

**Samuel Merritt College**  
**Doctor of Physical Therapy Program**  
**ADA Guidelines**

## **Definitions**

Title III of the Americans with Disabilities Act provides comprehensive civil right protections for “qualified individuals with disabilities.” An “individual with a disability” is a person who:

- has a physical or mental impairment that substantially limits a “major life activity,” or
- has a record of such an impairment, or
- is regarded as having such an impairment.

The ADA Handbook published by the Equal Employment Opportunity Commission and the Department of Justice states: “examples of physical or mental impairments include, but are not limited to, such contagious and noncontagious diseases and conditions as orthopedic, visual, speech, and hearing impairments; cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, mental retardation, emotional illness, specific learning disabilities, HIV disease (whether symptomatic or asymptomatic), tuberculosis, drug addiction, and alcoholism. Homosexuality and bisexuality are not physical or mental impairments under the ADA.”

“Major life activities” include functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working. Individuals who currently engage in the illegal use of drugs are not protected by the ADA when an action is taken on the basis of their current illegal use of drugs.

“Qualified” individuals are defined as follows:

- A “qualified” individual with a disability is one who meets the essential eligibility requirements for the program or activity offered.
- The “essential eligibility requirements” will depend on the type of service or activity involved.

Based on the philosophy of the Department of Physical Therapy at Samuel Merritt College, the intent of the professional program is to educate competent generalist physical therapists who can evaluate, manage, and treat the general population of acute and rehabilitation clients in current health care settings. Enrolled students are expected to complete the academic and clinical requirements of the professional DPT program. The purpose of this document is to delineate the cognitive, affective and psychomotor skills deemed essential to completion of this program and to perform as a competent generalist physical therapist.

*If a student cannot demonstrate the following skills and abilities, it is the responsibility of the student to request an appropriate accommodation. The College will provide reasonable accommodation as long as it does not fundamentally alter the nature of the program offered and does not impose an undue hardship such as those that cause a significant expense, difficulty or are unduly disruptive to the educational process.*

## **Cognitive Learning Skills**

The student must demonstrate the ability to:

1. Receive, interpret, remember, reproduce and use information in the cognitive, psychomotor, and affective domains of learning to solve problems, evaluate work, and generate new ways of processing or categorizing similar information as listed in course objectives.
2. Perform a physical therapy evaluation of a patient’s posture and movement including analysis of physiological, biomechanical, behavioral, and environmental factors in a timely manner, consistent with the acceptable norms of clinical settings.
3. Use evaluation data to formulate and execute a plan of physical therapy management in a timely manner, appropriate to the problems identified consistent with the acceptable norms of clinical settings.
4. Reassess and revise plans as needed for effective and efficient management of physical therapy problems, in a timely manner and consistent with the acceptable norms of clinical settings.

## **Psychomotor Skills**

The student must demonstrate the following skills:

1. Sitting: Maintain upright posture.
2. Standing: Maintain upright posture.

3. Locomotion ability to:
  - a. Get to lecture, lab and clinical locations, and move within rooms as needed for changing groups, partners and work stations.
  - b. Physically maneuver in required clinical settings, to accomplish assigned tasks.
4. Manual tasks:
  - a. Maneuver another person's body parts to effectively perform evaluation techniques.
  - b. Manipulate common tools used for screening tests of the cranial nerves, sensation, range of motion, blood pressure, e.g., cotton balls, safety pins, goniometers, Q-tips, aesthesiometer, sphygmomanometer.
  - c. Safely and effectively guide, facilitate, inhibit, and resist movement and motor patterns through physical facilitation and inhibition techniques (including ability to give time urgent verbal feedback).
  - d. Manipulate another person's body in transfers, gait, positioning, exercise, and mobilization techniques.
  - e. Manipulate evaluation and treatment equipment and safely and accurately apply to clients.
  - f. Manipulate bolsters, pillows, plinths, mats, gait assistive devices, and other supports or chairs to aid in positioning, moving, or treating a patient effectively.
  - g. Competently perform and supervise cardiopulmonary resuscitation (C. P. R.) using guidelines issued by the American Heart Association or the American Red Cross.
5. Small motor/hand skills:
  - a. Legibly record/document evaluations, patient care notes, referrals, etc. in standard medical charts in hospital/clinical settings in a timely manner and consistent with the acceptable norms of clinical settings.
  - b. Legibly record thoughts for written assignments and tests.
  - c. Sense changes in an individual's muscle tone, skin quality, joint play, kinesthesia, and temperature to gather accurate objective evaluative information in a timely manner and sense that individual's response to environmental changes and treatment.
  - d. Safely apply and adjust therapeutic modalities.
  - e. Safely and effectively position hands and apply mobilization techniques.
  - f. Use a telephone.
6. Visual acuity to:
  - a. Receive visual information from clients, e.g., movement, posture, body mechanics, and gait necessary for comparison to normal standards for purposes of evaluation of movement dysfunctions.
  - b. Receive visual information from treatment environment, e.g., dials on modalities and monitors, assistive devices, furniture, flooring, structures, etc.
7. Communication:
  - a. Effectively communicate to other students, teachers, patients, peers, staff and personnel to ask questions, explain conditions and procedures, teach home programs, and for safety in a timely manner and within the acceptable norms of academic and clinical settings.
  - b. Receive and interpret written communications in both academic and clinical settings in a timely manner.
  - c. Receive and send verbal communication in life threatening situations in a timely manner within the acceptable norms of clinical settings.
8. Self care:
  - a. Maintain general good health and self care in order not to jeopardize the health and safety of self and individuals with whom one interacts in the academic and clinical settings.
  - b. Arrange transportation and living accommodations for/during off campus clinical assignments to foster timely reporting to the classroom and clinical center.

### **Affective learning skills**

The student must be able to:

1. Demonstrate appropriate affective behaviors and mental attitudes in order not to jeopardize the emotional, physical, mental, and behavioral safety of clients and other individuals with whom one interacts in the academic and clinical settings and to be in compliance with the ethical standards of the American Physical Therapy Association.
2. Sustain the mental and emotional rigors of a demanding educational program in physical therapy that includes academic and clinical components that occur within set time constraints, and often concurrently.
3. Acknowledge and respect individual values and opinions in order to foster harmonious working relationships with colleagues, peers, and patients/clients.