School of Physical and Occupational Therapy
3654 Promenade-Sir-William-Osler
Montreal, Quebec
H3G 1Y5

COURSE GUIDE

B.Sc. PHYSICAL THERAPY U-3

2002-2003

IMPORTANT DATES

Term A:	Registration Period	May 14 - Aug. 5, 2002
	Labour Day	Sept. 2, 2002
	First Day of Classes	Sept. 4, 2002
	Course Change (drop/add period)	Sept. 4 - 15, 2002
	Thanksgiving Day	Oct. 14, 2002
	Last Day of Classes	Nov. 1, 2002
	Examination Period	Nov. 4 - 8, 2002
	Clinical Rotation	Nov. 11 - Dec. 13, 2002
	Clinical Rotation	Jan. 6 - Feb. 7, 2003
	First Day of Classes	Feb. 10, 2003
	Course Change (drop/add period)	Nov. 4, 2002 - Jan. 19, 2003
	Study Break	Feb. 26 - 28, 2003
	Last Day of Classes	Apr. 11, 2003
	Examination Period	Apr. 14 - 30, 2003
	Easter	April 18 - 21, 2003

CLINICAL PERIODS

U3 - Two 5 Week Block Rotations

PHTH-420: November 11 to December 13, 2002

PHTH-421: January 6 to February 7, 2003

McGILL UNIVERSITY
School of Physical and Occupational Therapy

COURSE GUIDE
B.Sc. (PHYSICAL THERAPY) U-3

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U3 CURRICULA PLAN - 2002-2003 - PHYSICAL THERAPY PROGRAM

FALL: TERM A **WINTER: TERM B**

Academic Term (9 wks) + Exams (1 wk)+ Clinical IV (5 wks) = Total 15 wks

Clinical I (5 wks) + Academic Term (8 wks) + Exams (2 wks) = Total 15 wks

Academic Term Sept 4 - Nov 1	**Exams** Nov 5 - 9	**Clinical Block** Nov 12 - Dec 14	**Clinical Block** Jan 7 - Feb 8	**Academic Term** Feb 11 - Apr 15	**Exams** Apr 14 - 30
POTH-401 RESEARCH METHODS 3cr		PHTH-420 CLINICAL AFFILIATION IV 3cr	PHTH-421 CLINICAL AFFILIATION V 3cr	POTH-445 ADMINISTRATION / MANAGEMENT 4cr	
PHTH-432 PAIN MANAGEMENT 3cr				PHTH-434 BIOMECHANICS II 3cr	
PHTH-433 COORDINATED REHABILITATION I 3cr				PHTH-435 COORDINATED REHABILITATION II 3cr	
POTH-447 SPECIALIZED AREAS OF PRACTICE 2cr				PHTH-438 FITNESS/INJURY MANAGEMENT 2cr	
				POTH-446 CURRENT TOPICS IN REHABILITATION 2cr	

Note: PHTH - PT
POTH - OT/PT

Term A: Sept. 4 to Dec. 13, 2002
Courses: Sept. 4 to Nov. 8, 2002 (to include exam week)
Clinical: Nov. 11 to Dec. 13, 2002

Term B: Jan. 6 to Apr. 30, 2003
Clinical: Jan. 6 to Feb. 7, 2003
Courses: Feb. 10 to Apr. 11, 2003
Exams: Apr. 14 to Apr. 30, 2003

2002-2003 OCCUPATIONAL THERAPY PROGRAM - U3		
Course Number	**Course Name**	**Credits**
POTH-401	Research Methods	3
OCC1-424	Splinting and Orthotics	2
OCC1-436	OT Practice V: Medical & Surgical Conditions	3
OCC1-437	OT & Community Mental Health	3
OCC1-438	Psychosocial Theories in OT	3
OCC1-440	Prevocational & Vocational Rehabilitation	2
OCC1-441	Advanced Technology/Ergonomics	2
POTH-445	Administration/Management	4
Term A or B	One professional specialty course	2
PHTH-420	Clinical Affiliation IV	3
PHTH-422	Clinical Affiliation V	3
	TERMS A & B - TOTAL CREDITS	**30**

2002-2003 PHYSICAL THERAPY PROGRAM - U3		
Course Number	**Course Name**	**Credits**
POTH-401	Research Methods	3
PHTH-420	Clinical Affiliation IV	3
PHTH-421	Clinical Affiliation V	3
PHTH-432	Pain Management	3
PHTH-433	Coordinated Rehabilitation I	3
PHTH-434	Biomechanics	3
PHTH-435	Coordinated Rehabilitation II	3
PHTH-438	Fitness/Injury Management	2
POTH-445	Administrator/Management	4
POTH-446	Current Topics in Rehabilitation	2
POTH-447	Specialized Areas of Practice	2
	TERMS A & B - TOTAL CREDITS	**31**

POTH-401 - RESEARCH METHODS

Credits: 3

Lecturer: N. Korner-Bitensky (Coordinator)

Topic Experts: S. Wood-Dauphinee, N. Korner-Bitensky, I. Gélinas, B. Mazer, J. Fung, L. Snider N. Paquet, P. McKinley

STRUCTURE

Two 2-hour interactive sessions per week for nine weeks in addition to 1 hour weekly of self-directed learning or seminar work.

OBJECTIVES

This course is not designed to create a researcher. It will enable the graduating therapist to make sense of the vast amount of literature in rehabilitation.

Upon completing the course the student will be able to:

1. Search various computer and off-line data sources to review a topic of interest.

2. Critique an article, presentation at a conference or seminar. This ability to critique will enable the student to make informed treatment choices with clients.

3. Understand how to choose a measurement tool for use in clinical practice. The choice will vary according to the student's purpose.

4. Sit on an Ethics Committee that reviews rehabilitation protocols. Almost all hospitals have formed or are now forming Ethics Committees.

5. Design a program evaluation. There are many new programs being initiated in rehabilitation. With these initiatives comes the responsibility of evaluation.

6. Understand various research designs and when they are used.

7. Be aware of the main areas of research in rehabilitation that are currently underway.

8. Be able to prepare a questionnaire for use with other health professionals, with family or with clients. Questionnaire design requires special knowledge if the responses are to be of any value.

9. Understand the study of cost, cost-effectiveness and cost-benefit. These issues are especially relevant for therapists today!

