



DREXEL UNIVERSITY

Orthotics and Prosthetics



**Master of Science in Orthotics &
Prosthetics Program Student
Handbook
Academic Year 2025-26**



Master of Science in Orthotics & Prosthetics Program Student Handbook

Dear MSOP Students:

Welcome to the Master of Science in Orthotics and Prosthetics (MSOP) Program Handbook for the 2025–2026 Academic Year.

This handbook has been developed to support your academic journey within the Department of Orthotics and Prosthetics, part of the College of Health Sciences. It outlines important academic policies, procedures, and expectations that guide our program and reflects our faculty's commitment to your professional growth and success.

At Drexel O&P, our mission is to foster a supportive and rigorous learning environment where students are empowered to excel both academically and clinically. We encourage you to review this handbook thoroughly and refer to it regularly as a resource throughout your time in the program.

Please note that this handbook supplements the broader policies of Drexel University, which can be found on the university's official website. Students are responsible for adhering to all policies outlined herein, and updates may occur as needed. In the event of any revisions, affected students will be informed in a timely manner.

On behalf of the entire faculty and staff, we welcome you to the MSOP program and wish you every success as you pursue your graduate education and professional development in orthotics and prosthetics.

Sincerely,

J. Chad Duncan, PhD, CRC, CPO
Program Director
Chair, Department of Orthotics & Prosthetics

Julie Quinlan,
Associate Program Director
Department of Orthotics & Prosthetics

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General Information and University and College Policies

Academic Calendar

The general academic calendar can be found at: [Drexel Academic Calendar](#).

Academic Dismissal Appeal Process

Students are formally notified of an academic dismissal in writing by letter and email. If you had an extenuating circumstance that may affect the decision of dismissal, please provide a detailed explanation of the circumstances in your formal appeal.

Appeal Process

1. A student has until Monday of the first week of the next academic term in which they are scheduled to be enrolled (class or clinical rotation) to submit a formal appeal letter* to the department chair and copying CNHPStudentAppeals@drexel.edu. The letter should include the program name and why the student is appealing.
2. The decision of this first level appeal is made by the Department Chair.
3. If the student is not satisfied with the decision of the Department Chair, the student may escalate the appeal by sending a formal appeal letter to the College of Nursing and Health Professions (CNHP) Student Services Department at CNHPStudentAppeals@drexel.edu to exercise due diligence.
4. The appeal is reviewed by CNHP senior leadership.
5. The decision of the college is considered final for undergraduate students, and there are no further avenues for appeal. Graduate students can appeal the final decision to the Graduate College.

For more information see: [Drexel University's Graduate Student Academic Standing Policy](#).

If a student does not appeal their Academic Dismissal by Monday of the first week of the next academic term in which they are scheduled to be enrolled (class or clinical residency), at that point, the student will be considered Permanently Dismissed.

Academic Honesty and Integrity

Students in the College of Nursing and Health Professions at Drexel University are engaged in professional practice. This requires action, responsibility, and accountability of the highest standards. Students in a professional program are held to these standards, which are mirrored in the standards of honesty and integrity in Drexel University's academic integrity code. Academic dishonesty, as defined by the university can be found at the following site: [Academic Integrity](#)

Cheating, plagiarism, forgery, or other forms of academic misconduct are not tolerated at Drexel University. It is the responsibility of all students to ensure that their study and participation in the academic process is so conducted that there can be no question concerning their integrity. Faculty members have the responsibility of conducting their courses in a manner to foster academic integrity.

Unless specifically exempted, examinations, quizzes, laboratory practicals, case studies, research, papers, projects and other assignments are expected to be the work of the individual student. Any use of ideas, data, or wording of another person must include explicit acknowledgment of the source. Failure to give such credit is plagiarism. Copy and pasting of material, unless data or a speech, even with a citation, can be construed as plagiarism.

Any alteration/fabrication of clinical data, falsification of student logs or otherwise inaccurately reporting actual participation in an assignment constitutes academic misconduct in the clinical area. Any alteration or fabrication of experimental data would be considered academic misconduct in research. In addition, intentionally aiding another student in such activities is also a violation of the Code of Academic Integrity.

Examinations, quizzes and laboratory practica are proctored or otherwise administered in a secure manner. Each instructor specifies, as appropriate, what materials students may use during a written or practical exam, where students sit, or any other instructions. Unauthorized communication or use of unauthorized materials during the examination constitutes academic misconduct and is a violation of the code.

Students are encouraged to cooperate and assist in the prevention of cheating and plagiarism. Cheating and/or plagiarism will result in disciplinary action as deemed appropriate, including suspension and /or expulsion from the College and the University. Any threats made by students against faculty applying this policy will be reported to the Dean of the College of Nursing and Health Professions and the Office of Student Life, which may result in penalties to the student. The student code of conduct can be viewed [here](#).

All students in the College of Nursing and Health Professions must complete an online tutorial “*Recognizing Plagiarism*.” New students need to complete this by the midterm of their first semester attending Drexel. This tutorial is available via our LMS Learn online learning suite. If you are not sure how to access this tutorial, contact your academic advisor.

All students in the College of Nursing and Health Professions are required to attest adherence to the *Intellectual Honesty Certification*. Students are required to sign the individual and/or group statement either one time at the beginning of each course (the “one time” signature on these statements applies to all graded assignments for that particular course) or with each assignment. Check each course syllabus to know what the particular requirement is for the course you are taking.

The individual statement is as follows:

I certify that:

- 1. This assignment is entirely my own work, with any words and/or ideas from other sources (print, Web, other media, other individuals groups) being properly cited in text, and placed in a proper reference section.*
- 2. Any material used from another assignment has been discussed with and approved by the instructor.*

Student’s Signature: _____

Course Submitted: _____

Term: _____

Date: _____

The group statement is as follows:

We certify that this assignment is presented as entirely our own intellectual work. Any words and/or ideas from other sources (e.g. printed publications, Internet sites, electronic media, other individuals, groups, or organizations) have been properly indicated using the appropriate scholarly citation style required by the department or College.

We have not submitted this assignment in its entirety to satisfy the requirements of any other course. Any parts of this assignment from other courses have been discussed thoroughly with the faculty member before this submission so that there is an understanding that we have used some of this work in a prior assignment.

Student’s Signature _____ *Date* _____

Student’s Signature _____ *Date* _____

Student’s Signature _____ *Date* _____

The college's procedure for handling of academic integrity cases is outlined in a document titled "Academic Integrity Investigation Process" that is posted on the LMS shell specific to your particular program.

Alcohol and Illicit Drug Use

All students must comply with Drexel University policies on alcohol and illicit drug use. These policies can be found in the student code of conduct located [here](#).

Appropriate Use of Electronic Devices in the Classroom

The use of cell phones during classes and lab sessions for texting and talking may be disruptive to the other students and, therefore, such use of such devices is prohibited. Please be courteous to your instructor and your fellow classmates and turn off all cell phones and store them properly in your book bags or purses.

The use of laptop computers or similar devices during lectures and lab sessions must be limited to course activity only. Accessing any social media site (Facebook, Twitter, etc.) or personal e-mail accounts during lectures and lab sessions is a violation of classroom policy.

Students are prohibited from having cell phones or other electronic devices with them during examinations unless allowed by the instructor. If not allowed, all electronic devices should be properly stored in book bags or purses at the front of the room during examinations.

Video recording by students is not permitted during lecture and labs. Audio recording is permitted with the permission of the instructor. For all courses, course content is the property of Drexel University and, therefore, students cannot post or distribute any on-line materials without the consent of the course instructor.

Immunizations/Health Requirements

Drexel University requires all entering students to complete the following immunization schedule before matriculation. If a student does not have record of certain vaccinations, a positive titer result must be submitted in its place. Any student with a titer result that is read as equivocal or negative will need revaccination, as per CDC guidelines.

1. MMR vaccine (two doses) or positive titers for Measles, Mumps and Rubella
2. Hepatitis B vaccine (completed 3 doses) and Hepatitis B Titer showing immunity
3. Tdap (Tetanus, Diphtheria, and Pertussis) vaccine within the last 10 years, Td booster if Tdap is greater than 10 years old
4. Two-step PPD or IGRA blood test for initial TB clearance
Two-step process:
 1. Initial PPD given;
 2. The second step 1-3 weeks after the first PPD was given. Students will then update yearly with a one-step PPD screening and submit documentation annually;
 3. Students with a positive reading on a PPD test* must submit documentation of a negative chest x-ray. Some clinical/practicum sites may require a PPD more often than yearly.
*A completed Signs and Symptoms Form is required to be on file with all positive PPD results. The form is available at [CNHP Compliance](#).
5. Two Varicella vaccines at least 4 weeks apart or a titer showing immunity
6. Seasonal Influenza vaccine (must be completed after vaccine becomes available for the Fall term)
7. Any additional seasonal vaccines that may be required by the Center for Disease Control and/or the clinical/practicum facilities for the current year
8. Physical examination – completed form signed by provider

Billing and Tuition

Drexel does not mail paper bills. Each student is responsible for checking his/her own tuition bill on [DrexelOne](#). Extensive information on paying your bill and how to make payment can be found here, [Drexel Central](#).

Career Opportunities

The Steinbright Career Development Center is a Drexel University resource that students can use to look and prepare for a job after graduation. Information about the Center can be found here: <https://drexel.edu/scdc/> Many job search resources are posted on their website.

Additionally, many employers will post job opportunities in a Drexel-sponsored space called Handshake. You can find the listings here: <https://drexel.edu/scdc/career-services/searching-for-job/handshake>

Classroom and Lab Use

Food and drink are permitted into lecture and lab areas at the prerogative of the faculty member teaching the course. The privilege of food and drink in the classrooms and labs may be suspended at any time if the primary faculty person feels students are not keeping these areas clean. Students are expected to keep the classrooms, laboratories and student lounge areas neat by realigning classroom chairs and returning equipment to its proper place between classes and after lectures or laboratory sessions. Trash should be placed in the waste cans found in the classrooms, labs and hallways.

Commencement/Graduation

The date for commencement is set on a yearly basis by the institution. All students must complete an on-line degree application via [DrexelOne](#), by the appropriate deadline.

Covid-19

Students are required to follow the latest Drexel guidelines regarding Covid-19. Latest information about Covid-19 can be found at: <https://drexel.edu/coronavirus/health-safety/covid-19-dashboard/>

Civility and Student Code of Conduct

Drexel University expects all students to conduct themselves responsibly and in a manner that reflects favorably upon themselves and the University. When a student does not act responsibly and violates the University or academic program policies, rules, regulations, or standards of conduct, formal disciplinary action may result. The Conduct process reflects the University's concern that students maintain high standards. The Conduct process attempts to foster personal learning and growth, while at the same time holding individuals and groups accountable for inappropriate behavior. Likewise, Drexel University's College of Nursing and Health Professions holds a shared philosophy and purpose as the University. In addition, the programs in this College have heightened standards of conduct given that the health professions are bound by standards of practice, codes of ethics, as well as licensure and certification boards.

Civility has to do with courtesy, politeness, and good manners. Civility is the awareness and recognition of others in all interactions and demonstration of a high level of respect and consideration. In civility, we recognize that no action of ours is without consequence to others or ourselves. We need to anticipate what these consequences will be and choose to act in a responsible and caring way.

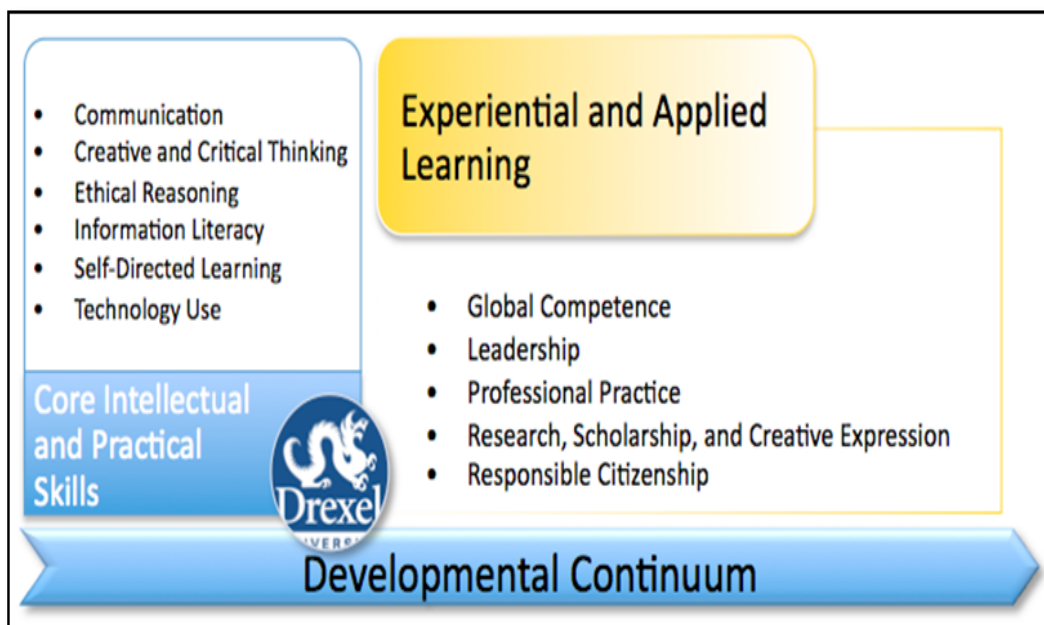
Uncivil behaviors are acts of rudeness, disrespect, and other breaches of common rules of courtesy. These acts of incivility range from disrespectful verbal and non-verbal behaviors to physical threats to another's well-being. Uncivility is a lack of awareness and recognition (intended or unintended) of others in our interactions when we fail to give them a

high level of respect and consideration. Uncivility usually results when one does not anticipate how actions will affect others.

Drexel students need to “know the Code” of Conduct. To learn about the Code and Community Standards at Drexel go to the Office of Student Conduct and Community Standards at [Student Conduct and Community Standards](#)

Drexel Student Learning Priorities

Students graduating from Drexel University should achieve competency in a field of study evidenced by achievement of a set of program-specific learning outcomes. In addition to demonstrating competency in their fields of study, students graduating from Drexel University should also demonstrate meaningful progress in what we have identified as six core intellectual and practical skill areas (Communication, Creative and Critical Thinking, Ethics, Information Literacy, Self-Directed Learning, and Technology Use) and five experiential and applied learning areas (Global Competence; Leadership; Professional Practice; Research, Scholarship, and Creative Expression; and Responsible Citizenship), achieving levels of competency in each core area appropriate to their program of study, individual interests, and abilities. Learning in these core areas supports, and is integrated with, learning in your discipline and provides the foundation for a broad education across disciplines. More information is available at [Drexel Learning Priorities](#). Below is a diagram of the Drexel Student Learning Priorities.



Emergencies, Safety and Security

General safety tips

Students are advised to always be aware of their surroundings, to safeguard their valuables and to take sensible precautions. Students may request a walking escort 24 hours a day, 7 days a week by calling 215.895.2222. The Drexel Department of Public Safety holds a number of crime prevention and awareness programs and provides valuable information, services and safety tips. See [Drexel Public Safety](#) for more information.

In the event of a true emergency, call 911.

DrexelALERT

Drexel University has an emergency notification system called DrexelALERT, which enables fast and efficient

dissemination of critical information to students, faculty and staff of the Drexel University community. DrexelALERT allows the Department of Public Safety to send alerts through text messaging, phone, and e-mail to numerous devices, such as mobile phones, Drexel-owned landline phones, and e-mail accessible devices. Students are strongly advised to sign up for this service via DrexelOne. For more information see [Drexel Alert](#).

Drexel Guardian

Through a downloadable application called Drexel Guardian, Drexel's Public Safety Communications Center can communicate with you and immediately access important information about you (including your location) through your Android or Apple device when you allow it to do so. This app is particularly helpful when you are alone or in an unfamiliar place. More information about this app can be found at: [Drexel Guardian](#)

E-mail and Professional Communication

All students will be assigned a Drexel University e-mail account before orientation. Frequently, class time changes, room changes, class meetings, class announcements and the like are delivered through group e-mails to students' Drexel accounts only. It is suggested that students *not* forward their Drexel e-mail, as often group e-mails are not recognized by other mail servers. *Students are required to check their Drexel e-mail accounts on a daily basis and will be held responsible for information distributed in this manner.*

The main avenue of daily communication between students and faculty is e-mail. In addition, e-mail will be used with other university personnel, instructors at clinical sites, and others. How you communicate is a reflection of yourself and of our department and sets the tone of how you will be perceived by your colleagues. Following are some e-mail guidelines for you to follow.

- Keep e-mails short, concise and clear.
- Use an appropriate salutation (e.g., "Dr. Jones," "Dear Dr. Smith," "Hi, Linda," "Marge").
- Include a clearly worded subject line.
- Proofread all e-mail communication for spelling and grammar as you would a paper and use paragraphs and correct punctuation.
- Type your full name in closing all professional and formal e-mails. This may not be necessary when engaging in an ongoing e-mail conversation with a faculty member who obviously knows you.
- **Include your particular class (i.e. Class of 2028) and your University ID in your signature line so that faculty and staff can easily recognize you.**
- Be respectful. Treat all professional e-mails as you would a face-to-face conversation in terms of respect and demeanor.
- Be judicious about forwarding the e-mails of others without their permission or unless it is expected. When in doubt, ask for permission first.
- Check your e-mail often! Professors and other university personnel will communicate with you by e-mail, so be sure to check and respond to them in a timely manner. Also be sure to delete e-mails that are no longer needed so that your mailbox is able to receive new incoming mail.
- Use your Drexel e-mail address, and not your personal e-mail address, for all communication at Drexel. We will not use your personal e-mail address.
- Be careful about communicating about sensitive or personal issues on email.
- You cannot be completely assured of confidentiality, so discussion by telephone or in person may be a more appropriate method of communication for these matters.
- Do not use unencrypted e-mail for any confidential patient information even if you are communicating directly with a patient.

Here are several useful websites for more information:

<http://drexel.edu/scdc/professional-pointers/job-search/communication/>
https://owl.purdue.edu/owl/general_writing/academic_writing/email_etiquette.html

Employer-Assisted Tuition Deferred Payment Plan

Drexel has an Employer-Assisted Tuition Deferred Payment Plan which allows extension of the tuition payment deadline until the end of the second week of classes of the *following* term, for students whose employers reimburse them for tuition. An application form must be submitted, and a fee paid *every term* on which a student wishes to be on the plan. Further information and the form are available at [Drexel Employer Reimbursement Plan](#).

Facilities

The Department of Orthotics & Prosthetics faculty and administrative offices are located on the West Wing 3rd floor of Elkins Park campus. The orthotics and prosthetics teaching lab is located on the 4th floor West Wing, Elkins Park campus. Students have access during working hours to the O&P classroom [not lab unless faculty are present]. **Student ID Cards (Dragon Cards) should be carried at all times and must be presented to security to gain entrance to any Drexel building.** To learn more about your student ID, you can visit the Dragon Card webpage at [Dragon Card](#).

Federal Educational Rights and Privacy Act (FERPA)

The Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the privacy of student education records. For detailed information about FERPA, please view the [Family Educational Rights and Privacy Act \(FERPA\) Policy](#) on the Academic Policies website. Students who wish to provide ongoing access to their education records to an individual, such as a parent or family member, must first complete a FERPA waiver via [DrexelOne](#). This will allow the individual named by the student to have complete or limited access to the student's education record until such permission is revoked by the student.

1. Log in to [DrexelOne](#).
2. Select the Students tab.
3. Choose More Bannerweb Student Records from the Student Records channel.
4. Select FERPA Authorizations to maintain your list of authorized individuals.

HIPAA and HITECH Act Compliance

No student may have any information about patients, clients or research participants on any computer or other electronic device that is not encrypted by Drexel University approved, special encryption software unless the information is ***completely de-identified***. This includes patient, client and participant data used for classes, clinical experiences, final projects, presentations, manuscripts, dissertations, etc.

