Weekly expectations/guidelines for PT 7289: Acute Care

**Week 1**

Orientation to the department
- Staff introductions
- Policies and procedures
- Tour and location of equipment
- Goals and expectations
- Documentation requirements and templates

Patient care
- Begin with some shadowing and begin assisting CI as able
- Begin chart review with CI leading
- Complete parts of the examination, treatment, documentation
- Assist with treatment and examinations
- Acclimate to the environment and needs of individual unit(s)

**Week 2**

Patient care
- Increase participation and decrease shadowing
- Complete full chart review with moderate guidance
- Perform line identification with minimal guidance
- Assist CI with room and equipment set up
- Complete exam on simple patients with assistance
- Assist with exam on complex patients
- Know healthcare team members
- Begin assisting with d/c planning

**Week 3**

Patient care
- Complete full chart review with minimal guidance
- Complete exam on simple and moderately complex patients with minimal assistance
- Assist with exam on complex patients
- Become more independent with line management
- Continue assisting with d/c planning
- Carry at least 25% caseload

**Weeks 4-5**

Patient care
- Complete chart review with minimal/no guidance
- Complete documentation with minimal to no guidance
- Assist with exam on complex patients, beginning to take more responsibility
- Complete room set up with minimal assistance from CI (unless delegated to him/her)
Continue d/c planning with less guidance
- Carryout treatment on moderately complex patients with minimal guidance
- Begin communicating with healthcare team directly (OT, RN, MD, etc)

**Weeks 6-7**

**Patient care**
- Independent with chart reviews
- ~Independent with documentation, unless very complex patient
- Independent with simple patient exam/treatment/discharge planning
- Min guidance for complex patient exam/treatment/discharge planning
- Increase independence for room set up and line management
- Begin communicating directly with d/c planners (social work, case manager)
- Begin delegating tasks as appropriate to PTA, techs (CI if none available)

**Weeks 8-10**

**Patient care**
- Carry at least a 50-60% caseload
- Only need minimal A/guidance with complex patients, others are nearly Independent
- Nearly Independent with room set up and line management
- Continue working on team communication
- Continue working on delegation
- Continue working on discharge planning

**Weekly expectations/guidelines for PT 7289: Skilled nursing facility/Assisted living facility/Rehab**

**Week 1**

**Orientation to the department**
- Staff introductions
- Policies and procedures
- Tour and location of equipment
- Goals and expectations
- Documentation requirements and templates

**Patient care**
- Begin with some shadowing
- Complete parts of the examination, treatment, documentation
- Assist with treatment and examinations
- Acclimate to the environment and needs of individual unit(s)
Week 2
Patient care
- Increase participation
- Complete exam on simple patients with assistance
- Assist with exam on complex patients with assistance
- Know healthcare team members
- Begin assisting with d/c planning

Weeks 3-4
Patient care
- Complete full chart review with minimal guidance
- Complete exam on simple and moderately complex patients with minimal assistance
- Assist with exam and treatment of complex patients
- Continue assisting with d/c planning
- Carry at least 25% caseload

Weeks 5-6
Patient care
- Complete chart review with minimal/no guidance
- Complete documentation with minimal to no guidance
- Assist with exam on complex patients, beginning to take more responsibility
- Advance treatment techniques with goals and function in mind
- Continue d/c planning with less guidance
- Carryout treatment on moderately complex patients with minimal guidance
- Begin communicating with healthcare team directly (OT, RN, MD, etc)

Weeks 7-8
Patient care
- Independent with chart reviews
- ~Independent with documentation, unless very complex patient
- Independent with simple patient exam/treatment/discharge planning
- Min guidance for complex patient exam/treatment/discharge planning
- Work on creativity and variety with treatment sessions
- Begin communicating directly with d/c planners (social work, case manager)
- Begin delegating tasks as appropriate to PTA, techs (CI if none available)
- By now, you should have taken a patient from eval -> discharge

Weeks 9-10
Patient care
- Carry at least a 50-60% caseload
- Only need minimal A/guidance with complex patients, others are nearly Independent
- Continue working on team communication
- Continue working on delegation