10. Last but not least, it is hoped that the student will see participation in research as a way of life for the graduate therapist and not a dreaded event to be discarded after graduation.

COURSE SCHEDULE

Day and Time to be announced

# 1	*overview, surveys, sampling frame*
#3	*statistics that tell the wrong story*
#5	*reliability, validity, diagnostics*
#7	*case-control studies*
#9	*randomized clinical trials*
#11	Thanksgiving Holiday
#13	*asking a research question/ethics in research*
#15	*critical review process*
#17	*program evaluation*
#19	*selected topics discussion* In class **Quiz** (45 minutes)
# 2	*questionnaire design, outcome measures*
#4	*cross-sectional studies*
#6	*cohort studies*
#8	*association versus cause*
#10	*evidence based therapy* In class **Quiz** (45 minutes)
#12	*quasi-experimental design*
#14	*cross-over studies* *single subject design*
#16	*critical review process*
#18	*cost, cost-effectiveness, gambles*
	Articles to be placed in topic leaders box.
#20	*seminars for selected topics* *held in small classrooms (TBA)*

REQUIRED TEXT

No required text. Syllabus and readings will be supplied. Reference readings for specific topics are indicated.

EVALUATION

Oral Presentation of Topic	10 %
Written Presentation of Topic	25 %
Quiz #1	30 %
Quiz #2	35 %

POTH-445 - ADMINISTRATION/MANAGEMENT

Credits: 4

Lecturers: E. Aston-McCrimmon (Co-Coordinator), C. Storr (Co-Coordinator)
P. Allard, A. Di Re, Guest Lecturers

COURSE STRUCTURE

The course geared to Physical and Occupational Therapy will consist of lectures/seminars/presentations over an eight week period on Monday and Wednesday mornings from 9:30 a.m. - 12:30 p.m. starting February 10 to April 14, 2003.

COURSE OBJECTIVES

As the practice of Physical and Occupational Therapy shifts from a hospital/rehabilitation base to ambulatory care, the community and the private sector, increased business and management skills are needed. This course is designed to incorporate business administration as it pertains to the health field to include organizational and management knowledge for the development of skills and behaviours required to support practice both in the public and the private sector. It incorporates an understanding of organizational and change theory, as well as marketing and entrepreneurial strategies.

These skills and behaviours in administration and management are developed and refined with experience gained following graduation, and are not expected to be well developed in the entry-level practitioner.

Thus, the skills and behaviours anticipated in the new graduate will involve knowing where and how to obtain the supports, mentoring and resources to fulfill the responsibilities related to administration and management functions which may be required in the work situation. Life-long learning in the area of administration/management is an anticipated outcome.

The goal of this course therefore is to sensitize students to the administrative and management processes appropriate for the changing roles that the physical or occupational therapy graduate will have in the years to come.

LEARNING OUTCOMES

Based on a knowledge of organizational theory, management, health care and human resource policies, the student shall be able to:

1. position the professions of Occupational and Physical Therapy in relation to legislation, health professional organizations and unionization;
2. relate professional ethics and the law to professional practice;
3. apply the dimensions of Codes of Ethics to the practice of Occupational and Physical Therapy.
4. given public and private rehabilitation facility situations:
    a) identify the administrative tasks involved in their management;
    b) identify and prepare pertinent facility records and reports and indicate how they are used and maintained;
    c) design a rehabilitation facility for each setting taking into account the specific client population needs and the economic, architectural and resource factors and merits;
    d) understand and apply marketing principles;

e) outline a total quality management control program including risk and utilization parameters;

5. analyse the intricacies of interpersonal relationships and team interactions within the health care system;
6. identify and provide positive reenforcing recommendations for interpersonal relationships and team management.

COURSE CONTENT

A. Principles of Organizational Theory:
- organizational design and behaviour theory
- development and strategy
- organizational change theory and strategy
- organizational restructuring
- governance

B. Principles of Management Theory to Include:
- development of mission and mandate
- leadership theory
- facilitation of teams
- program and service delivery planning
- matrix and program management and evaluation
- quality management, quality improvement, quality assurance, risk management
- policies and procedures - purpose and development
- departmental planning in public and private sectors

C. Strategic Information Management:
- outcome/effectiveness indicators and charting
- management information, productivity and service utilization
- client-based information systems (case mix, grouping, methodologies and clinical records)
- market and business analysis
- privacy/confidentiality requirements and responsibilities

D. Human Resource Policy, Planning and Management:
- recruitment, selection, retention, evaluation
- compensation systems
- supervision, delegation and facilitation
- labour relations - impact on workplace, work teams, conflict resolution
- curriculum vitae/resume - preparing and interpreting
- job interview process, job preview process
- employee assistance, e.g. stress management counselling
- alternative employment contracts
- equity issues

E. Fiscal Resource Management Including:
- budgeting process
- productivity
- cost-effectiveness

F. Modes of Service Delivery Including:
- institutional practice
- private practice
- community based practice including health management organizations (HMOs), local community health clinics (CLSCs)
- industrial/worksite based practice

- evidence-based practice

G. Standards of Practice Issues:
- efficiency
- efficacy
- appropriateness
- cost effectiveness
- outcome measures
- ethical/legal considerations

H. Marketing and Entrepreneurial Strategies:
- environmental analysis
- developing the business plan and requests for proposal
- outsourcing on non-core competencies, e.g. technical writing, public relations
- strategic marketing
  - business marketing, strategic business planning
  - social marketing

REQUIRED READINGS

To be assigned by different lecturers.

RECOMMENDED READINGS

Bailey, D.M. & Schwartzberg, S.L. *Ethical and Legal Dilemmas in Occupational Therapy*. F.A. Davis.

Blair, J. & Gray, M. (1985). *The Occupational Therapy Manager*. The American Occupational Therapy Association.

Hickok, R.J. *Physical Therapy Administration and Management*, (2nd edition). American Physical Therapy Association.

Physiotherapy/Occupational Therapy Workload Measurement System. Health and Welfare Canada, 1988.

Purtilo, R. (1993). *Ethical Dimensions in the Health Professions*. W.B. Saunders.

The Canadian Patient's Book of Rights - Lorne Elkin Rozovsky.

