limited to employers, licensing boards, or personnel from clinical facilities.

The purpose of this form is to provide consent for the release of all such information.

Please initial and sign below.

\_\_\_\_\_ Clinical Education Information

- Name and Contact Information
- Emergency Contact Information
- “Site View” of the student’s Exxat profile
- Compliance documents for onboarding (i.e., health information, verification letter of background check and/or drug screen if applicable)
- HIPAA and OSHA training certification
- Basic Life Support certification
- Professional Liability Insurance information
- Applicable academic status

\_\_\_\_\_ Current and/or permanent address to prospective employers

\_\_\_\_\_ Other (specify): \_\_\_\_\_

Student/Graduate Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_