To be considered ***completely de-identified***,

- ***none*** of the following 18 types of identifiers may be contained in the information,
- ***and*** no one who has *actual knowledge* that could be used alone, or in conjunction with other information, to identify an individual may access the information unless that individual is approved to do so.

The 18 identifiers are:

1. Names
2. All geographic subdivisions smaller than a State, including:
 - Street address
 - City
 - County
 - Precinct
 - Zip codes and their equivalent geocodes, except for the initial 3 digits of a zip code if, according to the current publicly-available data from the Bureau of the Census: (1) the geographic unit formed by

combining all zip codes with the same 3 initial digits contains more than 20,000 people, and (2) the initial 3 digits of a zip code for all such geographic units containing 20,000 or fewer people is changed to 000.

3. Telephone numbers
4. Fax numbers
5. E-mail addresses
6. Social Security numbers
7. Medical record numbers
8. Health plan beneficiary numbers
9. Account numbers
10. All elements of dates (except year) for dates related to an individual, including:
 - Birth date
 - Admission date
 - Discharge date
 - Date of death
 - All ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older
11. Certificate /license numbers
12. Vehicle identifiers and serial numbers, including license plate numbers
13. Device identifiers and serial numbers
14. Web Universal Resource Locators (URLs)
15. Internet Protocol (IP) addresses
16. Biometric identifiers, including finger and voice prints
17. Full face photographic images and any comparable images
18. Any other unique identifying numbers, characteristics, or codes

In addition, posting information about patients, clients or research participants on list serves, LMS, YouTube, or other electronic media must not contain ***any*** of the above identifiers. Likewise, e-mail may not contain any of the above identifiers unless the e-mail is encrypted using Drexel University-approved software.

If a breach of this policy occurs, you must report the breach to the Department Chair within 24 hours of discovering the breach.

Grade Appeal Process

Students or an authorized individual (must have FERPA documentation on file) may file a formal appeal if they feel that their grade on an assignment, test, or their final grade does not accurately reflect their academic performance in accordance with the syllabus/grade rubric. A grade appeal is an official process and can be filed, if the student can provide justification for one or more following reasons:

- There was an arithmetic error made in calculating the grade on an individual assessment or final grade; or
- The student can prove that an assessment or final grade was given in an arbitrary or capricious manner (i.e., deviation from the policies stated on the course syllabus); or
- The student can prove that the faculty member failed to invoke the use of a predetermined and communicated rubric/scoring system or failed to communicate expectations for an assignment(s).

Please note that this policy only applies to courses offered by the College of Nursing and Health Professions. If you are appealing a grade from a course in a different college/school, please refer to that school's appeal policy.

Appeal Process

The formal appeal* must be completed by the end of the subsequent term in which the original assignment or final grade was received.

1. Grades may be appealed by submitting a formal appeal with supporting documentation to the course instructor for review by completing the CNHP Grade Appeal Form. The student will receive confirmation via email within two (2) business days.
2. If the student is not satisfied with the decision of the instructor, the student will have an opportunity to appeal to the department leadership of the course instructor.
3. If the student is not satisfied with the decision of the department leadership, the student will have an opportunity to appeal to the college's senior leadership or designee.

Please visit [Drexel University's Graduate Grade Appeal Policy](#) for more information.

For questions or issues with the Grade Appeal Form please contact CNHPStudentAppeals@drexel.edu

** A formal appeal is a written request for a review of the student grievance including rationale and supporting materials to support your appeal request.*

Laboratory Safety Guidelines

The Department of Orthotics & Prosthetics understands the need for students to have time and resources available to them to practice skills taught in lecture and laboratory sessions. Therefore, we make university lab space, various pieces of equipment and other supplies available to students during posted hours. This is done with the understanding that students must abide by the following:

1. Only students and faculty may use the lab space during posted hours. Students are not allowed in the labs when closed unless accompanied by a member of the department faculty;
2. Students must treat each other with respect while practicing in the university lab space;
3. All equipment must be used and any intervention (exercise or manual technique) must be performed in a safe and appropriate manner. Safe and appropriate use of a piece of equipment or performance of a particular intervention will be explained and/or demonstrated to students in regular lecture and/or lab prior to use in outside class time. Course faculty will instruct students in indications and contraindications, rationale for use, and proper application of the particular intervention;
4. Students are responsible for informing their practice partners of any pre-existing conditions or precautions that may preclude the use of a particular piece of equipment or application of a particular intervention;
5. Students shall not practice any intervention or technique on a student whose medical history is not known to them;
6. Students shall not practice or instruct other students in techniques or interventions that were specifically learned while on clinical rotation;
7. Students shall not engage in any formal "treatment" of anyone in the university labs;
8. The equipment in the lab and the lab space itself must be treated properly. This includes using equipment for its intended purpose, returning all materials to their proper place after use and disposing of any trash;
9. Students must wear closed shoes and pants at all times in the laboratory space;

Improper application of an intervention or technique or the improper use of laboratory equipment may result in serious injury, such as muscle strains, ligament tears, fractures, paralysis or death, to the student or practice partner. Each student assumes all of the risks associated with the use of a particular piece of equipment or the application of a particular intervention or technique.

If it is observed that students are not using the university resources in an appropriate manner, all practice hours in university facilities may be revoked.

If an emergency does occur while students are in the labs, students are reminded to call 911 and campus security immediately. First aid kits are available in the lab. AEDs are located throughout West Wing of the Elkins Park Campus. Additionally, any injuries, damage to laboratory equipment or other incidents should be reported to the course lead and program director within 24 hours.

Social Media

The College of Nursing and Health Professions recognizes that social media use is prevalent in today's society. Websites and applications such as Facebook, Twitter, Instagram, and others are commonly utilized by the public. As a student in a health professions program and as a health care professional, individuals should be aware that posting certain information and/or images on social media sites may be viewed as unethical, unprofessional, and in some cases, illegal. Students are referred to and expected to comply with the Drexel University policies on privacy, professionalism, discrimination, and harassment.

Some social media guidelines to consider...

- ☐ Students should monitor their online presence as well as online site policies and privacy settings. Try to maintain up-to-date use of privacy settings to limit the unknown or unwanted access to your profile or application. Remember that those with your permission to view your information may have the ability to share it without your consent. Therefore, all postings (information, photos, and videos) should be considered public and potentially visible to anyone at any time.
- ☐ Posting information and images online should be considered permanent. Deleting a post does not ensure removal. Data can be recalled and retrieved as it is often archived online, or others may have recorded your postings prior to removal.
- ☐ Students should represent themselves in a mature, professional, and responsible manner. Uncivil or disrespectful language used in communications is considered unprofessional and therefore not acceptable. Remember, potential employers, licensing boards and healthcare facilities where you may seek employment and other individuals may screen social networking sites.
- ☐ Social media use can be a helpful tool, but users must realize that statements made online are considered to represent the views of an individual as if spoken verbally or written. Saying something electronically carries no less weight than communicating it in any other way. It is considered unprofessional to criticize classmates, peers, preceptors or university faculty/staff. Damaging the reputation of another is also considered to be unprofessional behavior and could result in personal liability to you if found to be defamatory in a court of law. The nature of online communication makes such comments more lasting than you may initially believe. Your actions online are subject to legal ramifications. *Please carefully consider your words and ALL possible consequences before writing/ posting/sharing.*

Drexel University and the College of Nursing and Health Professions reserves the right to discipline students using social media in a manner which violates applicable Drexel University policies, rules and regulations. Examples of behavior which could result in disciplinary sanctions include, but are not limited to the following:

- ☐ **Posting patient information.** Students may not post or otherwise disclose patient information in violation of a federal or state law or applicable professional ethics and healthcare facility policies. This includes cases or pictures. Removal of an individual's name does not constitute proper "de-identification" of protected health information. Furthermore, inclusion of data such as age, gender, race, diagnosis, date or location of evaluation may still allow the reader to recognize the identity of a specific individual. You may not take or post photos of patients or health care environments/ rotation/ preceptorship sites. Photos may contain background identifying features of which you may not be aware.
- ☐ **Posting program curriculum information.** You should not share information about program curriculum or exams in any way that violates Drexel University or program academic misconduct policies.
- ☐ **Misrepresentation.** In posting information on social networking sites, students may not present or represent themselves as official representatives or spokespersons for Drexel University or MSOP Program.
- ☐ **Harassing or discriminatory postings.** Your use of social media may not violate any of Drexel University's Equality and Non-Discrimination Policies.
- ☐ This policy prohibits discrimination or harassment on the basis of race, color, national origin, religion, sex, sexual orientation, disability age, gender identification or expression or other legally prohibited characteristic.

- ❑ **Violating the Acceptable Use Policy.** All social media activities involving use of Drexel's computer and network resources, including all electronic communication systems and equipment, must comply with the Drexel University Acceptable Use Policy.
- ❑ **Inappropriate relationships.** It is considered unethical to establish non-professional relationships with patients including inviting them to social network groups or accepting invitations from them. Additionally, requests from those who supervise or teach you to engage in activities outside of class sites are considered inappropriate. Such requests should be reported to head of the Chair of the Department or College Dean. Other forms of inappropriate behavior include “cyberstalking” and “sexting”.
- ❑ **Copyright/trademark violations.** Seek the proper permission before posting photos, videos, or other media that you do not own.
- ❑ **Giving medical advice.** Students are not licensed healthcare providers and should not offer medical advice as a medical professional. You should in no way diagnose, manage, or medically advise any other individual on social media sites.

Student Complaint/Grievances Process

In accordance with the provost's policy, the College of Nursing & Health Professions (CNHP) believes that students should be made aware of how to file a complaint for perceived violations of rules, policies, civility or established practice should that become necessary.

If you have been approved for reasonable accommodations, but feel those accommodations have not been provided appropriately, you should immediately contact the Office of Disability Resources (ODR) at disability@drexel.edu. Please visit the Drexel University's Reasonable Accommodation of Individuals with Disabilities Policy (OED-2) web page for more information.

If you feel that you have been treated differently, harassed, or retaliated against on the basis of your race, color, national origin, religion, sex, sexual orientation, disability, age, status as a veteran or special disabled veteran, gender identity and expression, genetic information, and/or other characteristic prohibited by law, you should contact the Office for Institutional Equity and Inclusive Culture at disability@drexel.edu. For the full policy, please visit the [Drexel University's Discrimination Harassment and Bias Incident Prevention Policy \(EIC-1\)](#) web page.

If you have a grievance around, teaching, instruction, clinical/practicum, academic advising, a college/department policy or another college concern, the procedure is to seek an informal or prescribed solution:

1. First, arrange a meeting with the faculty, preceptor, administrator, staff or other person involved to resolve the issue in an appropriate, equitable and respectful manner.
2. If the issue is not resolved in a mutually satisfactory manner, the meeting may be followed up with the student, faculty, administrator or staff's direct supervisor by emailing cnhpstudentappeals@drexel.edu. Students will receive a response within 7 business days.

If you have an issue or complaint about the Master of Science in Orthotics & Prosthetics program that you feel should be reported to the National Commission on Orthotic and Prosthetic Education (NCOPE), you can do so by following the directions here: [Complaints | Commission on Accreditation of Allied Health Education Programs](#). Typically, NCOPE will entertain complaints when a program is not in compliance with one or more of CAAHEP's Standards and Required Elements or has violated any of CAAHEP's expectations related to academic integrity

Student Awards

The department faculty nominate graduating students and current students for various awards to recognize them for their achievements. College and program awards are recognized by the University and as such are inscribed in the commencement booklet. Descriptions of the awards are below:

National Awards

Alpha Eta

Alpha Eta is the National Allied Health Professions Honor Society, which promotes scholarship and recognizes high attainment in curricula for the health professions. Twenty percent of the MSOP program's graduating class can be nominated each year for induction into Alpha Eta based on their outstanding academic ability (minimum GPA of 3.80).

The O&P Foundation

The O&P Foundation was formed in 2022 when the Orthotic and Prosthetic Education and Research Foundation (OPERF) merged with the Center for Orthotic and Prosthetic Learning and Outcomes/Evidence-Based Practice (COPL). The OPERF and COPL Boards of Directors envisioned that a unified foundation would consolidate resources, reduce redundancies, increase funding opportunities, and advance the field of orthotics and prosthetics.

University Awards

See the Graduate College for descriptions of the Graduate Student Excellence Awards that are awarded during and at the completion of the program at: [Graduate Student Excellence Awards](#)

College Awards

Dean's Award

This is awarded to a graduating student in the College of Nursing and Health Professions who has distinguished himself/herself by providing outstanding service to the college.

Achievement Award

This is awarded to a graduating student in the College of Nursing and Health Professions who has demonstrated perseverance and ability in the face of significant challenge while attaining his/her academic goals.

Community Service Award

This is awarded to a graduating student in the College of Nursing and Health Professions who is actively involved in community service.

Clinical Service Award

To a graduating student in the College of Nursing and Health Professions who has demonstrated exemplary work through interdisciplinary and clinically relevant work aiming to treat underserved communities at his/her clinical placement.

Social Justice Research Award

To a graduating student in the College of Nursing and Health Professions whose thesis or research is innovative in improving health and reducing health disparities of communities.

Department Awards

Academic Distinction

This award is given by the Department of Physical Therapy & Rehabilitation Sciences to DPT students who have demonstrated consistent excellence in academic performance with an overall cumulative average of 3.75 or above. Students receive a certificate to signify this achievement.

Dragon Service Award

This award honors a graduating student who has dedicated their time and energy to improve and impact the department, college, university, community, or PT professional association through engaging in physical therapy related professional service during their time at Drexel.

Clinical Education Award

This award was established in memory of Stanley E. Wendkos, a dedicated clinical administrator, teacher and mentor to many of today's academicians who started their professional careers in clinical practice under his guidance. The award recognizes a graduating DPT student who has demonstrated outstanding clinical performance during the clinical education phase of the curriculum.

Leadership Award

This award recognizes a graduating student who exemplifies leadership and/or innovation in their professional endeavors, consistent with the DPT program's mission, in order to inspire or enact change in the department, College, University, or professional association.

Heath Equity and Social Impact Award

This award celebrates a graduating student or students who have made positive contributions that promote social justice, equal access, cultural awareness, integration, and understanding and/or awareness and who have demonstrated excellence in Community and Belonging programming or initiatives in the DPT program, College, University, or professional community.

Research Excellence Award

This award recognizes a graduating student who has shown exemplary commitment to critical inquiry through the participation in scholarly research during the DPT program.

Outstanding Excellence in Scholarship Award

Demonstrated excellence and achievement in scholarship and has promoted orthotics & prosthetics through scholarly activities.

Superior Professionalism Award

Demonstrated superior professional behavior and modelling of high standards of conduct valued within the profession.

Clinical Excellence Award

Demonstrated exceptional performance during their fieldwork rotations.

Service to the Community Award

Demonstrated willingness to volunteer, serve and give of their time and talents for the benefit of others.

Quiet Confidence Award

Demonstrated steady growth and calm assurance have led to noticeable progress, both academically and personally.

Student Life

The Drexel University Office of Student Life provides services, activities, and resources to enhance students' intellectual, personal, and social development. A listing and description of all their services can be found at: [Drexel Student Life](#).

Students with Disabilities Accommodations

Students who have any sort of disability and who believe that they may need academic adjustments in any course are encouraged to contact the Office of Disability Resources. This includes a temporary disability (i.e. a student who has had surgery, a recent injury etc.). Students with disabilities requesting accommodation and services at Drexel University need to present a current accommodation verification letter (AVL) to faculty before accommodations can be made. AVL's are issued by the Office of Disability Resources (ODR). For additional information, contact ODR at [Office of Disability Resources](#). The office address is: 3201 Arch St., Street, Suite 210, Philadelphia, PA 19104, 215.895.1401 (V), or 215.895.2299 (TTY)

Transcripts

Students may see their unofficial transcripts on [DrexelOne](#). They may also request official transcripts through DrexelOne. For complete instructions, see [Academic Transcripts](#)

Weather Closing Information

Extremely inclement weather may require the closing of the University. Alerts are sent out to the university community via text when this occurs. Students can also check the University's website for information.

Departmental Information

Faculty Contact List

Contact information and a listing of clinical and/or research interests for faculty in the Department of Orthotics and Prosthetics can be found at: <https://www.salus.edu/colleges/nursing-health-professions/orthotics-and-prosthetics-program/index.html>

Faculty & Staff	Location	Role
Bressler, Allison	W326B	Clinical Educator
Duncan, J. Chad	W326A	Chair/Program Director; Professor
Harris, Jacalyn	W347	Assistant Professor
Jovin, Erstha	Next to W330	Administrative Staff Associate
Muthard, Virginia	W349	Assistant Professor
Quinlan, Julie	W348	Associate Program Director, Assistant Professor

Master in Science Orthotics & Prosthetics Program Information

Program Mission

The mission of the Master of Science in Orthotics and Prosthetics Program is:

The Orthotics & Prosthetics program is committed to creating an environment of belonging, well-being and respect while challenging students of orthotics and prosthetics to seek excellence through interprofessional education and evidence-based research and practice.

VISION

Developing and nurturing orthotic-prosthetic student leaders who are: inquisitive, welcoming, engaging and competent problem-solvers who have a passion for person-centered care while leading change in the profession of orthotics and prosthetics.

Curriculum Plan

Built upon cultural humility and belonging, the curriculum of the O&P Program is constructed from a holistic perspective and a commitment to developing future generations of O&P professionals. This perspective will allow students to be self-reflective, lifelong learners who understand power imbalances and personal accountability while learning and growing in a respectful atmosphere.

The O&P program consists of two developmental phases. The first phase examines several aspects of what it takes to be an orthotist and prosthetist, focusing on building the foundational knowledge, technical skills, and clinical abilities of an orthotist and prosthetist.

The second developmental phase of the O&P curriculum focuses on an integrated 18-month clinical residency. Students are immersed in O&P clinical practice and research. Upon successful completion of the integrated clinical residency and coursework, graduates will be eligible to sit for the National ABC Board Exams in both Orthotic and Prosthetic Disciplines.

Within the context of the MSOP program, this philosophy gives rise to the following educational goals:

GOALS

At the successful completion of the MSOP Program, students will effectively demonstrate competence in the following eleven content areas as directed by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) and the National Commission on Orthotic and Prosthetic Education (NCOPE):

1. Exemplify the role of the orthotist/prosthetist in providing ethical, patient-centered care by applying accepted professional responsibilities in clinical practice experiences.
2. Practice safety of self and others, and adhere to safety procedures throughout the provision of orthotic/prosthetic services.
3. Demonstrate appropriate insight into clinical practice, clinical operations and practice management.
4. Demonstrate an awareness of the humanity and dignity of all patients and related individuals within a diverse and multicultural society.
5. Comprehend and demonstrate knowledge of the collaborative role of the orthotist/prosthetist as a member of the interdisciplinary rehabilitation team in providing patient-centered care.

6. Demonstrate the ability to employ evidence-based practice with an understanding of the research processes and how to use research findings to appropriately influence clinical practice.
7. Demonstrate the ability to integrate knowledge of the fundamental concepts of human function (physical, cognitive, social, psychological) with the practice framework of assessment, formulation, implementation and follow-up of a comprehensive orthotic/prosthetic treatment plan.
8. Demonstrate the ability to make clinical decisions designed to meet patient needs and expectations, and measure effectiveness of O&P intervention by utilizing (or administering) appropriate outcome measures.
9. Demonstrate the ability to provide effective education to patients, their support networks, healthcare professionals and the public at large.
10. Document pertinent information that supports the provision of effective communication and meets the requirements of legal, business and financial parameters for patient care.
11. Demonstrate proficiency in fundamental technical procedures that support orthotic/prosthetic practice.

The tables on the next two pages provide an overview of the curriculum and sequences by Semester.



