

**JSCC PHYSICAL THERAPIST ASSISTANT PROGRAM
STUDENT CLINICAL SKILLS SELF-ASSESSMENT FORM**

Name: _____ Date: _____

Address: _____

Describe your previous clinical experience in health care within the last five (5) years.

<u>Facility</u>	<u>Position</u>	<u>Dates</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Describe your learning style.

List your goals for this clinical experience/affiliation.

	Not Yet Instructed	Instructed, No clinical Practice	Maximum Assistance to Perform	Need Supervision; Occasional Assistance	Minimum Supervision; No Assistance	Need Occasional Supervision Only	Can Function Independently
DATA COLLECTION/ASSESSMENT SKILLS							
Medical Terminology							
Plan of Care/Goals Review							
Interview Skills							
Anthropometric – body dimensions							
Arousal, Attention, Cognition							
Sensation Testing/Integumentary Integrity							
Manual Muscle Testing/Tone Assessment							
Reflex Assessment							
Pain Assessment							
Posture Assessment							
Goniometric/ROM Assessment							
Vital Signs							
Special Tests:							
PROCEDURAL INTERVENTIONS							
Safety							
Body Mechanics							
Positioning							
Bed Mobility							
Transfers: bed to chair chair to bed toilet							
Wheelchair Mobility							
Equipment Application and Adjustment							
Gait Training: all assistive devices							
Functional/ADL Training							

STUDENT NAME: _____

INTERVENTIONS (cont.)	Not Yet Instructed	Instructed, No clinical Practice	Maximum Assistance to Perform	Need Supervision; Occasional Assistance	Minimum Supervision; No Assistance	Need Occasional Supervision Only	Can Function Independently
Environmental Barriers Modification							
Sterile/Aseptic Technique							
Cryotherapy – cold packs, ice massage							
Whirlpool							
Infrared							
Ultraviolet							
Diathermy							
Electrical Stimulation: IFC HVPC NMES TENS IONTO							
Ultrasound incl Phonophoresis							
Intermittent Compression							
Traction: Lumbar Cervical							
Soft Tissue Mobilization/Massage							
ROM Exercises							
Resistive Exercises both mech and manual							
Stretching Exercises, passive and other							
Endurance/Aerobic Capacity Exercises							
Coordination Exercises							
Balance Activities							
Relaxation Exercises							
Cardiac Rehab							
Pulmonary Rehab incl Breathing Strategies							
Amputee Care incl Stump Wrapping							

STUDENT NAME: _____

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INTERVENTIONS (cont.)							
Neurological Treatment Techniques: NDT PNF Brunnstrom Other facilitation techniques							
Integumentary Skills/Wound Care							
Dressings							
Bandaging							
Modifying and progressing treatments							
OTHER CLINICAL EXPECTATIONS							
Communication: Verbal Non-verbal							
Patient/Family Teaching incl HEPs							
Behaviors (accountability, compassion, caring, altruism, cultural competence, integrity, duty, social responsibility)							
Documentation							
Confidentiality/HIPAA							
Career Development/Self-directed Learning							
Time Management/Organization							
Health Promotion							
Use of Healthcare Literature							
Adherence to Ethical and Legal Standards							
Reimbursement Practices							