Treatment and Progress Records: A Guide to the Preparation and Keeping of Treatment and Progress Records - Canadian Physiotherapy Association.

Walter, J. (1993). *Physical Therapy Management*. Mosby.

Clinical Practice Guidelines, A Discussion Paper for the Canadian Physiotherapy Association - The Canadian Physiotherapy Association, May 1996.

EVALUATION

1. Group OT/PT Project **60%**
   a) Presentation (scheduled during last 5 classes) (25%)
   b) Paper (due last day of class) (35%)
2. Written Examination - Case-Based Format (during Examination Period) **40%**

PHTH-420 - CLINICAL AFFILIATION IV
PHTH-421 - CLINICAL AFFILIATION V

Credits: 3 PHTH-420
3 PHTH-421

Lecturer: L. Asseraf-Pasin, Academic Coordinator of Clinical Education
A. Gaglietta, Assistant Academic Coordinator of Clinical Education

COURSE STRUCTURE

These two courses are the fourth and fifth of the five Clinical Practicum courses which commenced in U1 and continue over the three years of the program. Clinical experience in the various McGill teaching Hospitals or other accredited centres is provided. The student is given the opportunity to practice physical therapy, to observe in other clinical disciplines and participate in teaching rounds and in in-service education. An evaluation of performance is given for each rotation by the supervising therapists who use the clinical assessment form, "***Clinical Performance Instrument***", shown on the following pages. The final evaluations for these rotations will be used to judge the clinical competence of the student in the overall clinical affiliation program. Each of the five clinical affiliations must be passed sequentially.

If a student does not achieve a satisfactory standing on a particular rotation, **IT MUST BE REPEATED AND A SATISFACTORY LEVEL OF ACHIEVEMENT MUST BE OBTAINED.** If a student is unsuccessful in the repeat rotation, he/she will be asked to withdraw from the program. Every effort will be made to arrange the repeat rotation within the three-year period. As this, however, is not always possible, students required to complete an additional clinical rotation should be prepared to convocate in the Fall of the final year. **Please note that only one rotation may be repeated if failed. A failure of any subsequent Clinical Affiliation course will require the student to withdraw from the program.** Satisfactory standing in all required professional courses and clinical placements each year are mandatory to be able to continue in the Physical Therapy program. Students must pass all the required professional courses before undertaking the designated clinical course for their level of training. If a clinical placement has to be deferred which would lead to it being completed out of the specified program sequence of professional-clinical-professional courses, the student may not be given permission to take the subsequent professional courses until that clinical placement has been successfully completed. This would lead to delayed graduation.

Please refer to section ***f)*** **of the** ***Academic Advancement*** **in the** ***Academic Regulations*****.** These regulations apply to all five clinical affiliation courses given over the three years.

OBJECTIVES

The purpose of the clinical training program is to:

1. provide opportunity for the integration and application of theoretical knowledge of the basic and clinical sciences;

2. encourage the student to make use of all resources to supplement and reinforce the material covered in the academic curriculum;

3. provide guidance in the performance of effective evaluation procedures;

4. develop observational, analytical and interpretive abilities for effective evaluation of the patient and planning of treatment goals;

5. develop student's ability to design appropriate treatment programs and modify them according to the changing status and safety of the patient;

6. develop student's ability to execute effective therapeutic procedures;

7. develop student's organizational ability so as to make optimal use of time;

8. develop qualities necessary for effective interpersonal relationships (with patients, other health care professionals and non-professional staff);

9. develop verbal and written skills;

10. develop professional behaviour in accordance with the existing code of ethics of the O.P.Q.;

11. define and strive for achievable outcomes;

12. use differential diagnosis and predict prognosis.

FORMAT

Clinical Session Dates - 2002-2003

U3 Session V	**November 11 - December 13, 2002**
U3 Session VI	**January 6 - February 7, 2003**

Fieldwork placement will be arranged with McGill teaching hospitals, McGill affiliated hospitals and centres. Every effort will be made to place students in the Montreal region. At times students may request fieldwork outside of the Montreal region. When students are placed in out-of-town facilities, travel and accommodation are the student's responsibility.

DRESS CODE

Each student is responsible to purchase the following for use in the clinical setting: full length navy blue or black pants; white top either polo style or shirt with sleeves; plain white or navy sweater may be worn over the shirt. Walking shoes (no canvas shoes or sandals) and matching socks are required. An identification tag (purchased through the

Students Society) is compulsory and must be worn on the outside of the shirt or sweater at all times when in the clinical setting.

REQUIRED TEXT

To be announced.

HOSPITAL EVALUATION

For each rotation the student is required to complete the "Student Evaluation of Hospital Affiliation" form. The

completed form must be handed to the Centre Coordinator of Clinical Education on the last day of the rotation. As well, students must complete a self evaluation form.

STUDENT EXPERIENCE BOOKLET

During the clinical program the students are required to complete the appropriate clinical experience sheet. The booklet is made available in March of the first year of studies and must be picked up from Room D5 by March 15. The student is responsible to enter the information on each rotation and present it to the next hospital. **Following completion of the final rotation in U3 the completed booklet must be returned to the Academic Coordinator of Clinical Education, Room D7, Davis House. Failure to do so may result in a delay of final clinical mark.**

HOSPITAL HANDBOOK

Prior to (**one week before**) the beginning of a rotation the student must obtain the Hospital Handbook from the Clinical Affiliation Office (D5). The student is expected to read it before the start of the rotation.

IMMUNIZATION

Reminder: All students must have obtained the immunization card from the McGill Student Health Services before entering the first clinical placement. This card indicates that the student has the necessary inoculations for clinical practice. The card must be presented to the Centre Coordinator of Clinical Education on the first morning of each clinical practice period.

Failure to complete the required tests before the Clinical Periods will result in the student being unable to enter the clinical setting.

CARDIOPULMONARY RESUSCITATION

Reminder: It is compulsory that all students have a valid up-to-date CPR certificate before entering each clinical placement. This certification must be maintained over the three years of the program.

Failure to attain a valid CPR certificate **Level C** before the Clinical Periods will result in the student being unable to enter the clinical setting.

PHTH-432 - PAIN MANAGEMENT

Credits: 3

Lecturers: A. Lamontagne (Coordinator), Guest Lecturers

COURSE STRUCTURE

This lecture/seminar course takes place in the fall term, twice a week.
Students will attend lectures, participate in clinical solving sessions and perform case presentations.