Master of Science in Orthotics & Prosthetics Curriculum

<u>Semester 1, Fall Year 1</u>		<u>Semester 2, Spring Year 1</u>	
OPM 5000 Medical Humanities	2	OPM 5003 Introduction to Independent Study	2
OPM 5004 Functional Anatomy & Kinesiology	3	OPM 5240 Professional Development	2
OPM 5001 Introduction O&P Principles & Techniques	3	*OPM 6000 Lower Limb Prosthetics I	7
OPM 5100 Biomechanics & Gait	3	*OPM 6010 Lower Limb Orthotics	7
OPM 5007 Introduction to Pathology	2		
OPM 5140 Case Report	1		
Total	14	Total	18
<u>Semester 3, Summer Year 1</u>		<u>Semester 4, Fall Year 2</u>	
OPM 5220 Seminar Billing in P&O	2	OPM 5350 Advanced O&P Practices	2
OPM 5310 Case Reports II	1	*OPM 5130 Upper Limb Prosthetics	5
*OPM 5110 Orthotic Management of Head & Spine	5	*OPM 5020 Upper Limb Orthotics	4
OPM 5200 Medical Humanities II	2	OPM 5360 Clinical Residency Seminar	2
OPM 5230 Pediatric Populations	2	OPM [Independent Study]	2
OPM [Independent Study]	2	-5303 Leadership & Management	
-5203 Leadership & Management		-5304 Digital Work Space	
-5204 Digital Work Space		-5305 Health Disparities	
-5205 Health Disparities			
Total	14	Total	15
		Professional Curriculum	
		Total Hours: 61	



Expected MSOP Student Goals upon completion of the Program:

Program Goals and Outcomes

Goals	Expected Outcomes
<u>Upon completion of the program, STUDENTS will:</u> <ul style="list-style-type: none">• Demonstrate discipline-specific clinical competence in all clinical courses and integrated residency	<ul style="list-style-type: none">• 90% minimum requirement; Summative Practical Assessments (clinical skills, patient evaluation, intervention design), Integrated residency evaluations
<ul style="list-style-type: none">• Exhibit skills in effective communication and collaboration and integrated residency	<ul style="list-style-type: none">• 90% minimum requirement; Group projects (including clinical work with patient models), Presentations- LL Orthotics, Pediatrics, LL Prosthetics, Case Report, Independent Study, Integrated residency evaluations
<ul style="list-style-type: none">• Conduct themselves in an ethical, professional, and culturally competent manner	<ul style="list-style-type: none">• 90% minimum requirement; SIM labs and patient models, residency
<ul style="list-style-type: none">• Demonstrate professional responsibility	<ul style="list-style-type: none">• 100% of students become, and remaining during their academic careers, student members of the AAOP• 100% of students attend at least 1 local, regional, or national professional/business meeting

Goals	Expected Outcomes
<p>Upon completion of the program, GRADUATES will:</p> <ul style="list-style-type: none"> Demonstrate competence as an entry-level practitioner of Orthotics & Prosthetics 	<ul style="list-style-type: none"> Graduates Pass the ABC Written with a first-time pass rate greater than 80% and an ultimate pass rate of 100%
<ul style="list-style-type: none"> Demonstrate competence as a graduate entering the profession 	<p>100% of students upon graduation will effectively demonstrate competence in the following content areas:</p> <ol style="list-style-type: none"> Exemplify the role of the orthotist/prosthetist in providing ethical, patient-centered care by applying accepted professional responsibilities in clinical practice experiences. Practice safety of self and others, and adhere to safety procedures throughout the provision of orthotic/prosthetic services. Demonstrate appropriate insight into clinical practice, clinical operations and practice management. Demonstrate an awareness of the humanity and dignity of all patients and related individuals within a diverse and multicultural society. Comprehend and demonstrate knowledge of the collaborative role of the orthotist/prosthetist as a member of the interdisciplinary rehabilitation team in providing patient-centered care. Demonstrate the ability to employ evidence-based practice with an understanding of the research processes and how to use research findings to appropriately influence clinical practice. Demonstrate the ability to integrate knowledge of the fundamental concepts of human function (physical, cognitive, social, psychological) with the practice framework of assessment, formulation, implementation and follow-up of a comprehensive orthotic/prosthetic treatment plan. Demonstrate the ability to make clinical decisions designed to meet patient needs and expectations, and measure effectiveness of O&P intervention by utilizing (or administering) appropriate outcome measures. Demonstrate the ability to provide effective education to patients, their support

	<p>networks, healthcare professionals and the public at large.</p> <p>10. Document pertinent information that supports the provision of effective communication and meets the requirements of legal, business and financial parameters for patient care.</p> <p>11. Demonstrate proficiency in fundamental technical procedures that support orthotic/prosthetic practice.</p>
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Curricular Threads

The faculty has committed to weave specific objectives and content areas throughout the MSOP curriculum that extend beyond a single course or course sequence. These content areas are called curricular threads. Threads are incorporated into the curriculum in order to reinforce their importance and assure the student's awareness of their implications for O&P practice. While not every course has the potential to incorporate all of the threads, the sum of the courses should reflect our commitment to these threads. The threads that have been chosen in the MSOP curriculum and their operational definitions are:

- **Professional Curriculum and Foundational Content (CAAHEP/NCOPE)**

***Professional Curriculum and Foundational content represents what CAAHEP/NCOPE expects the graduate O&P program to cover to ensure graduates are prepared to enter the profession. [HERE](#)**

- C1.0 Foundational Content Areas
- C2.0 Patient Assessment
- C3.0 Formulation of a Treatment Plan
- C4.0 Implementation of a Treatment Plan
- C5.0 Follow-Up
- C6.0 Practice Management
- C7.0 Professional/ Personal Development
- C8.0 Experience in Patient Care Setting
- C9.0 Orthotic / Prosthetic Clinical Practices
- D.1.0 Research/Capstone

- **Core Professional Responsibility**

Gain basic understanding of the responsibilities as defined by the American Board of Certification Orthotics, Prosthetics, Pedorthotics, core responsibilities in O&P encompass the concept of professionalism and include: [HERE](#) (<https://www.abcop.org/publication/section/the-code-of-professional-responsibility/general-responsibilities>)

- General Responsibilities
- Responsibilities to the Physicians and other Licensed Healthcare Prescribers
- Responsibilities to Patient
- Responsibilities to Colleagues and the Profession
- Application of the Code
- Patient Care by Other Healthcare Professionals

*In the syllabus for each course in the curriculum, the CAAHEP/NCOPE standards contained within the course are indicated in the syllabus and in each week.

Master of Science Orthotics & Prosthetics Program Policies

Academic Integrity

As stated previously, Drexel University is committed to academic integrity. Please see the policy on Academic Honesty and Integrity in the “General Information and University and College Policies” section of this Handbook.

Furthermore, the Department of Orthotics & Prosthetics is interested in promoting a culture of academic integrity. To that end, MSOP students will be required to sign the *Drexel University Orthotics and Prosthetics Academic Integrity Contract* as part of the compliance process. Additionally, students are required to sign an Academic Integrity Contract prior to in-class and on-line assignments, exams and quizzes throughout the curriculum to remind them of the responsibility they have in promulgating an honest academic environment.

Academic Requirements

Students must meet the academic requirements with satisfactory completion of the quarter hours prescribed by the program in compliance with the regulations of the College of Nursing and Health Professions. Students are expected to fulfill the academic requirements in the prescribed number of months of course work. An additional year may be granted for program completion if a leave of absence is necessary and approved by the faculty. No credit toward the academic requirements is granted for work completed elsewhere.

Add/Drop

As this is a professional curriculum, all courses are required courses and may not be dropped.

Advising

Program Philosophy

Faculty advising is a necessary component of the educational progression in the Department of Orthotics and Prosthetics at Drexel University. The faculty is dedicated to assisting students to develop meaningful educational strategies that are compatible with their professional goal of becoming a physical therapist. The intent of faculty advising is to provide ongoing feedback and guidance to assist students achieving their highest potential both academically and professionally. The faculty advising program coincides with the overall mission of Drexel University, the College of Nursing and Health Professions, and the Department.

Objectives for Faculty Advising

1. To support students' understanding of graduate professional education and adult learning.
2. To foster students' development of decision-making skills, core values, and behaviors to enhance professional growth.
3. Facilitate self-reflection of professional growth using the “Professional Behaviors and Core Values” document.
4. To provide a mechanism for students to seek advice and mentorship.
5. To facilitate professional relationships among students and faculty that foster openness and communication.
6. To support students in achieving their academic and professional goals.

Responsibilities of the Faculty Advisor are to:

1. Be knowledgeable about university facilities and programs that can assist students and refer students to appropriate individuals or programs when needed.
2. Be familiar with the curriculum and the policies and procedures of the program, department, college, and university.
3. Clarify policies and procedures of faculty advising with the student.
4. Support advisees who are having academic or professional challenges in the curriculum.
5. Meet with each advisee, at least annually.
6. Be available during the academic year to communicate or meet with students as needed.

7. Maintain appropriate documentation of meetings with advisees.
8. Communicate and coordinate within the department as needed to ensure academic and professional progress, e.g., Course Coordinators, the Student Success Subcommittee, MSOP Program Directors, etc.

Responsibilities of the Student/Advisee are to:

1. To be familiar with the curriculum and the policies and procedures of the program, department, college and university.
2. To meet with their faculty advisor individually, at least annually. The student is responsible for scheduling this meeting and for preparing accordingly for it. Additional meetings are encouraged and may be required to support student success in the program.
3. Communicate proactively with and seek support from their faculty advisor in situations that arise that might impact the student's academic or professional performance.
4. Be an active participant in the development and realization of their academic and professional growth.

Attendance

Consistent attendance reflects professional behavior. It is expected that students will attend all classes. In the event of an absence, students need to notify the Course Coordinator. Students are responsible for all missed course content and assignments. Faculty are not responsible for reviewing missed content with students on an individual basis. Note: Missing key projects associated with NCOPE guidelines is highly ill-advised. If such event happens students may have to withdraw from program and return following year.

Attendance is mandatory for all learning activities such as lectures, observations, meetings, conferences, and internship and externship activities as specified by the course instructor and defined in the syllabus. This applies to face-to-face, synchronous and asynchronous on-line activities.

Poor attendance alone may result in a grade of Failure (F). ALL MSOP courses: Missing three(3) or more classes may result in failure (F) of the course and will need to be retaken when offered next.

A syllabus will be distributed for each course and will describe the course requirements, grading, attendance policies, ethical conduct and disability support services ([ODR](#)).

Each student is responsible for ensuring their own individual access to and use of current technology to meet the attendance requirements of on-line learning.

Attendance for NCOPE Clinical Residency Activities (NCOPE Residency)

Attendance at NCOPE Clinical Residency sites is mandatory.

The hours and days of professional responsibilities are determined by the Site Supervisor and University Supervisor (i.e., Course Instructor or Program Director) consistent with the site placement's calendar.

If illness, supervisor vacations, or other circumstances prevent a student from maintaining his/her schedule, the Program Director should be notified immediately.

The Site Supervisor, in consultation with the University Supervisor and Program Director will determine how and when student absence(s) may be made up.

Excused Absences from Didactic Activities

Class participation is defined in each course syllabus. An absence occurs when a student is unable to meet the minimum criteria for participation set forth in the syllabus.

A student should inform their Program Director and course instructor(s) of family or medical situations which may result in extended class absences. For an anticipated absence, a student is required to submit documentation prior to the absence to the Course Coordinator, who will in turn notify the Program Director. If a student is aware of an anticipated absence, the student should attempt to complete the coursework before the absence.

Any student who is absent from a required course activity must complete and submit an absence-approval request form with required documentation to the instructor of record/coordinator and program Director. These forms may be obtained in person or electronically from O&P LMS page.

For an unanticipated absence (e.g., accident, family death, etc.), a student is required to submit proper documentation within 48 hours following his/her return to educational/programmatic activities to the course instructor who will, in turn, notify the Program Director. Students in such situations should also notify the Dean of Student Affairs of their absence.

Excused absences may include, but are not limited to, the following:

A statement from a physician that at the time of the mandatory activity, the student was under his/her care and too ill to take the examination or to attend the learning activity.

A statement from a physician that a member of the student's immediate family was seriously ill and required the student's presence.

A death in the student's immediate family. The relationship of the deceased to the student and the date of the death must be provided.

Documented failure of normal or auxiliary means of transportation, when appropriate (e.g., direct service activities).

A substantive personal event such as student's wedding.

Childbirth (see maternity and paternity policy of the University).

Educational or professional considerations, e.g., attendance at a professional meeting. The course instructor and Program Director must grant approval. The length of the approved absence will be specified. These requests must be made at least two weeks prior to the desired absence.

The determination of whether an absence not specifically covered above is excused shall be decided by the Dean of Student Affairs.

All work missed during an excused absence must meet the criteria set forth by the course instructor prior to receiving a grade. All work must be completed by the end of the semester; exceptions may be made by the Program Director.

If absences are excessive, a student may be required to take a leave of absence or withdraw from the course and repeat the course at a later time.

Excused Absences from NCOPE Clinical Residency Activities

In addition to the policies outlined in Section II Residency Requirements, residency Term 2.1 Residency term requirements, the subsequent policies apply to excused absences from Internship/Externship activities.

Attendance is mandatory at all Direct Service activities. Part of the professional development expected during study at Drexel University is learning the values that make up a competent professional. Failure to immediately inform the Site and University Supervisors of an absence, and its reason, may indicate lack of sensitivity to this important professional value.

A student must inform the Site Supervisor and the appropriate University Supervisor of any absence immediately.

All work must be completed within a period of time designated by the University Supervisor and Program Director. If making up for excused absences takes the student beyond the semester, the student will receive an Incomplete (I) until the required work is complete (see Section 13.4 – Incomplete). Each student must meet their respective national professional standards and required number of direct service hours.

Unexcused Absences from Didactic and NCOPE Clinical Residency Activities

An unexcused absence is any absence that does not meet the criteria for being an excused absence, as outlined in the above sections. This policy applies to all face-to-face, synchronous and asynchronous on-line, and direct service activities.

A pattern of unexcused absences could also result in dismissal from the University for unprofessional conduct.

A student may be placed on academic warning, probation, or be removed from course activities by the Program Director if the student fails to meet course responsibilities because of consistent lack of attendance/participation in instructional activities. These matters may then be referred to the Dean of the College of Nursing and Health Professions.

Lateness in NCOPE Clinical Didactic and Clinical Residency Activities

Students reporting to a direct service assignment late may be required to provide documentation for an excused absence and should return to the clinical activity for the remainder of the assignment. Absences/missed activities will be recorded as excused or unexcused based. A student may be placed on academic warning, probation, or be removed from clinical residency by the Program Director if the student consistently late to clinical site (consistently late e.g. 2x week for 3 weeks or 4x a week for 1 week).

Clinicals /Clinical Residency Guidelines

In order to be compliant for clinicals / clinical residency, students must complete the clinicals / clinical residency compliance process by the required due date. If the compliance process deadline is not met, the student will be considered non-compliant for clinicals / clinical residency and will not be permitted to progress through the program. Please refer to Drexel Compliance website at [CNHP Compliance](https://cnhpcompliance@drexel.edu) for all specific information. If you have any questions, please email cnhpcompliance@drexel.edu.

All students must meet the compliance requirements to be fully compliant for clinicals / clinical residency

rotations. It is the student's responsibility to update all requirements as necessary. If a student's compliance requirement(s) expire during the term in which they are in clinicals / clinical residency, students will be required to complete and submit the requirement(s) at least 24 hours prior to their clinical day.

Requirements are subject to change as requested by our clinical affiliations.

Students are required to have current comprehensive medical insurance and carry the card with them to each clinical/practicum experience.

BACKGROUND CLEARANCES/SCREENINGS

These screenings are completed yearly:

1. Child Abuse Clearance Check
2. Criminal Background Check
3. FBI Fingerprint Result

In the event of a positive background report, or a change from the last documented child abuse, FBI fingerprint, or state criminal check, the student must contact the Associate Dean of Technology and Compliance to evaluate the impact on attending a clinical/practicum area and their progression in the program. Failure to do so will result in disciplinary action up to and including immediate dismissal from the program without the opportunity to appeal. Students with a positive background report that contains charges that can be expunged should begin the process of expunging their positive record as soon as possible. The University cannot guarantee clinicals / clinical residency placement to any student with a positive background screening result.

IMMUNIZATIONS/HEALTH REQUIREMENTS

Drexel University requires all entering students to complete a number of immunizations and a health assessment before matriculation. Forms and additional information can be found at [CNHP Compliance Forms](#).

SUBSTANCE ABUSE GUIDELINES

1. All students must comply with Drexel University policies on alcohol and illicit drug use. These policies can be found in the student code of conduct found [here](#).
2. All students in any of Drexel University College of Nursing and Health Professions programs that include a clinical/practicum health care component in its curriculum are required to have a standardized drug screen prior to entering the clinical/practicum environment.
3. Students may be randomly tested with or without cause for alcohol and/or drugs while a student is in the program. A positive drug screen of an illegal substance (illegal substance or controlled substance without a prescription) or intoxication from alcohol will result in dismissal from the student's program of study.

CPR CERTIFICATION

Students must have current CPR for infant, child and adult throughout the curriculum. The acceptable CPR certification is the **Basic Life Support (BLS) Healthcare Professional certification through the American Heart Association**.

Students are not permitted to attend clinical/practicum experiences without proof of current CPR certification on file. Some programs require additional levels of certification – see Program Specific Requirements on the CNHP Compliance website: [CNHP Compliance Forms](#).

ADDITIONAL REQUIREMENTS

Clinical/residency sites may have additional requirements that will need to be completed. Please consult with the clinical/residency faculty member or preceptor for any additional requirements.

EXPOSURE GUIDELINES

These guidelines are to be followed when a student has been exposed to an occupational hazard in the clinical/practicum setting.

1. A significant exposure is defined as:
 - A needle stick or cut caused by a needle or sharp that was actually or potentially contaminated with blood or body fluids;
 - A mucous membrane (i.e., splash to the eye or mouth) exposure to blood or body fluids; or
 - A cutaneous exposure involving large amounts of blood or prolonged contact with blood - especially when the exposed skin was chapped/abraded or affected with dermatitis.
2. Once the student incurs an exposure:
 - The student should immediately notify the site supervisor and his/her Clinical/Residency Faculty the incident.
 - The student and instructor should follow the healthcare agency's "Blood borne Pathogen Exposure Control Guidelines" (this includes washing the area of exposure, informing patient, obtaining consents for blood draw of the source patient, etc.).
 - Report immediately to the facility's Occupational Health Department, if opened, or Emergency Department, if not, for evaluation of exposure. The goal is to have prompt evaluation in the event that you are started on HIV post-exposure prophylaxis.
 - The student must present his/her health insurance card for applicable billing charges.
 - All follow-up care should occur with the student's primary care provider (PCP). It is recommended that the student request a copy of the initial treatment plan and source point results to share with the student's primary care provider (PCP).
3. An incident report must be completed and submitted per clinical/residency site guidelines. The Clinical/Residency Instructor will submit a copy of the incident report to the Associate Dean of Technology and Compliance.

COMMUNICABLE DISEASE GUIDELINES

1. Faculty and students must provide services with respect for human dignity and the uniqueness of the client unrestricted by considerations of social or economic status, personal attributes or the nature of health problems.
2. Students with a communicable disease may not pose a health risk to other students in an academic setting; however, the CDC guidelines must be followed in the clinical/practicum setting. Students and faculty must follow the rules of confidentiality related to communicable diseases.
3. *NOTE:* Due to possible exposure to infectious diseases in the clinical/residency areas, it is important for the student to notify the course chair of any chronic illnesses or if health status has changed recently (i.e. pregnancy) that may require further consideration when making clinical/practicum assignments.
4. If an accidental exposure occurs, faculty and students should follow the Clinical/Residency Exposure guidelines.
5. An incident report should be completed and submitted per clinical/practicum site guidelines. The student and clinical/practicum instructor should submit documentation of the injury or illness to the course chair.

MEDICAL CLEARANCE TO ATTEND CLINICAL/PRACTICUM

1. Students who are ill, hospitalized, or incapacitated in any way that affects their ability to safely and satisfactorily perform their duties in a clinical/residency setting must provide official medical clearance which states their ability to return to clinical/residency and site supervisor **without restrictions. A hard copy of the medical clearance must be submitted** to the Program Director.
2. Any student seeking accommodations for a documented disability must contact the Office of

Equality and Disability Resources (OED at <http://drexel.edu/oed/disabilityResources/overview/>, 101 N. 33rd St., Street, 3rd Floor, Philadelphia, PA 19104, 215.895.1401 (V), or 215.895.2299 (TTY), disability@drexel.edu.

