



Clinical Observation Requirements for PTA Program Applicants

The purpose of the clinical observation experience is to:

- 1) Familiarize the applicant with the scope of the Physical Therapy profession.
- 2) Allow a licensed clinician (PT or PTA) to provide feedback regarding the applicant.

Observation Hour Requirements

Applicants must complete twenty (20) hours of volunteer or work experience in a physical therapy setting, distributed as follows:

- Outpatient setting: A minimum of 7 hours is required.
 - *Outpatient settings* include facilities where the patient lives at home but come in for therapy treatments. It may or may not be associated with a hospital.
- Inpatient setting: A minimum of 7 hours is required.
 - *Inpatient settings* include facilities where patients stay overnight, such as hospitals, nursing homes, or inpatient rehabilitation facilities.
 - Of these 7 hours, at least 3 hours must be in acute care* (hospital).
 - The remaining 4 inpatient hours may be completed in the acute care setting, a skilled nursing facility, or an inpatient rehabilitation facility.
- Flexible setting: The remaining 6 hours may be completed in any physical therapy setting of your choice.

Arranging Clinical Observation

- It is the applicant's responsibility to arrange clinical observation hours. The school does not coordinate placements.
- Applicants with questions about this requirement should contact the PTA department via email dawn.smathers@neo.edu.
- Many facilities require an orientation or human resource clearance before observation. Please plan accordingly.

Professionalism During Observation

The supervising PT or PTA will assess the applicant's professionalism based on the following:

- ✓ Did you arrive as scheduled and complete the agreed-upon hours?
- ✓ Was your appearance professional and appropriate for the facility?
- ✓ Did you demonstrate a positive attitude and willingness to learn?
- ✓ Were you attentive and engaged during the job shadowing experience?

Additional Requirements

- **Observation Reflection Essay:** Applicants must submit an essay about their job shadowing experience. See the Application Essay Form for details.
- **Clinical Evaluation Form:**
 - Provide page 2 of this form to the supervising therapist at the beginning of your observation.
 - Supply an envelope for the supervising therapist to seal & sign with this form.



Volunteer/ Job Shadowing Verification Form for PTA Students

Please print in ink or type.

Name of Student Applicant: _____

Name of Physical Therapist/ Physical Therapist Assistant: _____

Facility Name: _____

Indicate the type of setting & number of observation hours completed:

Inpatient/ acute care (minimum of 7 required): _____

Outpatient (minimum of 7 required): _____

Please indicate the specific inpatient setting.

Acute Skilled Inpatient Rehab

Other Setting: _____

Please circle the appropriate descriptor based on your observations. You may choose to add additional comments.

1) Did the applicant arrive as scheduled and stay for the previously agreed amount of time?

YES NO Comments: _____

2) Was the applicant's appearance professional & appropriate for the facility?

YES NO Comments: _____

3) Did the applicant maintain a positive attitude & willingness to learn?

YES NO Comments: _____

4) Was the applicant attentive and engaged during the experience?

YES NO Comments: _____

5) Did the applicant provide you with an envelope to seal & sign with this form?

YES NO Comments: _____

Supervisor's signature: _____