LEARNING OUTCOMES

On completion of this course, the student will be able to:

1. Explain the anatomical and neurophysiological bases of pain, including peripheral and central mechanisms, as well as pain modulation.
2. Explain the current theories underlying the physical, psychological and pharmacological bases of pain relief.
3. Recognize how age, gender, culture and the environment contribute to experience of pain and must be considered in the assessment and management.
4. Assess pain in adult, pediatric and elderly clients.
5. Discuss in difference between acute and chronic pain in terms of assessment and management
6. Describe the pathophysiology and plan appropriate interventions for specific chronic paint syndromes such as phantom limb pain, 'hemiplegic shoulder', fibromyalgia, neuropathic pain and others.
7. Recognize the principle of psychological and pharmacological intervention to treat pain, and the multi disciplinary approach undertaking by pain clinics
8. Search for available WEB assessment and intervention strategies in pain management.

REQUIRED TEXTS

Pain: A Textbook for Therapists (2002). J. Strong, A.M. Unruh, A. Wright and G.D. Baxter. (Eds). Churchill Livingston, Toronto, 461 p.

RECOMMENDED TEXT

TBA

EVALUATION

Self-Learning	10%
Assignment	20%
Case presentation (oral)	20%
Final exam (short answers)	50%

PHTH-433 - COORDINATED REHABILITATION I

Credits: 3

Lecturers: Edith Aston-McCrimmon (PT - Coordinator), Aliki Thomas (OT - Coordinator
Valmae Elkins, Claudia Brown, Caroline Jones, Pierre Allard and Guest Lecturers

COURSE STRUCTURE

This multidimensional lecture/seminar/small group teaching series is designed to initiate the student to varying aspects of past and present professional practice, ethics and law.
From a basic theoretical background the student is expected to participate in developing appropriate present and future physical therapy management strategies taking into consideration the ethical and legal responsibilities associated with professional practice.
A case-based approach will be incorporated in professional management issues, in career planning and in resolving ethical issues. Evidence- based practice methods will be stressed throughout.

TOPICS TO BE COVERED

HIV & AIDS
Historical Role of Physical Therapists in Obstetrics
Pelvic Floor Disorders
Physical Therapy Practice Options – Private Practice Issues
Career Planning – resume writing, interview techniques and letter writing
Overview of the Ethical and Legal Responsibilities in Rehabilitation
Ethical Dimensions of Health Care

COURSE SCHEDULE

Wed. Sept 4, 2002	9:00 – 12:00	Seminar Series –1.- HIV & Aids (P&OT)
Thurs. Sept 5, 2002	9:00 - 12:00	Historical Perspective of PT Obstetrical Practice V. Elkins
Fri. Sept 6, 2002	9:00 - 12:00	Seminar Series – 2.- HIV & Aids (P&OT)
Wed. Sept 11, 2002	1:00 - 4:00	Pelvic Floor Disorders - C. Brown
Wed. Sept 18, 2002	1:00 - 4:00	Pelvic Floor Disorders - C. Brown
Wed. Sept 25, 2002	1:00 - 4:00	Pelvic Floor Disorders - C. Brown
Wed. Oct 2, 2002	2:00 – 4:00	Career Planning in Health Care – Student Services (P&OT)
Mon. Oct 7, 2002	1:00 – 4:00	Ethical & Legal Responsibilities in Rehabilitation -C. Jones (P&OT)
Wed. Oct 9, 2002	1:00 – 4:00	Options in Physical Therapy - Private Practice Issues - C. Brown
Wed. Oct 16,2002	1:00 – 4:00	Ethical Dimensions in Health Care – P. Allard
Wed. Oct 23, 2002	1:00 – 4:00	Ethical Dimensions in Health Care – P. Allard
Wed. Oct 30, 2002	1:00 – 4:00	Ethical Dimensions in Health Care – P. Allard

Mon to Fri. week of Oct. 28th - small group presentations of resumes & letters– (sign up sheet)

REQUIRED TEXTS

The Professional Code.
Code of Ethics of L'Ordre professionelle des physiotherapeutes du Quebec (OPPQ).

RECOMMENDED READINGS

To be assigned by lecturers, which may include class notes, reading lists and/or web sites.
It is expected that the student will routinely do literature searches on the WEB in each area for the most pertinent evidence-based practice guidelines as appropriate to the topic under discussion.

EVALUATION

Written evaluation	25%
WEB based project to be submitted by October 28th electronically	25%
Student presentations of their written resumes and cover letters to be done in small group sessions (4 to 6 students)- during the week of October 28th	10%
Ethical Case-Based project/reports - to be handed in October 30th	40%

PHTH-434 - BIOMECHANICS

CREDITS: 3

COORDINATOR/LECTURER Sophie J. De Serres, PhD
Assistant Professor
Office: Room 306, Hosmer House
E-mail: sophie.deserres@mcgill.ca
Phone: (514) 398-4548 (McGill)
(450) 688-9550 ext. 622 (Lab)

COURSE STRUCTURE

- Two 2.5-hour periods per week: Tuesday and Thursday from 9:30 a.m. to 12 p.m.
- Two optional review sessions: one during the week prior to the mid-term exam and one during the week prior to the final exam

PRE-REQUISITE

POTH 222 Kinesiology

Course open to students in the Physical Therapy program.

COURSE DESCRIPTION

A problem-based course covering the application of physical, physiological and technological principles to the study of the human body in health or disease across the life span. The students will develop a knowledge of how these principles relate to the mechanisms of traumatic or chronic injury, clinical evaluations. And treatments.

LEARNING OUTCOMES

1) Acquire knowledge of fundamental principle, general concepts, and theories related to the mechanics of the human body and technical aids.

2) Integrate these principles, concepts and theories to prior knowledge of anatomy, physiology, physics and mathematics.

3) Explain the basic theories as they apply to biomechanics.

4) Identify problems and specify the assumptions relevant to the situations of interest.

5) Apply the fundamental principles and general concepts of biomechanics to problems that are novel situations when compared to those presented in class, by formulating the appropriate solutions.

6) Synthesize and analyse the arguments related to a biomechanical theory which generates controversial opinions in the current scientific literature.