3. Students taking prescribed medications should be aware of the effects of these medications on alertness, judgment, and the ability to meet all technical standards. Students should not attend clinical/residency if there is impairment of ability to safely provide care to assigned patients. This **medical** clearance needs to be made prior to returning to the clinical/residency site.

PREGNANCY

Exposure to certain pathogens, toxic chemicals, drugs, radiation, machinery, and physical activity during clinical/residency rotations may endanger a pregnant student or her baby's health.

If a student is pregnant, or becomes pregnant anytime during the program, she must notify the Program Chair, the clinical/residency instructor and course coordinator. Patient assignments may be adjusted during the clinical/residency rotation to minimize risks to the pregnant student and her baby. A student that is pregnant or becomes pregnant during the Program is advised to consult with her health care provider about any precautions or limitations that are appropriate to take. Neither Drexel University nor its affiliating clinical agencies assume responsibility for any harm that might occur to a fetus or a pregnant student.

The pregnant student must meet all student curriculum requirements and responsibilities. Any applicable policies at the clinical/practicum site must also be followed. The student should immediately notify her clinical/practicum instructor or preceptor if the student at any time believes she is unable to perform her clinical/practicum responsibilities in which case the pregnant student may apply for a leave of absence from the program.

MOBILE DEVICE GUIDELINES

Students must utilize a password protected mobile device to ensure that personal information is not accessible in the event that the device is lost or stolen. No identifiable patient information may be placed on the mobile device.

Safe Harbor method for De-identification:

The following identifiers of the individual or of relatives, employers, or household members of the individual, are removed:	
(A) Names	
(B) All geographic subdivisions smaller than a state, including street address, city, county, precinct, ZIP code, and their equivalent geocodes, except for the initial three digits of the ZIP code if, according to the current publicly available data from the Bureau of the Census: (1) The geographic unit formed by combining all ZIP codes with the same three initial digits contains more than 20,000 people; and (2) The initial three digits of a ZIP code for all such geographic units containing 20,000 or fewer people is changed to 000	
(C) All elements of dates (except year) for dates that are directly related to an individual, including birth date, admission date, discharge date, death date, and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older	
(D) Telephone numbers	(L) Vehicle identifiers and serial numbers, including license plate numbers
(E) Fax numbers	(M) Device identifiers and serial numbers
(F) Email addresses	(N) Web Universal Resource Locators (URLs)
(G) Social security numbers	(O) Internet Protocol (IP) addresses
(H) Medical record numbers	(P) Biometric identifiers, including finger and voice prints

(I) Health plan beneficiary numbers	(Q) Full-face photographs and any comparable images
(J) Account numbers	(R) Any other unique identifying number, characteristic, or code, except as permitted by paragraph (c) of this section [Paragraph (c) is presented below in the section “Re-identification”]; and
(K) Certificate/license numbers	
(ii) The covered entity does not have actual knowledge that the information could be used alone or in combination with other information to identify an individual who is a subject of the information.	

<http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveridentities/De-identification/guidance.html>

1. No texting while on the clinical unit.
2. No photos may be taken while in clinical learning site.
3. Accessing the Internet is only permitted to obtain information related to clinical for the purpose of supporting clinical learning and patient teaching.
4. Faculty has the authority to examine the student’s mobile device and the programs being utilized in the clinical area.
5. As with all clinical equipment, the mobile device may act as a means to transfer germs. Please keep your device clean.
6. If the student has a mobile device that is also a phone, phones must be on vibrate or silent mode. No personal calls should be made or received while in clinical on the unit. Exceptions can be made with faculty approval in extreme extenuating circumstances.

If your program issues electronic devices, please be aware that you are required to read and complete the Portable Electronic Device and Data Protection Procedure paperwork. This document is located on LMS where your Student Handbook Information is located.

Behavioral Expectations in Lab

All students and instructors must provide appropriate draping, touching and privacy to one another and ensure a safe

environment during all lab activities. Students will sign a document which includes agreement to do so and consent to be “treated” by other students and instructors. A copy of the *Drexel University Rehabilitation Sciences Behavioral Expectations in Lab* document can be found in the compliance materials.

Center for Interdisciplinary Clinical Practice and Simulation

The College of Nursing and Health Professions MSOP program faculty offers simulation experiences for students within the Elkins Park 4th Floor Simulation Lab and at City Campus in the Center for Interdisciplinary Clinical Practice and Simulation and other learning labs. Simulation experiences include task trainers, standardized patient, human patient simulators (computerized manikins), as well as hybrid experiences (a blending of two or more simulation experiences). Many of these experiences are recorded (video and audio) and assist the student(s) and faculty with mentorship and debriefing. Confidentiality is essential to the learning process with simulation. Students are asked not to discuss events of simulation(s) or debriefing(s) with other students. As a leader in simulation education, the College of Nursing & Health Professions participate with members of outside institutions in educating healthcare professionals, academics, and third-party vendors about the process of utilization of simulation in student learning as well as administrative and technical aspects. Students are not identified, nor are individual performances shared with any outside professional.

Confidentiality

Information regarding students who are in academic and/or disciplinary trouble with the program and/or university is considered confidential and is treated as such. The student's advisor and the Program Director for the specific program in which the student is enrolled will be notified of the student's academic and/or disciplinary status and any correctional steps that have been taken. Other faculty and/or staff in the program and/or university will be notified as deemed necessary.

During the clinical component of the MSOP program it may be necessary for the University and clinical site to exchange information about a student. Students are protected by the Family Educational Rights and Privacy Act and must give the University permission to share their records for the purpose of furthering their education. Students will sign the *Drexel University College of Nursing and Health Professions, Authorization to Disclose Information* at MSOP orientation, which will be kept in their file.

Dress Regulations

There is no prescribed uniform for the MSOP laboratory courses. Depending on the lab skills to be practiced and/or evaluated, students will need to be able to expose relevant body parts. Gym shorts or T-shirts are usually necessary and will be identified by course instructor. Female students may need to wear a halter-top, sports bra, or bathing suit top underneath their t-shirts. Professional dress is required for clinic visits, clinical education experiences and SPL. Students should also be aware of when guest speakers will be present and dress appropriately. Flat-heeled shoes or sneakers are recommended for lab and clinical settings. Students should avoid wearing open-toed and/or high heel shoes. Students are encouraged to wear their issued nametags or student identification badges during the lab and clinic visits. Course instructors will review any special clothing requirements for their laboratory sessions or clinic visits. During clinical residency experiences, students adhere to the dress and nametag regulations of the residency site/facility.

Failure to dress appropriately and bring necessary materials will lead to dismissal from the laboratory or clinic visit.

MSOP Student Success Committee

The MSOP Student Success Committee is a standing MSOP program committee that tracks the progression of all students through the MSOP program. The committee does so through information that is submitted by faculty and students in the program. The primary focus of the committee is to ensure proper professional and technical development of students as they progress through the program and to facilitate intervention as needed.

Early Identification for Academic and Professional Success

If a student's course average drops below 80%, an Early Identification Plan will be developed by the course instructor. This plan will be designed to increase the student's chances of being successful in a particular course and in the curriculum. The Early Identification Plan can include, but is not limited to, attendance in PPL, meeting(s) with the course instructor(s), referral to the Center for Academic Success or the Student Counseling Center, or other measures designed to help the student succeed in the program. In addition, students are always encouraged to seek the assistance of the course instructor or PPL instructor if they feel they need help.

Eligibility for Clinical Integrated Residency

For eligibility regarding clinical integrated residency, all didactic courses must be satisfactorily met or passed with B- or higher.

Essential Functions of the Master of Science Orthotics and Prosthetics Program

In keeping with the goals of the Professional Master of Science Orthotics & Prosthetics Program, the highest priority is placed upon developing graduates who are competent, caring orthotists and prosthetists possessing the skills of life-long learning needed to incorporate new knowledge and methods into their practices and to adapt to a changing health care environment. Certain essential functions are requisite for admission, progression, and graduation from the MSOP Program.

An individual must be able to independently, with or without reasonable accommodation, meet the following essential functions. Individuals unable to resolve deficiencies in these essential functions, with or without reasonable accommodation, are counseled to pursue alternate careers.

General abilities: The student is expected to possess functional use of the senses of vision, touch, and hearing so that data received by the senses may be integrated, analyzed, and synthesized in a consistent and accurate manner. A student must also possess the ability to perceive pain, pressure, temperature, position, vibration, position equilibrium, and movement that are important to the student's ability to gather significant information needed to effectively manage patients.

Observational Ability: The student must have sufficient capacity to accurately observe and participate in lectures, laboratories, and with patients at a distance and close at hand, including non-verbal and verbal signals, to assess health and illness alterations in a variety of health care settings. Inherent in the observational process is the use of the senses to elicit information through procedures regularly required in examination and treatment, such as inspection, palpation, and assessment of strength and motor capabilities.

Communication Ability: The student must communicate effectively verbally and non-verbally to elicit information; describe changes in mood, activity, posture; and perceive non-verbal communications from patients and others. Each student must have the ability to read and write, comprehend and speak the English language to facilitate communication with patients, their family members, and other professionals in health care settings where written and electronic medical records, verbal presentations, and patient/family instruction are integral to effective healthcare practice and patient care. The student must communicate effectively verbally and in writing with instructors and other students in the classroom setting as well.

Motor Ability: The student must be able to perform gross and fine motor movements with coordination sufficient to perform complete physical examinations utilizing a variety of examination maneuvers. A student must develop the psychomotor skills reasonably needed to perform interventions including management and operation of therapeutic healthcare equipment utilized in the general practice of a physical therapist. The student must be able to maintain consciousness and equilibrium; have sufficient levels of postural control, neuromuscular control, and eye-to-hand coordination; and to possess the physical and mental stamina to meet the demands associated with extended periods of sitting, standing, moving, lifting, and physical exertion required for satisfactory performance in patient care and classroom/laboratory settings.

Intellectual, Conceptual, Integrative, and Quantitative Abilities: The student must be able to develop and refine problem-solving skills that are crucial to practice as a physical therapist. Problem solving involves the abilities to comprehend three-dimensional relationships and understand the spatial relationships of structures; to measure, calculate, reason, analyze, and synthesize objective and subjective data; and to make decisions that reflect consistent and thoughtful deliberation and sound clinical judgment. A student must have the capacity to read and comprehend healthcare literature. Each student must demonstrate mastery of these skills and the ability to incorporate new information from peers, teachers, and the healthcare literature to formulate sound judgment in patient/client management.

Behavioral and Social Attributes: Flexibility, compassion, integrity, motivation, effective interpersonal skills, and concern for others are personal attributes required of those practicing as an orthotist/prosthetist. The student must possess the emotional health required for full utilization of the student's intellectual abilities; the

exercise of good judgment; the prompt completion of all responsibilities in the classroom setting, as well as those in the patient care setting; and the development of mature, sensitive, and effective relationships with patients and other members of the health care team.

Each student must have the emotional stability required to exercise stable, sound judgment and to complete assessment and interventional activities. The ability to establish rapport and maintain sensitive, interpersonal relationships with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds is critical for practice as a physical therapist. The student must be able to tolerate physically taxing loads and still function effectively under stress; adapt to changing environments; display flexibility; graciously accept constructive criticism; manage difficult interpersonal relationships during training; and learn to function cooperatively and efficiently in the face of uncertainties inherent in clinical practice.

** Adapted from “Technical Standards for Admission, Academic Progression, and Graduation” from the Drexel University Physician Assistant Program, Philadelphia, Pa. Used with their permission.

Examinations

Students are expected to take examinations at the time specified for each course in the program. In an exceptional case, a student may be allowed to take an examination at a time other than the scheduled period with the approval of the Course Coordinator and Director. The date for this re-examination will be set in conference with the Course Coordinator.

Grading and Satisfactory Standing

The department’s grading scale is as follows:

Grade	Range	Interpretation	Grade Points Earned per Term Hour
A	93.00 – 100.00	Indicates exceptional performance	4.00
A-	90.00 – 92.99		3.70
B+	87.00 – 89.99		3.30
B	83.00 – 86.99	Indicates good performance	3.00
B-	80.00 – 82.99	Indicates minimally acceptable performance	2.70
C+	77.00 – 79.99	Remediation/Retake	2.30
C	73.00 – 76.99	Remediation/Retake	2.00
F	≤ 72.99	Failure – Unsatisfactory performance	0.00

A passing grade for all Professional MSPO courses is at least a “B” or "Satisfactory" depending upon the grading structure of the course. Additionally, the university requires that all graduate students maintain a GPA of at least 3.0. Students who do not have a 3.0 cumulative grade point average at the end of any academic quarter are placed on academic probation. Students on academic probation must not only achieve a 3.0 cumulative average within two successive terms following the term in which the deficiency occurred but must also maintain at least a 3.0 term average in any term in which he or she is on probation.

Failure to meet either of these requirements will subject the student to dismissal at the discretion of the Associate

Vice Provost for Graduate Studies.

If a student receives less than a “B” or an “Unsatisfactory” in any course in the Program, the student will be required to take a leave of absence until the student can successfully repeat the course. Upon the student’s return, the student will retake the course and audit selected courses offered that semester as determined by the faculty. Both the initial grade and the subsequent grade will be shown on the transcript and reflected in the GPA. Please consult the Program’s Clinical Education Manual for any additional details related to Clinical Education courses.

If a student receives a grade of less than a “B” or “Unsatisfactory” in a second course or in a repeated course in the Program, the student will be dismissed from the Program. Students who are dismissed from the Program may reapply for readmission consideration. If readmitted, an individual curriculum plan will be developed by the admissions committee in conjunction with the faculty.

INCOMPLETE (INC) ([here](#))

A grade of Incomplete (INC) can be assigned when an emergency prevents the student from completing the course within the prescribed time period. A student who receives an Incomplete (INC) must successfully complete the course within the first two weeks of the following didactic session (except for Clinical Education). For the academic sessions that immediately precede Clinical Education, the conditions regarding eligibility for clinical education will apply.

Clinical Experience (Integrated Residency) are graded on a Satisfactory(P)/Unsatisfactory(F) basis. Grading of clinical education is awarded by the University rather than the clinical facility; however, the University genuinely considers input from the student’s supervising residency clinical mentor when determining the grade as the residency clinical mentor has direct first-hand knowledge of the student’s performance. Although Satisfactory(P)/Unsatisfactory(F) grades do not have a numerical coefficient weight and therefore are not averaged into the semester or cumulative grade point average, they follow the same conditions for grading as outlined above.

ASSESSMENT AND GRADES

To meet the Program's academic requirements, all students are responsible for retaining previously learned material. Each semester or academic session, previous course work becomes prerequisite to current course work. Any student who receives a grade less than 80% on an examination, paper, or project should plan to meet with the Course Coordinator. **It is the student's responsibility to seek out the course instructor, his/her faculty advisor and/or Program Director for assistance in striving to overcome poor performance. It must be reemphasized that the MSOP curriculum is a graduate curriculum, and students are treated as graduate students who must take responsibility for their own learning and actions for remediation to successfully complete the Program.**

Grading System

All students are expected to pursue the highest standards of academic excellence.

At the conclusion of a course, a grade will be recorded for each enrolled student (on a schedule determined by the Registrar) according to the following grading system:

At mid-semester, grades of “MW” (midterm weak performance) or “MF” (midterm failing

performance) may be issued. Students receiving MW or MF grades at mid-semester may be contacted by the Program or College following the Program's Academic Progress Meeting.

Failing Grade (F)

Failures in courses must be removed within the next academic semester in which the course is offered. If the grade of failure is not removed within that time, the student will be dismissed for academic reasons.

The highest possible grade for a student who is reenrolling in a course is "B".

A student who has not removed the failing grade within the above timeframe will not be permitted to continue in the academic program without the written approval of the Dean of the College of Nursing and Health Professions or his/her designee.

After receiving this written approval, a student may be subject to special academic stipulations as determined by the Course Coordinator and Program Director, with approval of the Dean of the College or his/her designee.

While students are permitted to re-enroll in a failed course one time, students who receive a failing grade twice in the same course will be dismissed from their academic program.

NCOPE Clinical Residency Grades

At the conclusion of each NCOPE Clinical Residency (Residency) course, grades are rendered by the Director of Clinical Residency Education, in conjunction with the Program Director, based on the recommendations of both the Site and University Supervisors.

A grade of Satisfactory (P) is required to pass any course that involves direct service.

Withdrawal (W)

Withdrawal from a Course: To withdraw from a required course, a student must obtain the approval of the Program Director. The desire to avoid a low grade is not an acceptable reason for withdrawal from a course.

Withdrawals from any NCOPE clinical residency activity (Residency) are subject to the approval of the Director of Clinical Residency Education and subsequent approval of the Program Director.

Withdraw from a Program: To withdraw from a program, a student must obtain approval from the Program Director, in consultation with the Dean.

Audit (AU)

A student in a Drexel MSOP degree elect to officially audit any course within the curriculum by obtaining written permission from the course coordinator and Program Director. A student then

registers for the course during the College registration period.

The audit option provides MSOP graduate students the opportunity to attend a course, but carries no earned credit with no standard letter grade. Participation in the course will be evidenced by the "AUD" grade designation on the transcript. The "AUD" grade designation does not affect a student's GPA.

Grade Mediation

A student who has a concern or complaint about a reported grade in a course should first discuss grading practices and determinations with the course instructor. It is expected that the student and instructor will address any misunderstandings and will attempt to achieve consensus on any disagreements over grades.

If the student and the instructor disagree about the student's grade, the student may appeal the grade decision, in writing, to the Program Director. If the Program Director is the course instructor, or if the student disagrees with the ruling of the program director, an appeal may be made to the Dean of the College.

The Dean's decision is final. There is no further appeal within the College.

In the event that the Dean of the College teaches the course in question, the written appeal is made to the Provost/Vice Preside of Academic Affairs.

The decision of the Provost/Vice President of Academic Affairs is final; there is no further appeal within the University.

Any challenge of a course grade must be made within 30 days from the date of issue by the Office of the Registrar.

The original grade assigned by the instructor remains on the student's record while the appeals process is in progress and will be changed only if the appeal is successful.

All grades are considered permanent if not challenged within the time frame specified.

In the event that a challenge to a grade should arise, copies of sequestered exams, reports, and/or presentations submitted by students are required to be retained by the instructor for a period of one year from the date the grade was posted.

COURSE CONCERNS / ACADEMIC ENVIRONMENT

Course problems should be initially discussed between the course instructor(s) and the student and, if necessary, with the Program Director and Director of Clinical Education. If the concerns are not resolved satisfactorily, then they should be brought to the attention of the Dean of the College or his/her designee.

In the event that the Program Director is the course instructor or is otherwise a direct participant in the underlying dispute, then the student should contact the Dean of the College.

Classroom discrimination or sexual harassment concerns should be brought to the attention of the Dean of the College or Affirmative Action Officer or the Provost/Vice President of Academic Affairs.

EXAMINATIONS

General Policies

Examinations provide the opportunity for instructors to evaluate and for students to demonstrate academic progress. The policies stated in the sections below refer to both face-to-face and on-line course examinations.

Exam policies and procedures for a course will be included in the course syllabus, which will be distributed at the beginning of each semester. The student is responsible for understanding these policies. Questions or concerns should be directed to the course instructor and then the Program Director.

Course instructors will include in the course syllabus the relative weights to be given to various examinations, and evaluation procedures used in determining the final grade.

Infractions of the examination policies are considered serious offenses. Any student guilty of infractions will be penalized in an appropriate manner, including the possibility of expulsion from Salus University. These matters will be referred to the Judicial Committee for review and further action.

Examination Attendance

Students are required to take examinations as scheduled. If a student is ill and is unable to take the examination, he or she must notify the course instructor, and Program Director prior to the exam.. In cases of other emergencies (e.g., death of immediate family member), the instructor, Program Director should be notified and may authorize an excused absence from the exam. Unexcused absences will result in a grade of zero (0) for the missed exam.

A student must be registered for any given course before he or she may take the course's examinations. No credit will be received for any course for which the student is not formally registered. The Registrar's Office is responsible for ensuring that only registered student receives a grade for a registered course.

National Examinations

Passage of a national examination(s) is not included as part of O&P program requirements. However, passage of such examinations is required for many jobs in professions serving individuals with disabilities. Therefore, the taking of such examinations specific to certification in various fields of study in the College of Nursing and health Professions is recommended.

Students should consult their discipline's professional organization, state departments of education, and other appropriate websites for general information and registration procedures. All other questions should be directed to the Program Director.

When undertaken, each student is required to report his/her national test scores to the Program, as these scores provide information vital to the University's ongoing curriculum assessment efforts.

END OF SEMESTER

The course instructor(s) will evaluate the performance of all students registered within a course at the end of each grading period and the instructor of record will submit student grades to the Office of the Registrar.

Following the submission of grades by the faculty, the Office of the Registrar will make official entry of the grades into the student record, and the academic standing of each student will be reviewed by the Program Director and the Program Faculty at an Academic Progress Meeting.

Following the Academic Progress Meeting, the Office of the Registrar will notify the student in writing about his/her academic performance for the semester.

If a student is not making satisfactory progress in the program, he/she will receive notification from the Dean of the College. The student is required to meet with the Program Director and other individuals as designated.

A student is expected to take action to resolve his/her academic difficulties with the assistance of the individuals and services available to the student.

Failure to comply with directives from the Dean of the College or his/her designee and/or Program Director may result in dismissal of the student from the academic program. The matter may then be referred to the Committee on Academic Promotions for review and further action.

Academic Standing Policy

Good Standing: To remain in good academic standing, students must maintain both a cumulative GPA of 3.00 or higher and term GPA of 3.0. Students can earn no more than two grades of "C," "C+," or "B-" in required courses, although specific programs may have more stringent requirements.

Academic Probation: Students who fail to meet the 3.0 cumulative or term GPA standards will be placed on academic probation. A student has one term after being placed onto probation to bring their term GPA to above 3.0. Each program may place a student on academic probation for failing to meet programmatic milestones (such as performance on lab rotations, preliminary exams, qualifying exams, etc.) at their discretion.

Continued on Academic Probation: Students who have been placed on probation and earn a term GPA of 3.0 or higher in the subsequent term, but whose cumulative GPA remains below 3.0, may be continued on probation to allow time for academic recovery and progress toward good standing.

Academic Dismissal¹: A graduate student will be automatically dismissed if 1) a student's cumulative grade point average is less than 3.00 for two consecutive semesters; 2) a student, outside of probationary status, has a term and/or cumulative GPA below 2.00; 3) a student fails to meet the requirements of their probationary status; or 4) a student fails the same required course twice.

Dismissed and Reinstated: If a graduate student's appeal for reinstatement is approved by the College of Nursing and Health Professions, the student will be classified as dismissed and reinstated. Upon reinstatement, the graduate student must achieve good academic standing in the first term of enrollment immediately following their reinstatement based on the approved academic plan for remediation and/or reinstatement contract.

Final Academic Dismissal: If a graduate student fails to meet the requirements of their reinstatement, they will be permanently dismissed from the University.

Dismissal for Other Reasons

In addition to the academic reasons for dismissal listed above, the Program reserves the right to terminate the enrollment of any student, at any time, for what the Program Faculty and Administration may believe to be good and sufficient reasons.

These reasons may include, but are not limited to, his or her demeanor, base knowledge, character, as well as any form of cheating, plagiarism, unprofessional conduct or failure to pass a required criminal background check. Students are to read the *Drexel University Student Code of Conduct* ([here](#)) for additional information.

The Program assigns great importance to self-discipline, the ability to work pleasantly with others, and the ability to conduct oneself in a professional manner. Demonstration of deficiencies in any of these qualities is viewed by the Program as evidence that the student is not suited to a professional career and constitutes adequate cause for dismissal regardless of academic performance.

Notification of Academic Probation and Dismissal

Students who are being placed on probationary status or being academically dismissed will be notified, within one week of the last date of final grades, of their probation or dismissal status by the University via email to their official Drexel email address.

Dismissal Appeal Process

¹ Graduate students may also face disciplinary action, including but not limited to dismissal, for violations of the Student Code of Conduct.

College Appeal Process

1. To appeal an academic dismissal decision, a student must submit a written appeal addressed to the department chair and copy CNHPStudentAppeals@drexel.edu. This first level written appeal should detail the extenuating circumstances² that led to the dismissal, present a plan for future academic success, and identify the remedy or remedies being sought. This first level written appeal should be submitted within five (5) business days, excluding holidays, of the student receiving notice of dismissal from the University. Please do not submit medical documentation that includes a specific diagnosis.
2. The decision of this first level appeal is made by the Department Chair or designee within five (5) business days, excluding holidays.
3. If the student is not satisfied with the decision of the Department Chair or designee, the student may submit a second level written appeal to the CNHP Student Services Department at CNHPStudentAppeals@drexel.edu. This second level written appeal should detail if the prior decision was made in accordance with policy, and procedure, was fair and unbiased and was reasonable based on the record. This second level written appeal should be submitted within five (5) days, excluding holidays, of the student receiving the decision by the Department Chair or designee. Please do not submit medical documentation that includes a specific diagnosis.
4. The decision of this second level appeal is made by the CNHP senior leadership or designee within five (5) business days, excluding holidays.

University Appeal Process

Once a student has exhausted the appeal process at the college level, they may submit an appeal to the Office of Graduate Studies. Appeals at this stage are limited to the following grounds: 1) procedural error that has materially impacted the outcome, 2) bias that have materially impacted the outcome or 3) new information that has become available that was not reasonably accessible or presented during the original review that have materially impacted the outcome.

² Extenuating circumstances are defined as **unexpected, serious, and documented events** that were beyond the student's control and had a direct impact on their ability to meet academic requirements. These may include, but are not limited to: Medical Issues, Family Emergencies, Personal Crises, Academic-Related Diagnoses

Graduation Celebration Day

At the conclusion of the curriculum, the department schedules a Graduation Celebration Day for all of the graduates and their families, friends etc. Details about this celebration will be distributed during the latter half of the second and third year in the program. Attendance at this day is mandatory for all graduates of the program unless previously arranged with the program director.

Lab Practical(s)

Students must pass all lab practical exams (midterm and/or final) in associated courses to earn passing grades in the MSOP curriculum. A passing grade for all lab practical exams is either a minimum of 80.00% (B-) or a Satisfactory (S).

Students who *do not successfully* pass a lab practical exam on the first attempt will be given one (1) additional opportunity to retake the lab practical exam.

For students who **successfully pass the retake lab practical exam** (that is, earn at least a 80.00% (B-) or (S)):

- ☐ If the lab practical exam is graded on a Satisfactory/Unsatisfactory basis, the grade earned will be a “S”.
- ☐ If the lab practical exam is graded by percentage, the lab practical grade recorded will be equivalent to a 80.00% (B-), and this grade will be used in calculating the overall **course grade**.

For students who **DO NOT successfully pass the retake for a midterm** practical exam (that is, earn less than a 80.00% or Unsatisfactory [U]):

- ☐ If the lab practical exam is graded on a Satisfactory/Unsatisfactory basis, the grade earned will be a “U”.
- ☐ If the midterm practical is graded by percentage, the lab practical grade recorded will be the higher of the two (2) grades.
- ☐ At that time, a learning contract will be developed to address student learning deficiencies. If a student decides not to accept a learning contract, then they will withdraw from the course or may.

For students who **DO NOT successfully pass the retake for a final** practical exam (that is, earn less than a 80.00% or Unsatisfactory [U]):

- ☐ If the practical exam is graded on a Satisfactory/Unsatisfactory basis, the highest possible grade earned for the final course grade will be a B-.
- ☐ If the practical exam is graded by percentage, the lab practical grade recorded will be the higher of the two (2) grades, and this grade will be used in calculating the overall **course grade**. In this case, the highest **course grade** achievable is an 80.00% (B-), which is not a passing grade for courses in this curriculum.

Students who receive a final course grade below a B may earn an incomplete in the course and be offered a learning contract for remediation. See the MSOP Remediation Policy for more information.

Leave of Absence and Withdrawal

The policy regarding an academic leave of absence or withdrawal adheres to Program policy as detailed in **Grading and Satisfactory Standing**. Decisions concerning any other student request for a leave of absence are made by the Program Director and will work with CNHP Drexel Student Services. A tuition refund, if warranted, is based on University policy.

Peer Mentorship

When students matriculate into the Program, they are assigned to a peer mentoring team that includes a student or students from the second- year cohorts. The intent of the peer mentoring team is to act as a resource for and provide support to one another as the group progresses through the curriculum. Each group manages its interaction independently, but is encouraged by the Program Director to stay in contact with one another especially when a new student is transitioning to Drexel.

Photocopying of Required and Recommended Readings

Due to copyright laws, bulk copying of articles is not possible as it relates to required and recommended readings. At a minimum, faculty will provide two copies of these readings to the Library to be placed on reserve. Faculty may also post articles on LMS. Each student is allowed to make a copy of these readings for himself/herself.

Potential Health Risks of Orthotic & Prosthetic Students and O&P Clinicians

Physical Strain and Injuries: O&P students and O&P Clinicians often engage in physically demanding tasks, such as lifting and moving patients, demonstrating exercises, and standing for long periods. This can lead to muscle strains, back pain, and other musculoskeletal issues.

Repetitive Stress Injuries: Repeatedly performing the same movements can result in repetitive stress injuries, such as carpal tunnel syndrome or tendonitis.

Emotional Strain: Working with patients who have chronic pain or slow recovery progress can be emotionally challenging. Students and O&P clinicians need to maintain a positive attitude and provide encouragement.

Exposure to Illnesses: O&P students and O&P Clinicians work closely with patients, which increases their risk of exposure to infectious diseases. Proper hygiene and protective measures are essential to minimize this risk.

Burnout: The combination of physical demands, emotional strain, and high patient loads can lead to burnout. It's important for O&P students and O&P Clinicians to manage their workload and practice self-care to avoid this.

Despite these challenges, many O&P clinicians find their work fulfilling and enjoy helping patients improve their quality of life. It is important to be aware of these risks and take steps to mitigate them. The Program provides resources and supports to assist students with this.

Posting of Grades

Following an exam period, the Course Coordinator will post exam and/or course grades on LMS and/or in Banner. During finals week, faculty will post grades only after the completion of all final exams and after all course and instructor evaluations have been completed.

Professional Behaviors and Core Values

Students must demonstrate **professional behaviors and core values** consistent with their status (1st, 2nd or Clinical year) in the program (see the *Assessing Professional Behaviors and Core Values in the Academic Environment* form posted in the LMS in the MSOP Bulletin Shell under Class Information, All Classes, Professional Behaviors Form). Students will use the professional behaviors and core values document to perform a self-assessment annually. To do so, the student will be responsible for scheduling a meeting with their advisor during the indicated time frame to discuss the student's assessment. Students should schedule their meetings well in advance of the deadline. During the meeting, strategies for professional growth will be discussed. Examples should be provided by the student in the assessment form to help facilitate discussion. Following the meeting, both the advisor and student will sign the self-assessment form and a copy of it will be uploaded to the student's electronic file.

Students who demonstrate behaviors that fall below expectations in a particular class will receive feedback and specific examples of their behavior from the instructor using the *Assessing Professional Behaviors and Core Values in the Academic Environment* form. The student and instructor will develop an *Action Plan Learning Contract for Changing and Enhancing Performance* (see Appendix). The instructor will share the assessment form and learning contract with the student's advisor and the MSOP Program Director. The learning contract must be completed by the end of the course. **The highest course grade achievable for students who do not earn an "acceptable" on the learning contract is a 80.00 (B-) regardless of the other grades in the course.**

Students who do not complete the self-assessment process as outlined above will earn a "Needs Improvement" on their assessment for the area of "Responsibility/Accountability" and a learning contract will be established between the student and his/her advisor. The MSOP Program Director will be advised of the learning contract. The student must satisfactorily fulfill the terms of the learning contract by the indicated times or the student will be dismissed from the program.

OPEN Lab

The OPEN Lab (OL) is a regularly scheduled, non-credit Time for all MSOP students that does not conflict with other courses. It is an opportunity for you to study or work on project or skills with guidance and supervision. You should use OL to review and practice content and material from ANY class in the curriculum and to improve lab skills. Participation is not required but is strongly recommended. You may come to OL with specific questions or you may come in, study at your own pace, and ask questions as needed. The format of OL is flexible and adaptable to your learning styles and needs. In certain instances, OL may be required for some students.

Professionalism Policy

Purpose: Students enrolled in the Masters of Science Orthotics and Prosthetics program at Drexel University represent themselves, the O&P profession, and Drexel University. Therefore, it is required that they display professional attributes on and off campus.

Professional attributes explicitly include but are not limited to the following behaviors:

1. Students will maintain efficient and open communication with faculty, staff and clinical partners.
 - a. Students will respond to faculty/staff or clinical site contact emails within 48 hours of receipt or sooner if email indicates shorter response time.
 - b. Students will notify faculty when they have a planned or unplanned absence from class, lab or clinical experience.
 - c. All written, verbal, and nonverbal communication will be respectful and constructive.
2. Students will demonstrate accountability 100% of the time.
 - a. Students are expected to complete all learning assignments on time and prior to the start of all classes, labs and clinical experiences in order to maximize the experience for all students and respect the time of the faculty, lab instructors and clinical instructors.
3. Students will act in accordance with Drexel University's Academic Integrity Policy as explained on the Drexel University website.
4. Students will assume responsibility for their learning needs.
 - a. Students will recognize academic limitations and challenges and seek out faculty assistance
5. Students will dress professionally when participating in clinical experiences or off site labs.
 - a. No jeans, leggings, tank tops, t-shirts, halter/half tops, hoodies.
 - b. Must wear clean, professional closed toed shoes.
 - c. Specific attire as required by the clinical experience or off-site lab (e.g. scrubs).
 - d. Must wear Drexel ID.

If a faculty member identifies a breach of this policy, the following actions will occur:

1. Faculty member(s) initiates a Professional Behaviors and Core Values Assessment for the identified student
2. Faculty member(s) including the student's faculty advisor will meet with student to review the behavior that violates the policy and identify a remediation plan.
3. Faculty will notify the Student Success and Retention Committee.

Program Examination Standards

All MSOP students will be held accountable for adhering to these policies during all exams. Students who do not comply with these standards will not be allowed to take the exam and will receive a "0" for the exam. These policies supplement other College and University policies and regulations concerning academic integrity and misconduct.

- ☐ Exams will be held in larger rooms or lecture halls whenever possible. If necessary, assessments may be conducted remotely. The instructor or test proctor has the authority to assign seating.
- ☐ All bags, purses, backpacks, coats, jackets, briefcases, cell phones, PDAs, etc. must be placed in a designated area before the start of the exam.
- ☐ Cell phones must be turned off
- ☐ The following items are not permitted unless otherwise stated by the instructor:
 - Extraneous materials
 - Electronics or headphones (except watches)
 - Food (beverages are permitted)
 - Reference materials, papers, books, etc.
 - Brimmed hats
 - Talking except to the instructor/proctor once distribution of the exam begins
- ☐ Students must remain in the room until their own examination is completed unless the designated exam

time is longer than 2 hours, in which case one-bathroom break is permitted

- ☐ Students who arrive late will not receive extra time to complete the exam
- ☐ Requests for a waiver from any of these policies must be arranged *in advance* with the Director of the MSOP program
- ☐ Any student who exhibits suspicious behavior while taking an exam may be warned by the instructor or proctor to stop the behavior or may be asked to move. If the suspicious behavior continues after the warning, then the Instructor/Proctor will take the exam from the student and he/she will receive a “0” for the exam.
- ☐ If the instructor/proctor directly observes cheating, the exam will immediately be taken from the student and he/she will receive a “0” for the exam (no prior warning need be given). Once an exam is taken away, the program’s policy regarding sanctions for breach of academic integrity will take effect (please see the policy in the students’ program handbook available on LMS).

Program Evaluation

Program evaluation is an important mechanism used by the Program faculty to evaluate the curriculum goals and objectives. Students participate in this process through several mechanisms: formal course and instructor evaluation, the one-minute questionnaire done frequently in some courses, focus groups, representation at yearly curriculum review, evaluation of the clinical education experience, yearly surveys, exit interviews and alumni surveys. The faculty hope that students will take the responsibility to participate in this evaluation process seriously and provide constructive feedback to assist the faculty in its efforts to keep the program progressive and timely.

All course evaluations and instructor evaluations will be conducted on line. Students must complete the evaluation in order to receive a grade in the course. If a student has not completed the on-line evaluation at the time grades are to be submitted, the student will receive an incomplete (I). Please see sections on “Incomplete Grade” and “Eligibility for Clinical Education” for ramifications of receiving an Incomplete.

Reimbursement of Student Travel

If you are attending a meeting, conference etc. in an official capacity as a representative of Drexel or as a requirement of a position you hold with a professional organization (i.e., AOPA, AAOP, NJAAOP), you may be eligible for travel reimbursement from the department. The department typically covers the cost of airfare, hotel and food for the duration of the meeting or conference. Drexel will not reimburse the cost of alcohol. Requests for reimbursement are considered on a case-by-case basis. If your travel is approved, the department will reimburse you once you have provided receipts and completed the necessary paperwork. It is expected that you submit these materials within 2 weeks of your return. To request travel reimbursement, please contact the faculty chair of the student affairs committee.

Remediation

Students who receive a final course grade below B- or clinical education grade of unsatisfactory may earn an incomplete in the course and be offered a learning contract for remediation. Students will only be offered a learning contract if the course instructor and program director agree that the student’s learning gaps can be appropriately remediated.

Remediation is determined by the following criteria:

<u>Earned Grade</u>	<u>Remediation?</u>
B- (80.00-82.99%)	Yes with course instructor approval

C+(77.00% - 79.99%)	Will be considered depending upon circumstances and overall performance in the curriculum
C (73.00% - 76.99%)	No

The student's faculty advisor and the MSOP Student Success Committee will be included in remediation as appropriate. The learning contract will specifically outline what is required of the student to satisfy the contract's terms.

In all cases of remediation, strategies for success will be explored and discussed between the instructor and student. Students will be provided with and may be required to use academic and student support services available at the University. This may include, but is not limited to, use of tutors/mentor, suggestions for note taking during class, test taking strategies etc.

If the student is unable to satisfy the terms of the learning contract within the specified time frame, the student will earn the original course grade received prior to remediation. In addition, the course instructor and program director will meet to determine an appropriate course of action for that student. The course of action may include leave of absence, or dismissal from the program. Please see the section on Grading and Satisfactory Standing above for more details about leave of absence and dismissal.

Schedules (Class)

Course schedules will be distributed before the start of each semester. Faculty do have the prerogative to change course times; however, this practice is discouraged except for specific defined circumstances.

Standardized Patient/ patient Models

MSOP Program and Drexel University operates a Standardized Patient Lab (SPL) in which actors or patient models role play various clinical scenarios while students may be videotaped performing clinical skills. These experiences are threaded throughout the Professional MSOP curriculum to help you integrate knowledge, demonstrate your clinical skills, and develop self-reflection skills. Although the experiences are graded, the primary focus is formative with the goal of developing your readiness to learn in clinical and academic settings. The model and SPL experiences build on one another, becoming more similar to actual practice as you progress through the curriculum.

Student Leadership and Engagement Committee

Service to the profession and community is embedded in the mission of the program. It is the role of the faculty members on the Student Leadership and Engagement Committee and the Program Director to support students in such endeavors. Students are organized into committees that span a variety of professional and service activities. These committees are run by second- year students. First-year students help with committee activities during their first year so that they are prepared to select their second-year committee during the spring quarter of their first year. There is a section in the MSOP LMS shell for student affairs information.