ASSIGNMENTS AND EVALUATION

The distribution of mark is as follows:

i. Five individual quizzes (5% each)	15% (best 3 out of 5)
ii. Three assignments (5% each)	15%
iii. Term paper	15%
iv. Mid-term examination	20%
v. Final examinations	35%

REQUIRED TEXT

Nordin, M. and Frankel, V.H. (2001). *Basic Biomechanics of the Musculoskeletal System, 3rd Edition,* Lippincott Williams & Wilkins, Philadelphia, PA (available at the McGill Bookstore at in January).

Supplemental articles, texts and handouts will be distributed to the students, when necessary.

OTHER REFERENCES

Bell F (1998). *Principles of Mechanics and Biomechanics.* Stanley Thornes Ltd., Cheltenham, UK.

Brownstein B and Bronner S (1997). *Evaluation Treatment and Outcomes Functional Movement in Orthopaedic and Sports Physical Therapy.* Churchill Livingstone, New York, NY.

Enoka RM (2001). *Neuromechanical Basis of Kinesiology (3rd Edition).* Human Kinetics, Champaign, IL.

Hamill J and Knutzen KM (1995). *Biomechanical Basis of Human Movements,* Williams & Wilkins, Media, PA.

Nigg BM and Herzog W (1994). *Biomechanics of the Musculoskeletal System*. John Wiley & Sons, New York, NY.

Ozkaya N and Nordin M (1991). *Fundamentals of Biomechanics*: *Equilibrium, Motion, and Deformation.* Van Nostrand Reinhold, New York, NY.

Soderberg GL (1997). Kinesiology: Application to Pathological Motion (2nd Edition). Williams & Wilkins, Baltimore, MD.

Whiting WC and Zernicke RF (1998). *Biomechanics of the Musculoskeletal* injury. Human Kinetics, Champaign, IL.

Winter DA (1991). *Biomechanics and Motor Control of Human Gait.* University of Waterloo Press, Waterloo, Ontario.

PHTH-435 - COORDINATED REHABILITATION II

Credits: 3

Lecturer: K. Berg , Davis House Room 24, Tel:. 398-6750, E-mail: Katherine.Berg@mcgill.ca
M.A. Dalzell and guest lectures

COURSE DESCRIPTION

This course focusses on issues relating to the management of patients with chronic conditions.

COURSE STRUCTURE

Classes will consist of lectures, and student lead discussions/presentations.

AIMS

The course has four specific aims:

- To reinforce student's skills in identifying prognostic factors and the use of measures for other purposes.
- to introduce theories of behavioural change and potential applications to practice when managing patients with chronic conditions
- To develop introductory skills in encouraging/motivating patients to change or adopt new behaviours
- To reinforce the importance of understanding the health care continuum and to understand the role of other professional during the course of recovery of progression of the condition.

OBJECTIVES

On completion of this course, the student shall be able to:

- Search the literature and existing data to describe the pattern of recovery or progression of illness and expected health service use for specific patient populations..
- Search and critically evaluate the literature for risk factors, prognostic, diagnostic, and outcome measures for specific patent populations.
- identify areas of behavioural counselling and suggested strategies for health promotion and selfcare management for specific patient populations.
- Identify potential roles for physical therapists in meeting gaps in health service or health promotion for specific populations.

EVALUATION

Mid-term examination:	25%
Final examination:	25%
Progressive Project:	50%

For the progressive project, students will work in groups of 3-4 individuals. They will choose a chronic condition during the first week of class. They will progressively work on describing the health care continuum for patients with that condition, the role of other professionals, the prognostic factors in the literature, expected course of recovery, progression or recurrence, medical and social management of the condition, effectiveness of treatments, gaps in the health care continuum and issues pertaining to lifestyle counselling. Specific information on expectations and timing of progressive project to be provided on the first day of class.

PHTH-438 - FITNESS/INJURY MANAGEMENT

Credits: 2

Lecturer: D. Perez

COURSE STRUCTURE

This lecture/seminar/practical course will be held in eight 3-hour sessions on Monday from 3:30 p.m.- 6:30 p.m. starting February 10, 2003.

OBJECTIVES

The focus of this lecture/seminar/practical course is on fitness management, exercise prescription and injury prevention as a means of promoting an active lifestyle across the lifespan. This includes the integration of pathology, physiology and exercise science as applied to our clinical practice.

By integrating previous knowledge and experience gained throughout the program coupled with new knowledge and skills, the student will be able to:

1. integrate the different aspects of physiotherapy knowledge and skills in the overall management of musculoskeletal conditions.

2. discuss the effects of injury as it relates to the psychology of the client;

3. describe how the treatment of common orthopaedic conditions might differ for manual labourers, sedentary workers, recreational athletes and elite athletes;

4. describe the various muscle development techniques, their advantages and disadvantages, and which are best to improve speed, strength, power and endurance;

5. demonstrate knowledge of prevention of injuries and re-injury;

6. discuss curse stabilisation and proprioception principles as they apply to fitness, and injury prevention and rehabilitation.

7. perform, justify and rationalize the most common taping techniques for use in the acute, sub-acute and chronic setting;

8. describe normal and abnormal patterns of menarche and the effects of training, competition, anorexia and

9. describe the basic elements of nutrition including their function, sources, storage and effect of an excess or lack of these elements and the different requirements for children, women, men, the aged, adolescents and athletes;

10. discuss nutritional fallacies and fads including pre-game meals, nutritional loading, supplements and fluid intake.

CONTENT

Topics covered include the following:

- Fitness measures across the lifespan
- Concepts of wellness
- Workplace injury and the physiotherapeutic interventions
- Workers' compensation issues
- Ergonomics - resources, environment and technical aids
- Shoulder and knee rehabilitation
- Designing exercise programs across the lifespan
- Monitoring and progressions of exercise programs
- Nutrition in the context of fitness and wellness
- Injury management through the lifespan
- Wellness issues specific to girls and women
- Mobility in the elderly
- Labs include the topics of taping, and head and neck injury in sporting events as well as case studies dealing with the above topics.

REQUIRED TEXTS

McGee, D.J. (1997). *Orthopaedic Physical Assessment*, (3rd edition). Toronto: W.B. Saunders Co.

RECOMMENDED TEXTS

Austin, K., Gwynn-Brett, K., & Marshall, S.C. (1993). *The Illustrated Guide to Taping Techniques*. London.

Guccione, A.A. (Ed.) (1993). *Geriatric Physical Therapy*. St. Louis: Mosby.

EVALUATION

The evaluation of this course will be a combination of one during semester written mid-term (value 30%) and one written final examination (value 60%) given during the exam period, both in the short-answer, multiple choice and fill in blanks format. The remaining 20% will be assesses based on a group project that may require both a written submission and an oral presentation.
(This will be announced on the first day of class.)

POTH-446 - CURRENT TOPICS IN REHABILITATION

Credits: 2

Lecturer: S. Cross

COURSE STRUCTURE

This course is given for 9 weeks for 3 hours per week from 3:00 p.m - 6:00 p.m. starting on Wednesday, February 12, 2003.

OVERALL GOAL

The overall goal of this course is to integrate and build upon previously learned orthopaedic knowledge. The course will also introduce serious pathology seen in orthopaedic conditions. Physiological principles will be applied to the development of treatment programs.

OBJECTIVES

By the end of this course, the student will be able to:

1. include and apply the appropriate special tests to the evaluation of an orthopaedic case.

2. properly and safely perform the special tests included in the course.

3. discuss the positive and negative findings of an orthopaedic evaluation and integrate these findings to develop a physical diagnosis.

4. appreciate the team approach to orthopaedic treatment.

5. develop an index of suspicion as applied to serious pathologies which can masquerade as orthopaedic conditions.

6. draw upon previous knowledge to develop complete treatment plans based on examination findings.

COURSE CONTENT

The Handout for the course containing the schedule, contents and reading assignments for each week will be available on the first day of class, February 12, 2003.

REQUIRED TEXTS

Magee, D. (1997). *Orthopaedic Physical Assessment*, (3rd edition).

Selected readings from The Journal of Orthopaedic and Sports Physical Therapy.

DRESS CODE

Shorts and shirts will be required for all classes. Students will not be allowed to attend lectures and practical sessions of this course if they do not conform to this DRESS CODE.

EVALUATION

1. **Paper** - (25%)

Each student will be assigned a condition seen in orthopaedics and be expected to present the relevant anatomy, physiology and pathology and discuss the role played by physiotherapists in the management of this condition. This paper should be approximately 5 pages in length.

2. **Oral Examination** - (25%)

The student will be required to demonstrate some of the special tests and discuss the positive findings. This exam will take about 15 minutes to complete.

3. **Written Final Examination** - (50%) Short answer format

The answers to the questions should incorporate the objectives of the course which could include:

a) showing an understanding of the evaluation process and specifically the use of special test;
b) applying the evaluation findings to plan a rehabilitation program;
c) integrating the anatomy and physiology and the stages of tissue healing; and
d) recognizing possible other findings which should cause suspicion during the examination.

POTH-447 - SPECIALIZED AREAS OF PRACTICE

Credits: 2

Lecturers: J.P. Dumas (Coordinator), N. Liverani

COURSE STRUCTURE

This course will be given in the format of lectures, seminars, workshops and practical sessions in Term A starting on September 6, 2002, lectures: 9:00 a.m. - 12:00 p.m. and laboratory: 1:00 p.m. - 4:30 p.m. The schedule and groups will be given out on the first day of class..

OVERALL COURSE OBJECTIVES

The course will give U3 students the opportunity of building upon their previous U1 and U2 Manual Therapy skill learning and give them the opportunity of integrating this treatment approach with the client care experience gained from their clinical rotations. The presentation of this course will focus on a case-based, client centred approach, using the latest technology and emphasising outcome measures.

DESIRED OUTCOMES

Following these three courses the graduate should be able to:

1. apply clinical reasoning skills in complex orthopaedics cases through the development of assessment and treatment plans.

2. demonstrate evidence of knowledge integration of U1 and U2 material in area such as:

    - natural, severity and irritability of the patient's problem;
    - architectural designs
    - articular signs
    - neurological signs
    - neuromeningeal test
    - compression and traction test
    - arterial patency tests
    - basic palpation of articular and soft tissue structures
    - peripheral joint screening tests
    - active, passive, resisted movements
    - muscle length and
    - ligament stress tests

3. demonstrate skill and knowledge in the evaluation and treatment of selected orthopaedic conditions sch as temporomandibular disorders and pelvic joints dysfunctions

4. Demonstrate the ability to recognize non-mechanical disorders of the neuromuscular articular system (different diagnosis) and decide which patients may require further professional opinion..

5. identify and present the scientific evidence to a controversial issue.

6. justify the choice of orthopaedic clinical test based on their values and limitations

REQUIRED TEXT

McGee, DJ (1997). *Orthopaedic Physical Assessment,* (3rd edition). Toronto: W.B. Saunders Co.
Course notes

EVALUATION

Oral Presentation	25%
Practical Examination	30%
Written Examination	45%

TERM PAPERS

PROCEDURE FOR FULFILLING TERM PAPER REQUIREMENTS

No paper will be accepted late without an explanation to and on approval by the staff involved, **PRIOR** to the original date of submission. A new deadline may then be arranged between the staff and student **if the staff considers the request to be valid.** Failure to conform to this procedure may mean that the student will automatically receive a mark of "0" for the paper.

GUIDELINES FOR WRITING A TERM PAPER

1. **TERM PAPERS**

- must be typewritten and double spaced.
- size of paper, 8 ½ x 11", heavy duty, white bond.
- margin: 1" on all sides.
- written in Times New Roman, Arial or Courier New font.

2. **SEPARATE PAGE FOR THE FOLLOWING READINGS:**

- title page
- abstract
- acknowledgement
- index of contents
- introduction and objective of paper
- presentation
- discussion
- conclusion
- reference or bibliography
- appendix

a) Title page shall contain

- title of article
- author's name
- course number
- professor's name
- date

b) Abstract

- 100 to 250 words may be required (depending on the professor)
- the abstract is a concise statement about what was done, what was found and what was concluded.

c) Acknowledgement Includes

- names and positions of any individuals who have helped in the preparation of the project, in

assessing the results, or in preparing the illustrations or graphs, as well as;

- names of any agency such as professional organizations or the Dominion Bureau of Statistics who have provided data.

d) Index of Contents

- this must be included with their page numbers.

e) Introduction

- this section should introduce the topic and state clearly the objective of the paper as well as define any terms which may not be of common usage and known to every one in the particular context of the paper, for example, a qualified therapist is one who ....., and an unqualified therapist is one who .....

f) Presentation

- this part contains the "body" of the paper and it should be subdivided into sections depending on the content. These sub-sections must be listed separately in the index under 'presentation'.

g) Discussion - Conclusion

- this part should reflect whether the paper has helped to clarify or resolve the original purpose.
- practical implications that could be drawn from the paper could be presented here.
- ideas from the paper that could be useful for further study could also be given.

h) Bibliography or References

The term bibliography is much too pretentious except in the case of a library study which contains a complete list of everything published within specified limits about the subject.