Student Membership in the AAOP

Students are enrolled in the AAOP (American Academy of Orthotists and Prosthetist) for the entirety of the program.

The cost of this is included in the program fees. The MSOP Program strongly encourages all students to continue their membership after graduating from the program and throughout their professional careers. The cost of maintaining membership is the student's responsibility. The annual membership is fairly inexpensive, and students have the option of joining various specialty sections for additional minimum fees.

Student membership in the Association includes the following:

- *Access to The Academy's website*
- *Access to AAOP Publications (JPO, Podcasts, Journal Club, and Academy Today)*
- *Access to O&P Knowledge Central*
- *Access to participate in and being a Mentee within the Mentoring Program:* The Academy mentoring program pairs new entrants in the profession with mentors on an annual cycle. The objective of the Academy Mentoring Program is to foster relationships within the profession that facilitate networking, interaction, and professional growth. Participation in the program is only available to Academy members in good standing.

By being a student member, students can participate in the Candidate membership at the time of graduation. This program gives graduating students an opportunity to save money as they begin their careers in O&P. Students pay only a fraction when they renew their membership after graduation.

Syllabi

Course syllabi have been developed for each course in the curriculum and are distributed or posted in LMS at the start of each academic quarter or academic session. The course syllabus contain a course description; course overview; prerequisites; co-requisites; behavioral objectives in the cognitive, psycho-motor and affective domains of learning; teaching methods and learning experiences; required and recommended readings; projects; and evaluation methods for grading.

Students need to review these syllabi to ensure that they meet all course requirements.

All required courses in the curriculum are sequential and build upon the knowledge and skill of course work previously taken. Students are responsible for reviewing previously learned material. Each course syllabus will indicate what material needs to be reviewed as prerequisite knowledge for content mastery in a course currently in progress.

CLINICAL MATERIALS

Tools and materials are stored in the Office manager's space. Tools and materials are checked out by students prior to their scheduled session using a sign-out sheet. This sheet will be provided by lab manager.

When checking out an item, list the item(s), student name and the date/time checked out. When finished with the item(s) go the binder and enter the date/time returned. Do not give the test or materials to another student without changing the name on the binder. The student who checked out the materials last will be held responsible if it is not returned.

Tools may not be checked out at the end of the day for overnight use. Use the same checkout procedure noted above. Tool protocols are kept with the Office Manager, to track use and maintain threshold quantities. Staff will assist students to select the correct tools and materials.

Tinker Boxes may be checked out at the end of the day for overnight use. Use the same checkout procedure noted above. Only for 24 hours, unless otherwise specified.

If a student is late returning Tinker Box two occasions, then a conference with the Director is scheduled. A third offense may result in the suspension of checkout privileges. Tests and materials not returned to the office must be replaced by the person who checked them out. Every effort will be made to locate the lost test or program before the person is charged for a new copy.

OTHER CAMPUS RESOURCES

The following resources are helpful when creating therapy lessons, writing papers for class, or needing assistance with other academic areas:

Technology and Library Services (TLS)

Drexel University has a full-time team housed under the auspices of Technology and Library Services (TLS) that respond to technology needs of the on- and off-campus university community.

Broadly, the TLS provides services in two areas: Client services that are responsible for assisting administrators, faculty, staff and students with technological services needed primarily through a Centralized Help Desk environment. Such services rendered to the aforementioned constituents may include, but are not limited to the following:

- Support of the Blackboard Learning Environment
- Telephone and e-mail technological support and problem solving
- Equipment repair (computer, laboratory and clinical)
- Support for professional presentations (development of PowerPoint Slides, Scientific Poster Printing services)
- Information Processing including preparation of graphs and figures for scientific manuscripts submitted for publication, document scanning and grant writing support and formatting in preparation for electronic and mailed submission)
- Scantron services including machine-generated student exams grading support and individual as well as cohort/group grading outcomes report generation
- Room-to-room (Point to Point) videoconferencing capability, preparation and management
- Webinar technological support (individual and group format)
- Purchase and preparation of laptop computer and iPad/iPhone hardware and software for course instruction with/for enrolled students (including uniformity with presence of course syllabi, electronic books (e-books) and journal articles, course examinations, providing external hard drives for information back-up by students)
- Wireless environment support
- Desktop computer problem solving and technical support

The second major service provided by TLS is networking support including problem solving, maintenance and network security. All of these services are readily available for students, part-time and full-time faculty and staff who are/will be involved with the program.

The Learning Resource Center

The Drexel University library staff consists of full-time individuals who are academically trained in library sciences. The library facilities are located on the main campus and host a broad collection of items. The library includes computers which allow for easy access to information databases for student coursework and student/faculty research projects.

Utilizing Blackboard Learning System and MySalus, students will have access to a very broad array of learning resources. A Library Website has been published at: <http://www.salus.edu/Academics/Gerard-Cottet-Library/Library-Catalog.aspx>.

A proxy service, running in Blackboard, enables any Salus student, faculty member, staffer, or distance education student to access all of our web-based resources from remote locations. A once-per-session login to the Blackboard system enables remote access. Numerous online resources are linked in the Library website pages.

The University has made available to faculty and students a package of commercially produced databases as an enhancement to our academic resources. Included in the package are several full text databases and the Cochrane Collection, which can be accessed through a single search engine interface.

Alcon Lab

The design and purpose of the Alcon Lab promotes the interaction of students with the material being presented. Equipped with more than 40 computers, all connected to the instructor's master computer, the lab offers students an interactive learning experience. This format lends itself to physiology, histology and anatomy courses, as the class is able to manipulate images and slides with the instructor's feedback, input and direction. Group dynamics plus instructor interaction also allow for individual active learning, a critical component of any education. Available to students when not in use, the Alcon Lab becomes a study tool for students who want to review study and develop their base of knowledge.

Bennett Career Services Center

The Bennett Career Services Center currently provides educational programs and support services to students and alumni at Drexel University.

Additional information may be found at:

<http://www.salus.edu/Life/Student-Services/career-services.aspx>

Other Support Services

Other student support services currently existent at Drexel University include the Office of Admissions, the Registrar, and Office of Student Affairs, Student Financial Aid, and the Center for Personal and Professional Development. Additionally, each student is assigned an academic advisor within their respective program who facilitates directing students to the appropriate support resources or facilities. Additional information may be found at:

<http://www.salus.edu/Life/Student-Services.aspx>

PARKING

Parking on campus for University's students and faculty is limited to designated areas. Please refer to the campus map for locations:

http://www.salus.edu/getattachment/About/University-Policies/University-Policies/Parking_Policy-1-link.pdf.aspx

All vehicles must be registered with the Department of Safety and Security and affixed with a parking decal. Please complete the form located here:

<http://www.salus.edu/Life/Safety-and-Security/Parking-Decals.aspx>

COURSE DESCRIPTIONS

Course Descriptions - Orthotics & Prosthetics Program

MEDICAL HUMANITIES

5000

Credits: 2

This seminar-style course is based on the principles of cultural humility. Highlighting the history of medicine, orthotic & prosthetics, ethics, and health disparities. This course environment is structured to allow the learner to be introspective and self-reflective through creative thinking and personal exploration of strengths and personality traits. The tenants of compassion, respect, and dignity will be explored in how we approach patient management, patient outcomes, and working with others.

INTRODUCTION TO O&P PRINCIPLES & TECHNIQUES

5001

Credits: 3

This course provides exposure to fundamental concepts of orthotics and prosthetics. The purpose of the course is to provide foundation in history, scope of practice, exposure, methods of assessment and delivery, and basic knowledge to O&P. The course outlines the scope of the profession of orthotics and prosthetics. The course allows students to familiarize themselves with commonly used terminology, materials, fabrication processes, component identification, orthotic and prosthetic classifications, and custom-fit orthoses and prostheses. Parts of this course will reflect on social structures that have helped shape reality as our patients experience it when we are providing care.

INTRODUCTION TO INDEPENDENT STUDY

5003

Credits: 2

This seminar-style course will focus on introducing students to independent study topic areas (e.g., Digital Workspace, Clinical Leadership & Practice Management, Cultural Humility & Health Disparities). The course will highlight key aspects of each topic presented. The course environment is structured to allow the learner to determine which area they will select and take throughout the program in an independent study format.

FUNCTIONAL ANATOMY & KINESIOLOGY

5004

Credits: 3

This course provides intensive instruction in gross human anatomy and functional kinesiology. Through lecture and guided experiential learning, this course has an emphasis on lower limb body structures supporting neuromusculoskeletal and movement-related structures. Laboratory instruction provides small group, instructor guided experiences including human cadaver dissection, manual muscle testing and goniometry. Course content includes, but is not limited to anatomy, kinesiology and biomechanics. Issues related to human diversity are examined during instruction in functional outcome measures related to body function and body structures including such measurements as joint range of motion, postural alignment, and measures of strength.

INTRODUCTION TO PATHOLOGY

5007

Credits: 2

This course provides an overview of pathologies commonly seen within orthotics and prosthetics practice.

UPPER LIMB ORTHOTICS PRACTICE

5020

Credits: 4

This course provides an overview of orthotic management of the upper limb. The upper limb orthotic course will explore the orthotic management of pathologies that impact the shoulder, elbow, wrist, hand, and fingers. Students will learn the

connection and criteria selection of custom fabricated and fit upper limb orthoses in regards to understanding of foundational knowledge in the prescription recommendation, orthotic design, material selection, biomechanical principles, fitting, evaluation, adjustment, and patient-specific outcomes.

BIOMECHANICS & GAIT

5100

Credits: 3

The focus of this course is to provide basic principles of biomechanics and gait. Emphasis will be placed on the importance of the fundamental analysis of the body at rest and in motion with both normal and selected pathological gait.

ORTHOTICS MANAGEMENT OF HEAD & SPINE

5110

Credits: 5

This course provides an overview of orthotic management of the head and spine. The topics covered in this course are; pathologies common to spinal orthotic management, cervical orthoses (CO), thoracic lumbosacral orthoses (TLSO), lumbosacral orthoses (LSO), sacral orthoses (SO), scoliosis management, post-operative management of the spine, cranial helmets, thermal injuries of the face. Students use each other as pseudo-patient models to fabricate and fit an array of custom orthoses. Parts of this course will reflect on social structures that have helped shape reality as our patients experience it when we are providing care. An interprofessional approach will be covered.

UPPER LIMB PROSTHETIC PRACTICE

5130

Credits: 5

This course examines the principles, foundational knowledge, and practices of prosthetics as it relates to potential upper limb (UL) prosthetic management. Prosthetic designs for all levels including partial hand, wrist disarticulation (WD), transradial (TR), elbow disarticulation (ED), transhumeral (TH), shoulder disarticulation (SD), and interscapular thoracic (IST) will be reviewed, along with specialty cases such as bilateral and congenital limb differences. The course covers the following topics: patient assessment, outcome assessment, post-operative management, negative impression and measurement procedures, fit and function assessments, fabrication procedures, and component and material selection. Parts of this course will reflect on social structures that have helped shape reality as our patients experience it when we provide care. The importance of an interprofessional approach will be highlighted.

CASE REPORTS I

5140

Credits: 1

This course focuses on developing writing skills, evidence-based research skills, and clinical decision-making skills within a case report format from the role of orthotist and prosthetist. This course will provide the foundational structure to describe the clinical encounter with a patient and development of a case study.

MEDICAL HUMANITIES II

5200

Credits: 2

This seminar style course is based on the principles of cultural humility and self-care. This course is structured to allow the learner to be introspective and self-reflective through creative thinking and personal exploration of how their strengths and personality traits play a role in interaction with others. The tenants of compassion, respect, and dignity will be further explored in how we approach patient management, patient outcomes, and working with others.

CLINICAL LEADERSHIP & PRACTICE MANAGEMENT

5203

Credits: 2

Students independently explore and learn varied roles within O&P healthcare delivery system, specifically focused on management and leadership. Areas of exploration may include regulatory and reimbursement mechanisms that affect delivery of O&P services throughout the continuum of care. Students may explore how individuals became leaders and managers with their respective areas in O&P.

DIGITAL WORKSPACE

5204

Credits: 2

Students independently explore and learn how technology has advanced within O&P healthcare delivery system, specifically focused on areas of limb capture, software, printing, and digital applications (management to application). Students may explore how individuals became interested, navigated, and implemented the advancement of technology with their respective areas in O&P.

CULTURAL HUMILITY & HEALTH DISPARITIES

5205

Credits: 2

Students independently explore areas of societal attitudes, individual perspectives, cultural perspectives, adaptation, and implications of health disparities and cultural humility within the context of the health care delivery system and broader society. Students may explore how individuals became interested, navigated, and got involved in outreach. Students may engage with organizations whose mission is to assist others (locally, regionally, nationally, or internationally).

SEMINAR BILLING IN P&O

5220

Credits: 2

Seminar course will provide in-depth and most up-to-date information on billing, coding, and reimbursement within O&P. Course will cover medical policy basics, Medicare Local Coverage Determination (LCD), Letters of Medical Necessity, Coding Principles, and Compliance.

PEDIATRIC POPULATIONS

5230

Credits: 2

This course will provide pediatric-focused content within orthotic and prosthetic practice. The course focuses on the areas of early human development and pathologies commonly seen in the pediatric population. The learner will be introduced to orthotic interventions specific to pediatric population. Parts of this course will reflect on social structures that have helped shape reality as our patients and family supports experience it when we are providing care. Emphasis on the importance of interprofessional collaboration and communication will be covered.

PROFESSIONAL DEVELOPMENT

5240

Credits: 2

This course provides students with an opportunity to investigate possible future career paths within their chosen profession of O&P. The student will gather information which serves as the basis for introspection and self-reflection for future decision making.

CLINICAL LEADERSHIP & PRACTICE MANAGEMENT

5303

Credits: 2

Students independently explore and learn varied roles within O&P healthcare delivery system, specifically focused on management and leadership. Areas of exploration may include regulatory and reimbursement mechanisms that affect delivery of O&P services throughout the continuum of care. Students may explore how individuals became leaders and managers with their respective areas in O&P.

DIGITAL WORKSPACE

5304

Credits: 2

Students independently explore and learn how technology has advanced within O&P healthcare delivery system, specifically focused on areas of limb capture, software, printing, and digital applications (management to application). Students may explore how individuals became interested, navigated, and implemented the advancement of technology with their respective areas in O&P.

CULTURAL HUMILITY & HEALTH DISPARITIES

5305

Credits: 2

Students independently explore areas of societal attitudes, individual perspectives, cultural perspectives, adaptation, and implications of health disparities and cultural humility within the context of the health care delivery system and broader society. Students may explore how individuals became interested, navigated, and got involved in outreach. Students may engage with organizations whose mission is to assist others (locally, regionally, nationally, or internationally).

WRITING CASE REPORTS II

5310

Credits: 1

This seminar course is part two of a two-part course which spans across two semesters studying the role of orthotist and prosthetist in the development of case reports and the role of evidence-based practice. This course will provide the foundational structure to describe the clinical encounter with a patient and development of a case study. Students will complete a capstone/case report for this final section to meet NCOPE requirements.

ADVANCED O&P PRACTICES

5350

Credits: 2

Course exposes the O&P student to advanced developments in O&P and the researchers and practitioners who are advancing the profession. Topics will range from but not limited to impression techniques, modification techniques, advanced componentry, microprocessor-controlled systems, suspension systems to pattern recognition in O&P.

CLINICAL RESIDENCY SEMINAR

5360

Credits: 2

Course designed to prepare the O&P student to transition into their NCOPE residency phase of the program. Will evaluate NCOPE requirements and review ABC code of professional practice as it relates to residency and professional interactions.

LOWER LIMB PROSTHETICS PRACTICE

6000

Credits: 7

This course examines the principles, practices, and management of lower limb orthotics. Will examine all elements of orthotic intervention of the lower limb that are concerned with the lower leg and foot distal (i.e., below) to the knee and proximal (i.e., above knee) limb regions that include the knee, hip, pelvis and trunk. The major areas addressed in this course are: foot orthoses (FO), ankle foot orthoses (AFO), examination of the foot and ankle and knee, knee ankle foot orthoses (KAFO's), knee orthoses (KO), hip knee ankle foot orthoses (HKAFO's) pediatric and adult orthotic management, technical fabrication methods, digital workflow, computer-aided-design/computer-aided-manufacture in orthotics (CAD/CAM), orthotic management of fractures, fit and function assessment. Parts of this course will reflect on social structures that have helped shape reality as our patients experience it when we are providing care.

LOWER LIMB ORTHOTICS PRACTICE

6010

Credits: 7

This comprehensive course examines the principles and practices of lower limb prosthetics as they relate to amputations distal to the knee and proximal to the knee. The course covers a diversity of topics which include: patient assessment, post-operative management, negative impression and measurement procedures, modification techniques, fabrication procedures, prosthetic alignment, gait analysis, fit and function assessments, computer-aided-design/computer-aided-manufacture in prosthetics (CAD/CAM), feet, component and material selection and principles of gait training. Professional patient/subject models are used to demonstrate the clinical fit and function of a prosthesis. Parts of this course will reflect on social structures that have helped shape reality as our patients experience it when we are providing care.

PHASE TWO: INTEGRATED CLINICAL RESIDENCY

During the didactic portion residency sites will be identified throughout the program and confirmed in session 4. Student preferences will be considered but not promised.

The integrated clinical residency occurs after all didactic work is completed. The residency consists of three six-month rotations equally the 18-months required by NCOPE. These rotations can occur

Standards by NCOPE can be found at <https://ncope.org/index.php/home-page-v2/residency-and-professional-experiences/orthotic-prosthetic-residency-standards/>

With the three 6-month or two 9-month rotations students/residence would be engaged with NCOPE Tracker to maintain records of interactions of 15 minutes or greater.

ROTATION 1A

6160

Credits: 16

The clinical residency phase of the program consists of three 6-month or two 9-month local, regional, and national rotations equaling 18-months in totality as required by National Commission on Orthotic and Prosthetic Education (NCOPE). This critical phase involves students gaining exposure in a broad and in-depth experiential learning and clinical environments within both disciplines (O&P) within a variety of clinical settings. Preparation for the integrated clinical residency occurs during the 16-month didactic portion of the program. Upon completion of both the didactic and clinical portions of the program, graduates are eligible to sit for the ABC Board Exam in both disciplines (Orthotics and Prosthetics).

ROTATION 1B

6161

Credits: 6

The clinical residency phase of the program consists of three 6-month or two 9-month local, regional, and national rotations equaling 18-months in totality as required by National Commission on Orthotic and Prosthetic Education (NCOPE). This critical phase involves students gaining exposure in a broad and in-depth experiential learning and clinical environments within both disciplines (O&P) within a variety of clinical settings. Preparation for the integrated clinical residency occurs during the 16-month didactic portion of the program. Upon completion of both the didactic and clinical portions of the program, graduates are eligible to sit for the ABC Board Exam in both disciplines (Orthotics and Prosthetics).

ROTATION 2A

6260

Credits: 6

The clinical residency phase of the program consists of three 6-month or two 9-month local, regional, and national rotations equaling 18-months in totality as required by National Commission on Orthotic and Prosthetic Education (NCOPE). This critical phase involves students gaining exposure in a broad and in-depth experiential learning and clinical environments within both disciplines (O&P) within a variety of clinical settings. Preparation for the integrated clinical residency occurs during the 16-month didactic portion of the program. Upon completion of both the didactic and clinical portions of the program, graduates are eligible to sit for the ABC Board Exam in both disciplines (Orthotics and Prosthetics).

ROTATION 2B

6261

Credits: 16

The clinical residency phase of the program consists of three 6-month or two 9-month local, regional, and national rotations equaling 18-months in totality as required by National Commission on Orthotic and Prosthetic Education (NCOPE). This critical phase involves students gaining exposure in a broad and in-depth experiential learning and clinical environments within both disciplines (O&P) within a variety of clinical settings. Preparation for the integrated

clinical residency occurs during the 16-month didactic portion of the program. Upon completion of both the didactic and clinical portions of the program, graduates are eligible to sit for the ABC Board Exam in both disciplines (Orthotics and Prosthetics).