References (books, personal comments, documents, articles) are sources through which the author has obtained information. The value of an article is not measured by the number of references and they should not be included merely to impress the professor. The worst sin is to include a list of references which have never been read or seen by the author.

All references, be they ideas or fact from work of another person, must be documented. If they are not, this constitutes "PLAGIARISM".

See Section on "Plagiarism".

TERM PAPERS

The referencing system of the American Psychological Association (APA) may be used for term papers.

Reference Citations in Text

References are to be cited by the author - date method; that is, the surname of the author and the year of publication are inserted in the text at an appropriate point:

Mosey (1974) compared reaction times.
In a recent study of reaction times (Mosey, 1974)

This method gives useful information in the text and enables the reader to locate the citation easily in the alphabetical reference list.

If a paper has two authors, always cite both names every time the reference appears in the text:

Smith and Jones (1975) discovered.

If a paper has more than two authors, cite all authors the first time the reference occurs; include only the surname of the first author followed by 'et al' and the year in all subsequent citations of the same reference.

Williams, Jones and Smith (1975) discovered.....
Williams, et al. (1975) found.....

Multiple citations in parentheses at the same point in text follow the order of the reference list. Therefore, multiple citations of the same author are arranged in chronological order, separated by commas, and the author's name is not repeated for each work. In citing more than one paper by the same author in one year, the suffixes a, b, c, etc., are added after the year, and the year is repeated. (These same suffixes are used in the reference list). In-press citations come last.

Recent studies (Jones, 1956, 1958, 1966a, 1966b, in press-a, in press-b) have shown.

If different authors are cited at the same point in text, the citations are arranged alphabetically by authors' surnames, separated by a semi-colon, and enclosed in one pair of parentheses.

Recent studies (Brown & Smith, 1965; Smith, 1962, 1964; Williams, 1971) have shown.

Reference Lists

The reference list at the end of each journal article establishes the authority of the article by citing material publicly available. Authors should choose references wisely and only include sources that readers can retrieve. A reference list cites works that specifically support a particular article. This is in contrast to a bibliography, which cites works for background or further reading. References cited in text must appear in the reference list, and conversely, each entry in the reference list must be cited in text. The author must make certain that references appear in both places and are in agreement.

All references should be prepared in the following style:

Sequence

Arrange the elements in a reference entry in the following order:

Author: all authors of the work, with surnames and initials (not full name) in inverted order.
Date of publication.
Title: article, chapter, or book.
Facts of publication: For journals - journal name in full, volume number, inclusive pages.
For books - city of publication, publisher's name.

Punctuation

Use periods to separate the three major subdivisions of a reference citation: author, title, and publication data. Use commas within the subdivisions (e.g. between date and volume number in a journal entry). Use a colon between the place of publication and the book publisher. Use parentheses for extensions, qualifications, or interpretation of each subdivision for the entire entry.

Periods separate the subdivisions:
'Author, J.P.' 'Year' 'Title of the work.' 'Publication data'

Commas separate within subdivisions:
Publication date for journal
'American Psychologist, 28, 376-384.'

Publication data for a book:
'Academic Press'

A colon separates the place of publication and the publisher:
'New York:: Academic Press'

Capitalization

Capitalize entries according to the following:

Journal titles: Capitalize the first letter of the first word of the title.
Article, chapter, or book titles: Capitalize the initial letter of the first work only. Make exceptions according to common usage, such as capital letters for proper names, first word of a title within a title, and first word after a colon or dash.

Abbreviations

Titles of journals are not abbreviated; they are spelled out in full.

Arabic numerals

Although some volume numbers of books and journals are given in roman numerals, APA journals use Arabic numerals for all numbers in reference lists (e.g., Vol.3, not Vol. III).

Examples of Reference Citations

Journals

1. Journal article, one author.
   Harlow, H.F. (1962). Fundamental principles for preparing psychology journals, articles. Journal of Comparative and Physiological Psychology, 55, 893-896.

2. Magazine article, no author.
   The blood business. (1972, September 11). Time, pp. 47-48.

Books

1. Book and two authors, second edition, Jr. in name.
   Strunk, W., Jr., & White, E.B. (1979). The elements of style (3rd ed.). New York: Macmillan.

2. Article in an edited book, two editors, one volume of multivolume work.
   Riesen, A.H. (1966). Sensory deprivation. In E. Stellar & J.M. Sprague (Eds.), Progress in p h y s i o l o g i c a l psychology: Vol. 1 (pp. 239-252). New York: Academic Press.

Online Journals

Author (Year). Title. Journal Title [Type of medium], volume (issue), paging or indicator of length. Available. Supplier/Database name/Item or accession number [Access date].

Example:
Clark, D. (1998). APA is easy! Writing Skills for Nursing Students, [Online] 1(1), 15 paragraphs. Available. Http://www.gcse.edu/~djclark/skills/apa.htm [1999, January 1].

FOOTNOTES

Acknowledgement and author identification:
Standard footnotes of acknowledgement and author identification appear on the first page of an article.

Content footnotes: Content footnotes are explanations or amplifications of the text. Because they are distracting to readers they should only be included if they strengthen the discussion.

Table Footnotes: Table footnotes are appended only to a specific table.

Numbering of Footnotes: Text footnotes should be numbered consecutively throughout the article with superscript Arabic numerals. If, after a footnote occurs it is later mentioned, use a parenthetical note "(see Footnote 3)", rather than the superscript number.