ROTATION 3A

6360

Credits: 16

The clinical residency phase of the program consists of three 6-month or two 9-month local, regional, and national rotations equaling 18-months in totality as required by National Commission on Orthotic and Prosthetic Education (NCOPE). This critical phase involves students gaining exposure in a broad and in-depth experiential learning and clinical environments within both disciplines (O&P) within a variety of clinical settings. Preparation for the integrated clinical residency occurs during the 16-month didactic portion of the program. Upon completion of both the didactic and clinical portions of the program, graduates are eligible to sit for the ABC Board Exam in both disciplines (Orthotics and Prosthetics).

ROTATION 3B

6361

Credits: 6

The clinical residency phase of the program consists of three 6-month or two 9-month local, regional, and national rotations equaling 18-months in totality as required by National Commission on Orthotic and Prosthetic Education (NCOPE). This critical phase involves students gaining exposure in a broad and in-depth experiential learning and clinical environments within both disciplines (O&P) within a variety of clinical settings. Preparation for the integrated clinical residency occurs during the 16-month didactic portion of the program. Upon completion of both the didactic and clinical portions of the program, graduates are eligible to sit for the ABC Board Exam in both disciplines (Orthotics and Prosthetics).

Appendix C.

Standards and Guidelines for the Accreditation of Educational Programs in Orthotics and Prosthetics

Essentials/Standards initially adopted in 1993; revised in 2001, 2006, 2010, 2017

Introduction

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) accredits programs upon the recommendation of the National Commission on Orthotic and Prosthetic Education (NCOPE).

These accreditation **Standards and Guidelines** are the minimum standards of quality used in accrediting programs that prepare individuals to enter the orthotic and prosthetic profession. Standards are the minimum requirements to which an accredited program is held accountable. Guidelines are descriptions, examples, or recommendations that elaborate on the Standards. Guidelines are not required, but can assist with interpretation of the Standards.

The Commission on Accreditation of Allied Health Education Programs, National Commission on Orthotic and Prosthetic Education, American Academy of Orthotists and Prosthetists, and American Board for Certification in Orthotics, Prosthetics and Pedorthics cooperate to establish, maintain and promote appropriate standards of quality for educational programs in orthotics and prosthetics and to provide recognition for educational programs that meet or exceed the minimum standards outlined in these accreditation **Standards and Guidelines**

Core Curriculum for Educational Programs in Orthotics and Prosthetics

Section A Entry-Level Competencies

The graduate entering the profession must effectively demonstrate competence in the following content areas:

- A.1. Exemplify the role of the orthotist / prosthetist in providing ethical, patient-centered care by applying accepted professional responsibilities in clinical practice experiences.
- A.2. Practice safety of self and others, and adhere to safety procedures throughout the provision of orthotic / prosthetic services.
- A.3. Demonstrate appropriate insight into clinical practice, clinical operations, and practice management.
- A.4. Demonstrate an awareness of the humanity and dignity of all patients and related individuals within a diverse and multicultural society.
- A.5. Comprehend and demonstrate knowledge of the collaborative role of the orthotist / prosthetist as a member of the interdisciplinary rehabilitation team in providing patient-centered care.
- A.6. Demonstrate the ability to employ evidence-based practice with an understanding of the research processes and how to use research findings to appropriately influence clinical practice.
- A.7. Demonstrate the ability to integrate knowledge of the fundamental concepts of human function (physical, cognitive, social, psychological) with the practice framework of assessment, formulation, implementation, and

follow-up of a comprehensive orthotic / prosthetic treatment plan.

- A.8. Demonstrate the ability to make clinical decisions designed to meet patient needs and expectations, and measure effectiveness of O&P intervention by utilizing (or administering) appropriate outcome measures.
- A.9. Demonstrate the ability to provide effective education to patients, their support networks, health care professionals, and the public at large.
- A.10. Document pertinent information that supports the provision of effective communication and meets the requirements of legal, business, and financial parameters for patient care.
- A.11. Demonstrate proficiency in fundamental technical procedures that support orthotic / prosthetic practice.

Section C Professional Curriculum

Foundational Content Areas (C.1.0)

The following content areas relating to the foundations of orthotic and prosthetic practice must be included in the curriculum:

- C.1.1 Behavioral Sciences
- C.1.2 Clinical Pathology
- C.1.3 Clinical Pharmacology
- C.1.4 Clinical Skills
- C.1.5 Clinical Technologies
- C.1.6 Communication Skills
- C.1.7 Diagnostic Studies
- C.1.8 Ethics
- C.1.9 Evidence-Based Practice
- C.1.10 Health Care Economics
- C.1.11 Human Anatomy and Physiology
- C.1.12 Kinesiology and Gait Analysis
- C.1.13 Materials Science and Mechanical Principles
- C.1.14 Models of Disablement
- C.1.15 Neuroscience
- C.1.16 Practice Management
- C.1.17 Professional Issues
- C.1.18 Rehabilitation Science
- C.1.19 Research Methods
- C.1.20 Technical Skills

Definitions for Foundational Content Areas:

- C.1.1 Behavioral Science: The study of fundamental psychological concepts in personality and disability in relation to healthcare, self-care and the role of relationship building in clinical decision making. Strategies include the recognition of behaviors; ability to work with individuals in distress, stages of grief and emotional adjustment; identification of problematic psychological symptoms necessitating referral to appropriate health care providers; application of motivational techniques; and care for one's own physical, mental and emotional health.
- C.1.2 Clinical Pathology: The study of conditions commonly referred for orthotic / prosthetic services. Content emphasizes orthopedic, neurological, neuromuscular, vascular and psychological disorders and diseases.
- C.1.3 Clinical Pharmacology: The study of the effects of current pharmacological treatments and the impact on clinical decisions for conditions encountered in orthotic / prosthetic patient care. Strategies emphasize the clinical effects on physiological (i.e. volume management, cardiac performance, pain, spasticity,

dermatological reaction) and psychological function.

- C.1.4 Clinical Skills: The study and supervised practice of skills in orthotic / prosthetic practice. Strategies include the development of professional relationships, use of assessment tools and objective measures to determine intervention strategies, development and implementation of treatment plans, use of evidence-based practices to answer clinical questions, education of stakeholders, and maintenance of documentation in compliance with legal regulations and requirements.
- C.1.5 Clinical Technologies: The study of conventional and emerging theories, techniques and technologies and their integration into clinical orthotic / prosthetic practice. Strategies include application of these technologies to the assessment, formulation, implementation, follow-up and/or practice management of an orthotic / prosthetic treatment plan.
- C.1.6 Communication Skills: The study of communication and interaction with others along the continuum of care including the patient, family, caregivers, members of the healthcare team and others involved in achieving expected treatment outcomes. Interactions should be sensitive to the cultural, psychosocial, age, disability and socio-economic status of the person(s) with whom the interaction takes place.
- C.1.7 Diagnostic Studies: The study and consideration of information derived from medical reports, tests, and measures that aid the provision of orthotic / prosthetic care.
- C.1.8 Ethics: The study of ethical reasoning inclusive of the identification, analysis and application of principles to make judgments based on scientific facts. Strategies emphasize the consideration of all stakeholders' views, ethical principles, respect for persons, maximizing benefits/minimizing harms and justice.
- C.1.9 Evidence-Based Practice: The study of integrating scientific knowledge with clinical expertise to design, implement and evaluate patient-specific orthotic / prosthetic interventions. Strategies include the critical appraisal and synthesis of patient values and goals, scientific evidence, and clinical expertise.
- C.1.10 Health Care Economics: The study of economics related to efficiency, effectiveness, value and behavior in the production and consumption of health care to understand how the orthotic / prosthetic profession fits in the entire healthcare industry and economy.
- C.1.11 Human Anatomy and Physiology: The study of anatomical structures and physiological functions of the nervous, musculoskeletal, cardiopulmonary and integumentary systems of the human body. Strategies include the identification and differentiation of gross anatomical structures and the palpation of surface anatomy and relating structures to corresponding functional anatomy.
- C.1.12 Kinesiology and Gait Analysis: The study of normal and pathological human movement, performance and function through the application of biomechanical and motor control principles with an emphasis on joints, moments, and ground reaction forces. Strategies include methods to study normal and pathological movements via gait analysis; the action and effects of external and internal forces on the musculoskeletal system; the body structure/function changes due to over-, under- and non-use of body segments; and the

influence of orthotic / prosthetic devices on skin integrity, muscular tissue, bone growth, posture, balance and mobility.

- C.1.13 Material Science and Mechanical Principles: The study of physical / mechanical properties and behavior for the appropriate design and selection of materials commonly used in orthotic / prosthetic practice. Strategies include the evaluation of components' physical / mechanical / material properties and behavior in relation to its common clinical application. Concepts include, but are not limited to force vectors, design geometry (including stress concentrations), pressure distribution, stress/strain, friction, fatigue resistance, stiffness and corrosion resistance.
- C.1.14 Models of Disablement: The study of frameworks used to define and delineate the consequences of disease and injury on both personal and societal levels. Strategies emphasize effective communication with all members of the rehabilitation team.
- C.1.15. Neuroscience: The study of neuroanatomy and related neurological function. Content emphasizes neurological disorders encountered in clinical orthotic / prosthetic practice.
- C.1.16 Practice Management: The study of business practices within the orthotic / prosthetic clinical environment. Content includes clinical decision-making, thorough and ethical documentation, coding and prescription recommendations, compliance with regulatory accreditation agencies, legal considerations surrounding patient care, quality improvement, time management and project management. In addition, content on the business aspect of practice related to personnel policies and procedures.
- C.1.17 Professional Responsibilities: The study of the expectations of the orthotist-prosthetist as a professional and his/her role within the profession itself and the profession within society. Strategies include the exploration and understanding of the organizations and documents that guide practice within the profession (e.g., Scopes of practice, Code of Professional Responsibility, Practice Analysis); the role of the orthotist-prosthetist and related personnel in the healthcare team; and the responsibilities to further professional development of self and others.
- C.1.18 Rehabilitation Science: The study of the scope and variance of rehabilitation practices within sociocultural contexts. Strategies include the understanding of stakeholders' perspectives in orthotic / prosthetic patient care; appreciating the implications of stakeholder perspectives on clinical decision-making; analyzing and synthesizing clinical and functional outcomes; and identifying efficacy of provision of orthotic / prosthetic services.
- C.1.19 Research Methods: The study of the methods required to formulate clinically-relevant scientific questions and suitable hypotheses to support evidence-based practice. Strategies include understanding of the ethical considerations involved in the design, implementation and reporting of research findings; the rights of human subjects; identification and recruitment of participants; collection and analysis of data; and dissemination of research findings.
- C.1.20 Technical Skills: The study and supervised practice of psychomotor skills necessary to ensure the safe and appropriate use of tools and equipment to formulate and implement orthotic / prosthetic treatment plans. Strategies include the use of technical/mechanical problem solving to assess, adjust, and direct the fabrication of orthoses/prostheses to meet patient-specific needs.

C.2.0 Patient Assessment

The graduate must demonstrate the ability to complete the following essential elements of the patient evaluation process competently:

- C.2.1 Effectively communicate with the patient or caregiver to gather cogent and useful information for orthotic and/or prosthetic assessments.

C.2.2 Identify concerns (e.g., AOL, gait training) necessitating referral to other healthcare providers and determine methods and criteria for referral.

C.2.3 Document services using established record-keeping techniques to record patient assessment and treatment plans, to communicate fabrication requirements and to meet standards for reimbursement and requirements of external agencies.

C.2.4 Perform a comprehensive assessment of the patient using standardized methods to obtain an understanding of the individual's potential orthotic / prosthetic needs. Students must demonstrate the ability to acquire the following through interview, review of clinical documentation, physical exam, and administration of performance measures.

C.2.4.1. Patient History

- i. Chief Complaint
- ii. Current health condition, including comorbidities
- iii. Prior medical conditions and surgical history (e.g. heart/ musculoskeletal / allergies/ skin)
- iv. Diagnostic imaging reports
- v. Medications
- vi. Past orthotic / prosthetic management
- vii. Review of clinical chart

C.2.4.2 Patient Assessment

- i. Body Structure & Function: Volumetric measures, Skin integrity/ Wounds, Condition of contralateral side, Range of motion/ Joint integrity and stability, Sensory testing/ Proprioceptive sense/ Pain, Muscle Tone/ Strength, Neuromusculoskeletal integration/ Motor control, Cognitive ability
- ii. Activity & Participation: Observational gait analysis, Postural & balance evaluation, Vocation / Daily functional demands, Recreational activities, Mobility/ Activity Level
- iii. Personal Factors: Patient goals / Motivation level/ Social support, Personal implications of impairment, Financial information
- iv. Environmental Factors: Living environment, Work environment, Recreational environment

C.2.4.3 Outcome Assessment: Use and interpret appropriate, patient-reported and performance-based outcome measures to assess achievement of patient-specific orthotic / prosthetic outcomes as compared to baseline measures.

- i. Assessment of outcome data and evaluation and interpretation of findings
- ii. Reassessment of healthcare and/or biomechanical needs over time

C.2.5 Consult with other caregivers and other relevant healthcare professionals as necessary. Professionally communicate using written, oral, and nonverbal methods with patients, colleagues, and other healthcare providers.

C.2.6 Demonstrate a basic understanding of surgical processes and procedures related to orthotic and prosthetic care and how these and their sequelae impact orthotic and prosthetic design and function.

- i. Surgical Procedures: Amputation Surgery and Revision, Rotationplasty, Joint Replacement, Tendon Lengthening, Ligament Repairs/ Reconstruction, Spinal Stabilization, Joint Fusions, Osseointegration, Targeted Muscle Reinnervation, Limb Lengthening, Limb Salvage
- ii. Surgical Processes: Perioperative O&P services, Post-operative Complications

C.2.7 Demonstrate a basic understanding of pathologies as it relates to O&P management, the professional curriculum includes content and learning experiences of the following diseases and diagnoses commonly seen by orthotists / prosthetists in clinical practice.

C.2.7.1 Musculoskeletal disorders of the Lower Limb:

- i. Ankle/ Foot Disorders: Abnormal Alignment: (i.e., Pronation / Supination, Rearfoot Varus / Valgus, Forefoot Varus / Valgus, Hallux Valgus, Hallux Rigidus, Plantarflexed 1st Ray, Metatarsus Adductus) , Talipes Calcaneovarus / Calcaneovalgus/Equinovarus, Plantarfasciitis, Metatarsalgia, Tarsal Coalition, Posterior Tibial Tendon Dysfunction, Morton's neuroma, Charcot Arthropathy
- ii. Knee Disorders: Sprains, strains, Ligament injuries, Cartilage/meniscus injuries, Osteoarthritis, Dislocation/subluxation, Angulation osteotomy, Osgood Schlatter
- iii. Hip Disorders: hip dislocation, Legg-Calve-Perthes, Hip dysplasia, Developmental Dislocating Hip

C.2.7.2 Musculoskeletal disorders of the Upper Limb

- i. Injuries, disorders and deformities: finger, wrist, elbow, and shoulder
- ii. Shoulder Conditions: Rotator Cuff, Adhesive Capsulitis
- iii. Dislocations

C.2.7.3 Musculoskeletal disorders of the spine

- i. Spinal deformities: Scoliosis (Congenital and Idiopathic), Scheuermann's Kyphosis
- ii. Spondylolysis / Spondylolisthesis
- iii. Degenerative disorders: Spinal stenosis, Osteoporosis, Disc Herniation
- iv. Spine Trauma: Spinal Fracture, Spinal Dislocation
- v. Vertebral osteomyelitis

C.2.7.4 General Musculoskeletal conditions

- i. Contractures
- ii. Fractures
- iii. Repetitive stress injuries
- iv. Ligamentous injuries
- v. Articular cartilage disorders
- vi. Rheumatoid Arthritis
- vii. Osteoarthritis
- viii. Skin condition

C.2.7.5 Limb Loss

- i. Upper Limb: Partial Hand, Transradial, Transhumeral, Shoulder Complex, Joint Disarticulations
- ii. Lower Limb: Partial Foot / Transmetatarsal, Ankle Disarticulation, Transtibial, Transfemoral, Joint Disarticulations, Hemi-Pelvectomy
- iii. Bilateral / Multiple Limb Loss
- iv. Congenital Limb Deficiencies: Tibial/ Fibular Deficiency, Radial deficiency, Proximal Femoral Focal Deficiency

C.2.7.6 Neurologic Disorders

- i. Stroke
- ii. Guillain-Barre syndrome
- iii. Amyotrophic Lateral Sclerosis
- iv. Hereditary motor and sensory disorders
- v. Multiple sclerosis
- vi. Peripheral nerve injuries
- vii. Peripheral neuropathies
- viii. Poliomyelitis and Post-Polio Syndrome
- ix. Spinal cord injuries
- x. Brachial Plexus injury
- xi. Transverse myelitis
- xii. Traumatic brain injuries
- xiii. Charcot-Marie-Tooth
- xiv. Spasticity general

C.2.7.7 Pediatric Neurologic Conditions

- i. Cerebral Palsy
- ii. Spina Bifida
- iii. Spinal Cord / Traumatic Brain Injuries
- iv. Cranial Disproportional
- v. Spinal Muscular Atrophy

C.2.7.8 Pediatric Musculoskeletal disorders

- i. Hip disorders: Developmental Dysplasia of the Hip
- ii. Arthrogryposis Multiplex Congenita
- iii. Osteogenesis Imperfecta
- iv. Muscular Dystrophies

C.2.7.9 Neuropathic Disorders

- Buerger's Disease ii
- Diabetes Mellitus iii
- Vascular Disease

C.2.7.10 Other Disorders

- i. Osteogenic Sarcoma
- ii. Metastatic Disease of the Bone
- iii. Complex Regional Pain Syndrome
- iv. Genetic Syndromes: Marfan Syndrome, Down's Syndrome, Ehlers-Danlos Syndrome

C.2.7.11 Skin Conditions

C.3.0 Formulation of a Treatment Plan

The graduate must demonstrate the ability to integrate and apply foundational knowledge and patient information to perform and direct potential orthotic or prosthetic management, including the following:

- C.3.1 Synthesize and integrate foundational knowledge and best available evidence with findings from the assessment of a patient.
- C.3.2 Analyze impairments, functional limitations, and patient goals to identify health status and determine the related biomechanical objectives.
 - C.3.2.1 Evaluate findings to determine the patient-specific healthcare need and/or biomechanical need.
 - C.3.2.2 Identify and explain abnormal biomechanics to determine a necessary intervention and apply principles of biomechanics to predict long-term outcomes.
 - C.3.2.3 Identify specific and measurable orthotic / prosthetic treatment goals.
 - C.3.2.4 Identify and appropriately recommend orthotic and prosthetic care conducive to age, functional status, cognitive function, and physiological changes, across the continuum of care from pediatric to geriatric.
- C.3.3 Formulate Device Design:
 - C.3.3.1 Formulate a patient-specific orthotic/prosthetic treatment plan that integrates physical evaluation findings, activity/participation needs, environmental/personal factors and patient concerns or goals.
 - C.3.3.2 Select components, materials, suspension and fabrication methods to match patient specific needs.
- C.3.4 Communicate treatment plan:
 - C.3.4.1 Communicate with the health care team to corroborate findings, and ensure orthotic / prosthetic treatment goals fit into the overall rehabilitation/medical plan.
 - C.3.4.2 Communicate with the patient and caregiver to develop the recommended treatment plan and disclose the potential risks and benefits of O&P care.

C.4.0 Implementation of a Treatment Plan

The graduate must demonstrate the necessary clinical skills to provide comprehensive orthotic / prosthetic care enhancing the patient's quality of life, including the following:

- C.4.1 Clinical Decisions and Interactions: Demonstrate procedures and processes to implement prosthetic/orthotic interventions by using appropriate techniques, tools, equipment, and safety considerations in clinical contexts.
 - C.4.1.1 Perform proper patient handling techniques and initial gait and mobility training.
 - i. Patient transfers
 - ii. Sit-to-stand, Stand-to-sit
 - iii. Gait belt application and use
 - iv. Bed mobility

Locate and indicate anatomical structures needed to capture proper alignment.