Footnotes to a table should be lettered consecutively within each table with superscript lowercase letters.

i) Appendix

An appendix, although rarely used, is helpful under certain circumstances. If describing certain materials in depth would be distracting or inappropriate to the main body of the paper, you might include an appendix.

Some examples of suitable material for an appendix are:

a) sample of questionnaires, evaluation forms, etc.
b) a list of materials used in the study.
c) samples of patients' productions.

The criterion for including an appendix should be whether it is useful to the reader in understanding, evaluating, or replicating your study. Material of either general or specialized interest should not be presented for its own sake. If an appendix is used, the reference in text should read:

(See Appendix A for complete derivation).

AUDIOVISUAL GUIDELINES

GENERAL INFORMATION

The School has a small video-library which is stored in Hosmer House, Room 11 in the basement. Contents are indexed, filed in order and listed in a folder in Hosmer House, Room 11.

If you wish to use these materials, present your student ID card to Mr. Alan Hammaker, the Chief Technician in Hosmer House, Room 11, who will help you locate the suitable materials and will ask you to fill out a loan card. Your ID card will be returned to you once the borrowed materials are returned.

You may view audiovisual material in the Health Sciences Library in the McIntyre Medical Sciences Building, and by special arrangement in Hosmer and Davis Houses if School equipment and rooms are available.

RULES AND REGULATIONS

1. All audio-visual material to be borrowed MUST BE SIGNED IN AND OUT. A yellow loan card for this purpose is available in Hosmer House, Room 11.

2. Instruction sheets and pamphlets are available for all items of equipment. They are filed alphabetically by manufacturer in Hosmer House, Room 11. STUDENTS MUST LEARN THE CORRECT METHOD OF OPERATION OF ALL EQUIPMENT BEFORE USE. If you are having problems operating the equipment, please contact your course coordinator. If the equipment is not functioning properly, please contact Mr. Alan Hammaker in Hosmer House, Room 11 (398-4516) immediately.

3. Immediately after viewing, all audio-visual materials must be returned to Hosmer House, Room 11.

4. Any equipment in need of repair should be reported to Mr. Alan Hammaker immediately.

TEACHING SLIDES

A file index of slide topics is in Hosmer House, Room 11 along with the slide collection. These are also available for loan on the same basis as other audio-visual materials.

CATALOGUES

A small selection of video-tape and film catalogues is available in Hosmer House, Room 11.

LIBRARY

The McIntyre Health Sciences Library is the main reference and lending library for students in the School of Physical and Occupational Therapy. The following are a few of the pertinent journals available:

Canadian Journal of Occupational Therapy
American Journal of Occupational Therapy
British Journal of Occupational Therapy
Physiotherapy Canada
Physical Therapy (Journal of the American Association)
Journal of Orthopaedic and Sports Physical Therapy
American Journal of Physical Medicine
Rheumatology and Rehabilitation
Developmental Medicine and Child Neurology
Orthotics and Prosthetics
Scandinavian Journal of Rehabilitation Medicine
International Journal of Rehabilitation Research

GENERAL INFORMATION

The McIntyre Health Sciences Library

a) Journal Stack Sections - Journals are placed in the STACK SECTION corresponding to the TITLE of the journal, e.g. AJOT was the title for the American Journal of Occupational Therapy for the years 1978/79, therefore look under AJOT. Prior to and following these dates, the title was changed to 'American Journal of Occupational Therapy', therefore it is now necessary to look under American Journal of Occupational Therapy.

b) The Subject Micro Catalogue System - gives information about journals relevant to occupational therapy and physical therapy. Look up . . . 'Occupational Therapy' or 'Physical Therapy'.

c) Index Medicus and Excerpta Medica - will assist in providing relevant reference material and are invaluable when writing term papers.

d) Journals published prior to 1961 are on the 2nd floor of the McIntyre Medical Sciences Library, those published in 1961 and after are on the 3rd floor.

THE SCHOOL OF PHYSICAL AND OCCUPATIONAL THERAPY

GUIDELINES FOR THE USE OF THE PHYSICAL AND OCCUPATIONAL THERAPY UNDERGRADUATE AND GRADUATE COMPUTER LABORATORY

LOCATION

This computer laboratory of twelve stations is for the exclusive use of the Physical and Occupational Therapy students and is located on the second floor, Room 201D and 201E (situated to the left and right of rooms 235 and 234) of the McIntyre Medical Sciences Building, 3655 Promenade Sir-William-Osler.

HOURS

The laboratory will be open 24 hours a day.

ACCESS

All Physical and Occupational Therapy students will have their own NT account instead of logging on with the general student account. The student's user name will have the structure of the first 5 letters of their last name and the last two digits of his/her graduating year, example: John Smith, Graduating Year 2000, would have a user name of Smith00. If there are two or more Smith family names, then the user name would be Smith001, Smith002. Students have have a last name shorter than 5 letters will have their full last name. The initial password will be the student's ID number which is located below his/her name on his/her ID card. It usually takes the form of 9XXXXXX.

The default client that has been chosen is Outlook Express. Email accounts have also been created for you. The user name is the same as your NT user name (see example above). Email will only have to be set up once; these settings will then be retained on the server after you logoff. This means that when you logoff and come in the next day, the email setup will be downloaded from the server.

In order to change your password, follow the instructions given at the website: https://www.medcor.mcgill.ca/management/cyrusaccpasswd.html. In order to set up Outlook Express, follow the instructions from website http://www.medcor.mcgill.ca/email/outlook_setup.htm.

Students also have space on the NT server where they may save files. By default, when you choose save from Word, it will take you to your folder on the server. From Explorer you can see that there is a mapped drive with the letter K:, this contains all the folders on the server for your class year. You will see all the folders for your class year but you will only have access to your own folder. This data will be backed up every night. All data on the local PC is not backed up. There is also a 35 MB Quota set per user. If you surpass this quota you will not be able to save anymore and you must perform some cleanup.

In order for other students to use the computer, you must logoff. To logoff, you click on Start and select Log Off. If you do not logoff your account is left open and may be used by the next student. This means that they can read your email or any files that you have saved on the server. All accounts will be automatically logged off after 30 minutes of inactivity, all open files will be closed but not saved. In order to change your NT password, you must logon and then press Ctrl + Alt + Delete and then click on the Change Password Button.

Any comments or questions should be directed by email to pravin.mistry@mcgill.ca

August 4, 1999