C.4.1.2 Capture two-dimensional anatomical structures needed to represent shape and alignment.

C.4.1.3 Capture three-dimensional anatomical shapes utilizing plaster of Paris and synthetic materials and computer aided technology to create a positive model.

C.4.1.4 Modify/rectify three-dimensional models to achieve biomechanical principles and address the defined treatment goals.

C.4.1.5 Identify EMG signals and place electrodes to operate electric components.

C.4.1.6 Compare body-powered and external-powered orthotic/prosthetic control principles.

C.4.1.7 Apply principles of biomechanics, anatomy, and physiology to evaluate the fit, alignment, and function of orthoses / prostheses making adjustments as necessary to optimize patient outcomes. Evaluation includes analysis of the following criteria:

- i. Anatomical congruency
- ii. Appropriate trim lines
- iii. Appropriate static and dynamic alignment
- iv. Suspension and control
- v. Volume management
- vi. Patient-specific activity/function to include corrective and/or accommodative objectives
- vii. Prescription criteria
- viii. Suitable patient preferences and limitations

C.4.1.8 Assess the quality and structural stability of the orthosis or prosthesis to conform to patient-specific needs.

C.4.1.9 Provide effective, culturally appropriate education to patients, family members and caregivers on the care, use and maintenance of the orthosis or prosthesis, including skin care information and wearing schedules.

C.4.2 Technical Decisions and Competencies: Apply material and mechanical principles to explain, design, and fabricate patient-specific devices. Implementation of mechanical concepts should address the safety, alignment, and durability needs of the user.

C.4.2.1 Distinguish characteristics of thermoformable plastics, thermoset resins, foams, metals and other materials used in orthotics and prosthetics.

C.4.2.2 Perform thermoforming procedures.

C.4.2.3 Perform lamination procedures.

C.4.2.4 Contour metals to include squaring of joints.

C.4.2.5 Align prosthesis and orthosis to initial specifications of the patient and components.

C.4.2.6 Establish mechanical / anatomical joint alignment.

C.4.2.7 Demonstrate ability to finish materials: Thermoplastic, Metals, Foams, and

Composites.

C.4.2.8 Demonstrate proper use of fasteners: Rivets, Adhesives, and Straps.

C.4.3 Safety in Clinical and Technical Contexts: Comply with personal and environmental safety practices through proper use and care of tools and equipment including the following:

- i. Hand tools
- ii. Measurement tools
- iii. Machine tools
- iv. Personal protective equipment (e.g., gloves, dustmasks, eye protection)
- v. Safety Data Sheets (SDS) for commonly used adhesives, solvents and materials
- vi. Proper Flammable materials handling and storage
- vii. Safe evacuation principles for staff and patients in case of emergency
- viii. General equipment: ovens, compressors, vacuum pumps, fume and dust extraction apparatus

C.5.0 Follow-Up

The graduate must demonstrate the ability to develop and implement an effective follow-up plan to assure optimal fit and function of the orthosis or prosthesis and monitor the outcome of the treatment plan; including the following:

C.5.1 Describe continuing care and periodic re-evaluation of the patient and intervention to assure, maintain, and document comprehensive orthotic / prosthetic care.

C.5.2 Create and evaluate a long-term follow-up plan for comprehensive orthotic / prosthetic care based upon patient initial evaluation results.

C.5.3 Describe wear & care, prognosis, volume fluctuations, and anticipated changes with age, growth, or time in order to assure understanding among patients and caregivers and their role in comprehensive orthotic / prosthetic care.

C.6.0 Practice Management

The graduate must demonstrate the ability to identify and observe policies and procedures relating to practice management, including the following:

C.6.1 Demonstrate knowledge of billing and coding procedures.

C.6.2 Describe Federal, state, and third party regulations associated with orthotic / prosthetic care.

C.6.3 Document in accordance with professional standards and in compliance with legal and payer policies. Document all interactions with the patient and caregiver

C.6.4 Describe how orthotists / prosthetists comply with ethical and legal responsibilities related to comprehensive orthotic and prosthetic care.

C.6.5 Describe potential roles that the clinician plays within O&P business hierarchy.

C.6.6 Use terminology specific to Medicare, with an understanding of L-coding history and usage, ICD 10 codes, state regulations and third-party payer reimbursements.

C.7.0 Professional/ Personal Development

The graduate must be able to articulate the importance of personal and professional development in relation to each of the following areas:

C.7.1 The importance of lifelong learning with the goal of maintaining knowledge and skills at the most current level.

C.7.2 The role of community service, patient advocacy and outreach.

C.7.3 The areas for participation in service to and development of the profession.

C.7.4 Self-awareness, and identification of the mechanisms to maintain personal physical and mental well-being.

C.7.5 Professional empathy, responsibility, and ethics.

C.7.6 The international orthotic / prosthetic community and patient populations.

C.8.0 Experience in a Patient Care Setting

Practice expectations are a description of behaviors, skills, or knowledge that defines the expected performance of the Orthotist and Prosthetist upon entry into clinical practice. These include the graduate's ability to participate in and demonstrate entry-level competencies learned in didactic and clinical curriculum within the following domains. The curriculum plan includes clinical education experiences that provide exposure to:

C.8.1 A comprehensive evaluation of a patient, including functional baseline assessment, to understand the patient's orthotic / prosthetic needs, goals, and expectations.

C.8.2 Analysis and integration of information from a patient assessment to create a comprehensive orthotic / prosthetic treatment care plan to appropriately meet the needs, goals, and expectations of the patient.

C.8.3 Fabrication, fitting, and maintenance of orthoses / prostheses in order to provide comprehensive orthotic / prosthetic care.

C.8.4 Continued patient care through periodic evaluation to ensure, maintain, and document optimal fit and function of the orthoses / prostheses.

C.8.5 Interprofessional communication among practitioners, patients, caregivers and others encountered in the clinical environment.

C.8.6 Business management functions within the orthotic/prosthetic practice.

C.9.0 Orthotic / Prosthetic Clinical Practices

The required content and interventions below integrate many of the competencies described in Section C.2 - C.4. and they must be included in the O&P curriculum. They reflect the demands of the patient population and the profession. At a minimum, each graduate must demonstrate competence in the following essential orthotic/prosthetic clinical practices.

C.9.1 Comprehension and Evaluation: Graduates will demonstrate understanding of foundational knowledge in prescription recommendation, orthotic and prosthetic design, material selection, biomechanical principles, fitting, evaluation, adjustment and patient specific outcomes for the following:

- i. LOWER LIMB ORTHOSES
 1. Footwear
 - a. Orthopedic, diabetic and custom shoes
 - b. Shoe modifications
 2. Footorthoses(FO)
 3. UCBL foot orthoses
 4. Supramalleolar orthoses (SMO)
 5. Ankle-foot orthoses(AFO)
 - a. Posterior leaf spring
 - b. Solid ankle
 - c.Floor reaction
 - d. Articulated
 - e. Composite
 - f. Ankle gauntlet
 - g. Metal and leather
 6. Knee orthoses (KO)
 7. Knee-ankle-foot orthoses (KAFO) including stance control
 8. Hip orthoses (HO)
 9. Hip-knee-ankle-foot orthoses (HKAFO) including reciprocating gait orthosis (RGO)
 10. Neuromuscular electrical simulation (NMES)/Functional electrical stimulation (FES)
 11. Components
 - a. Biomechanical control strategies: stops, assists, stance control
 - b. Ankle joints
 - c.Knee joints
 - d. Hip joints
- ii. UPPER LIMB ORTHOSES
 1. Finger orthoses (FO)
 2. Thermoplastic and metal hand orthoses (HO)
 3. Thermoplastic and metal wrist-hand orthoses (WHO)
 4. Additions and outriggers to HO's and WHO's
 5. Prehension orthoses (WHFO)
 6. Elbow orthoses (EO)
 7. Elbow-wrist-hand orthoses (EWHO)
 8. Shoulder-elbow-wrist hand orthoses (SEWHO)

iii. SPINAL and CRANIAL ORTHOSES

1. Cranial remodeling orthoses
2. Facial fracture & facial burn orthoses
3. Cervical orthoses (CO)
4. Cervico-thoracic orthoses (CTO) including HALO
5. Cervico-thoraco-lumbo-sacral orthoses (CTL SO)
6. Thoraco-lumbo-sacral orthoses (TLSO)
7. Lumbo-sacral orthoses (LSO)
8. Scoliosis orthotic management, including pad placement, angle measurement, blueprinting, curve management, wearing schedule, orthotic design variants

iv. UPPER LIMB PROSTHESES

1. Socket designs for all amputation levels including partial hand, wrist disarticulation, transradial, elbow disarticulation, transhumeral, shoulder disarticulation, and interscapular thoracic, bilateral, and congenital limb differences. Socket design variations: flexible inner liner with rigid frame, including silicone
2. Suspension methods and variants for upper limb prostheses
 - a. Anatomical suspension
 - b. Roll-on Liners (locking pin, vacuum, and custom liner options)
 - c. Harness variations for different levels
3. Components (i.e., passive, body-powered, electric, and activity specific)
 - a. Passive, mechanical, and powered digits
 - b. Terminal devices (voluntary opening, voluntary closing, external powered and activity specific)
 - c. Wrists
 - d. Elbows
 - e. Shoulders
 - f. Gloves and coverings (OTS, Semicustom, High Definition Silicone Restorations)
 - g. Edoskeletal and exoskeletal
4. Control principles
 - a. Body-powered control systems and strategies
 - b. External-powered control systems and strategies
 - Surface EMG Electrodes evaluation and troubleshooting (powered terminal device, wrist and elbow functions)
 - Alternate input devices

v. LOWER LIMB PROSTHESES

1. Socket designs for all lower limb amputation levels and congenital limb differences including transpelvic and translumbar levels. Socket design variations: flexible inner liner with rigid frame, joint and corset, femoral deficiency and rotationplasty
2. Suspension methods for lower limb prostheses
 - a. Anatomical suspension
 - b. Roll-on liners (suction, lanyard, and locking pin)
 - A. Waist belt
 - d. Hip joint and pelvic band
 - e. Suction, vacuum
 - f. Silesian belt
3. Components
 - a. Feet
 - b. Ankles
 - c. Knees

- d. Hips
- e. Shock, torque absorbers, rotators
- f. Cosmetic/protective covers
- 4. Post-operative prostheses
- 5. Compression therapy (shrinker or elastic wrap)

C.9.2 Prefabricated and Custom Fit: Graduates will demonstrate entry-level competence and experience with the evaluation, recommendation, implementation, material selection, application of biomechanical principles, fitting, adjustment, troubleshooting, and identification of patient specific outcomes for the following custom-fit orthoses:

- i. LOWER LIMB ORTHOSES
 - 1. Knee Orthosis (KO)
 - 2. Hip Orthosis (HO)
 - 3. Ankle Foot Orthosis (AFO)- Thermoplastic and composite
 - 4. Fracture Orthosis
- ii. SPINAL ORTHOSES
 - 1. Cervical Orthosis (CO)
 - 2. Cervical Thoracic Orthosis (CTO)
 - 3. HALO and ring (simulation)
 - 4. Rigid anterior control thoraco-lumbo-sacral orthosis (TLSO)
 - 5. Flexible and rigid thoraco-lumbo-sacral orthosis (TLSO)
 - 6. Flexible and rigid lumbo-sacral (LSO)
- iii. UPPER LIMB ORTHOSES
 - 1. Prehension orthosis
 - 2. Shoulder-elbow-wrist-hand orthosis (SEWHO)
 - 3. Fracture orthosis

C.9.3 Custom Fabricate and Fit: Each graduate of the program will demonstrate skill and experience in the evaluation, recommendation, implementation, material selection, application of biomechanical principles, fitting, adjustment, troubleshooting and evaluation of patient outcomes with the following custom-fabricated orthoses and prostheses:

- i. LOWER LIMB ORTHOSES
 - 1. Foot Orthoses (FO) -a minimum of 2 orthoses and must include:
 - a. Functional or accommodative FO
 - b. UCBL (Incl. Carlson Modification)
 - 2. Shoe Modification - Rocker
 - 3. Thermoplastic AFO-minimum of 2 orthoses and must include:
 - a. Non-articulating
 - b. Articulating
 - c. Capture a minimum of 3 three-dimensional anatomical shapes utilizing plaster of paris and/or synthetic material
 - 4. Thermoplastic KAFO-minimum of 1 orthosis and must include:
 - a. Articulated knee joints

- ii. SPINAL ORTHOSES-minimum of 1 orthosis:
 - 1. LSO or TLSO (Thermoplastic)
- iii. UPPER LIMB ORTHOSES-minimum of 1 orthosis:
 - 1. WHO or WHFO
- iv. UPPER LIMB PROSTHESES
 - 1. Transradial or wrist disarticulation prostheses-minimum of 2 prostheses and must include:
 - a. Anatomical suspension
 - b. Figure-8 harness suspension
 - 2. Transhumeral prosthesis or prosthetic simulation-minimum of 1 prosthesis with:
 - a. Locking elbow joints and dual-control harness
- v. LOWER LIMB PROSTHESES
 - 1. Transtibial prostheses-minimum of 2 prostheses and must include:
 - a. Patellar tendon bearing socket
 - b. Total surface bearing socket
 - c. Capture a minimum of 3 three-dimensional anatomical shapes utilizing plaster of Paris and/or synthetic material.
 - 2. Transfemoral prosthesis-minimum completion of 2 prostheses and must include:
 - a. Ischial containment socket
 - b. Dynamic alignment with one non-fluid knee and one fluid-controlled knee

D.1.0 Research/ Capstone Project

The graduate must demonstrate the ability to independently perform critical review of scientific literature and apply best available evidence to salient problems or issues in orthotics & prosthetics. The graduate must also have knowledge of the research process and be able to fulfill the role of an orthotist / prosthetist as a research consumer. Each graduate is expected to develop an original capstone project or significantly contribute to ongoing clinical or academic research as a part of his or her curriculum sequence. The student also must have opportunities to, participate and demonstrate fundamental skills in the following tasks:

- D.1.1** Clearly define a question or problem
- D.1.2** Efficiently and effectively search for relevant evidence
- D.1.3** Critically appraise relevant literature
- D.1.4** Interpret and form recommendations to apply best available evidence to salient problems or issues in orthotics & prosthetics
- D.1.5** Synthesize evidence for project
- D.1.6** Determine methods to evaluate the effectiveness of interventions and interpret results
- D.1.7** Describe the role of orthotist-prosthetist in the consumption, critique, collaboration, and conduction of research

*Adopted by the American Academy of Orthotist and Prosthetist, American Board for Certification, prosthetics and Pedorthics, National Commission on Orthotics and Prosthetics Education and commission on Accreditation of Allied Health Education Programs
Retrieved 08/01/2022 from <https://ncope.org/index.php/home-page-v2/academic-programs/institution-educator-info/caahep-standards-request-for-accreditation-services>*

Appendix D

The Code of Professional Responsibility and Rules & Procedures

[The Code of Professional Responsibility and Rules & Procedures \(abcop.org\)](http://abcop.org)

I. General Responsibilities

C1.1 — Professional Conduct

The practice of orthotics, prosthetics and pedorthics (Profession) is a recognized allied health profession. The ABC Credential Holder assumes specific responsibilities to physicians and other appropriately licensed healthcare prescribers, patients, the public, colleagues and to the Profession itself. These responsibilities must be discharged with honor and integrity to assure public confidence in the Profession. For the purposes of this Code of Professional Responsibility (Code), the term ABC Credential Holder shall mean any person, facility or organization which may apply or has applied for, and has been awarded any of the certifications, accreditations or recognitions offered by the American Board for Certification in Orthotics, Prosthetics and Pedorthics, Inc. (ABC), including residents registered with the National Commission on Orthotic and Prosthetic Education (NCOPE). As used herein, Committee refers to the Professional Ethics Committee of the ABC.

The Profession exists for the primary purpose of assisting patients in maintaining functional lives. The ABC Credential Holder shall be responsible for making the greatest possible effort to satisfy the patient's orthotic, prosthetic and/or pedorthic requirements. The manner in which the patient is served is an essential factor relating to the appropriate ethical professional conduct. Members of the Profession are responsible for maintaining and promoting ethical practice including, without limitation, reporting unethical practices, in accordance with this Code. This Code, adopted by ABC, shall be binding upon all ABC Credentials Holders.

C1.2 — Ethics, Custom and the Law

Unethical conduct may involve violations of customs and usages of the Profession as well as actions that violate federal, state and/or local laws and/or regulations. Failure to conform to this Code, including conduct that violates moral principles, customs and practices of the Profession, laws or regulations, may be subject to disciplinary action in accordance with the Rules and Procedures Regarding the Code of Professional Responsibility (Rules). Disciplinary action depends on the particular circumstances involved and, without limitation, how the conduct in question reflects upon the dignity and integrity of the Profession.

The Committee will take appropriate action, if any, consistent with the Rules. Each ABC Credential Holder has a civic and professional obligation to report to the appropriate governmental body any and all evidence that may come to his/her/its attention involving the alleged criminal conduct of any ABC Credential Holder relating to the practice of orthotics, prosthetics and/or pedorthics.

C1.3 — Disclosure of Other Agency Actions

Each ABC Credential Holder must promptly, fully and accurately disclose to ABC any and all investigations, findings and actions by any federal, state or local: (i) orthotic, prosthetic or pedorthic (OP&P) related agency or body responsible for licensing or oversight of health or OP&P related licenses or certifications; (ii) government agency; (iii) quasi-government agency; and/or (iv) licensing board (individually an Agency and collectively Agencies). The ABC Credential Holder's disclosure requirement includes investigations by federal, state or private payers. The ABC Credential Holder's disclosure requirement does not include general billing audits that are not specific to an ABC Credential Holder. Each ABC Credential Holder must make such disclosure to ABC within 30 days from learning of the commencement of action by any Agency. Each ABC Credential Holder must promptly and fully cooperate with ABC, the Committee and the Agencies.

Acknowledgement Statement

I have read the O&P Student Handbook. I understand that I must abide by the policies set herein. I certify that I have had ample time to discuss the Handbook and its contents with the Director and I fully understand its contents.

With this knowledge, I accept the policies outlined herein as a condition of my enrollment in the graduate program.

Student's Name (printed)

Student's Signature

Date

Program Participant Agreement Statement

As a current student in the Department of Orthotics and Prosthetics at Drexel University, I attest that I have read all pages of the Eligibility Requirements and Essential Functions documents, that I understand its content, that I am committed to the policies expressed therein, and that I may be eligible for dismissal from the program, via faculty vote, should I fail to demonstrate all of the Essential Functions despite reasonable accommodations and reasonable levels of support from the academic and clinical faculty.

Student's Signature

Date

Faculty's Signature

Date

The Oath to Professionalism in the Health Sciences

With full deliberation I freely and solemnly pledge that:

I will practice the art and science of my chosen profession faithfully and conscientiously, and to the fullest scope of my competence.

I will uphold and honorably promote by example and action the highest standards, ethics and ideals of my chosen profession.

I will provide professional care for those who seek my services, with concern, with compassion and with due regard for their human rights and dignity and I will promote justice in the health care system by the elimination of discrimination.

I will place the treatment of those who seek my care above personal gain and strive to see that none shall lack for proper care with patient welfare my utmost concern.

I will hold as privileged and inviolable all information entrusted to me in confidence by those who seek my services and promote the principles of their individual autonomy.

I will advise my patients and clients fully and honestly of all which may serve to restore, maintain or enhance their health and well-being.

I will strive continuously to broaden my knowledge and skills to deliver all new and efficacious means to enhance my services.

I will share information cordially and unselfishly with colleagues and other professionals for the benefit of patients and the advancement of human knowledge and welfare.

I will do my utmost to serve my community, my country and humankind.

I hereby commit myself to be steadfast in the performance of this, my solemn oath and obligation.