



**COMMUNITY REHAB**  
**PHYSICAL THERAPY**

# Community Rehab Physical Therapy

## Student Affiliation Program/Policies

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**Community Rehab Physical Therapy  
Student Affiliation Handbook**

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# **Community Rehab Physical Therapy Student Affiliation Handbook**

## **Clinical Information**

### **Orientation:**

Orientation to all incoming students will be provided on the first day of the clinical rotation. The orientation to the clinic is performed by the clinical instructor and the staff at the facility. Your clinical objectives and goals will be discussed at this time.

### **Supervision:**

Each student is assigned a clinical instructor. The clinical instructor will be responsible for the student's supervision and evaluation of the student's performance. There may also be other clinical instructors involved during your clinical including physical therapy assistants.

### **Student Evaluations:**

Daily discussions will be held between the student and clinical instructor. An evaluation of the student's performance will be done midway through the affiliation and again at the end of the rotation. The student will also be asked to evaluate the facility at the final evaluation.

### **Treatments:**

Treatments of patient will begin the first day of the affiliation. The clinical instructor will assist the student in obtaining pertinent information on each patient from the charts and review with the student what has already been done with each of the patients. Once the student becomes comfortable with the patient, the student will then begin treatments with the patients. Most of the scheduling is done by the office manager and staff, initially, but by mid term of the affiliation the student should be assisting with the scheduling. Initial evaluations, daily notes, progress notes and discharge notes are all performed on a computer documentation program. Progress notes to the physicians will be printed and given to the patients before their doctor visits or faxed to the doctor's office.

This affiliation will emphasize developing the ability of the student to do a complete therapy program: evaluation, setting up treatment plans, setting goals, discharge planning, patient education and the necessary documentation.

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## **Documentation**

Documentation is computer based, so orientation to documentation will occur on site.

## **Inservice**

Students may be asked to give an in-service to the staff at their Community Rehab location. The subject of the inservice will be decided between the CI and the student. The in-service will be presented at the end of the clinical rotation. (In-services and assignments will be dependent upon your clinical instructor).

## **Learning Experiences Available:**

The student will have the ability to experience alternate educational opportunities. You will communicate with your clinical instructor to arrange what opportunities you are interested in doing during your clinical rotation. Please speak with your CI within the first week of your affiliation to establish a plan.

The opportunities include:

- Observing orthopedic surgical procedures
- Observing and assisting occupational therapist who are certified hand therapist
- Observing and assisting other physical therapists
- Assisting with Aquatic Therapy
- Observing Functional Capacity Evaluations
- Attending Community Rehab lecture series presentations
- Other areas of interest may also be discussed with your CI.

## **Surgical Observation Guidelines**

Remind your CI to call the day before the surgery to make sure the surgery is still scheduled. The student should eat something before you observe the surgery. The student should always wear the scrubs provided by the hospital, covers for the shoes, hair cap, and a mask. It is also appropriate for the students to write a thank you note to the physician and if there is a contact person involved after you have the chance to observe the surgery.

## **Reporting Illness and Absences**

All students need to call their clinical instructors if they are going to be absent from sickness or others reasons.

# **Community Rehab Physical Therapy Student Affiliation Handbook**

## **Personal Appearance**

Students should wear their nametags from their school at all times. The student should be presentable at all times and the following items are not allowed: clogs, sandals, jeans, T-shirts, or sweatpants.

## **Meals**

The students will be given the same lunch break as their CI. You are free to bring your own lunch or go out for lunch.

## **Housing**

At this time, Community Rehab does not provide housing. But we will help assist the student in finding housing with potential families.

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## **Community Rehab Information**

### **WELCOME....**

In today's complex world of managed health care environment, Community Rehab offers a simple solution with personal attention and one-on-one service that helps to place the service they provide in line with the goals and expectations of its clients. It is the goal of Community Rehab to provide the highest level of care possible in a pleasant and relaxed setting for the patients who are receiving physical therapy.

With facilities in Omaha, Elkhorn, Fremont, LaVista, Plattsmouth, Millard, Bellevue, Valley and Sioux City, Community Rehab Physical Therapy and Sports Medicine offers out-patient physical therapy services including orthopedic and musculoskeletal rehabilitation, pre- and post-operative rehab, sports rehab, industrial rehab, work conditioning, geriatric rehab, and fitness evaluations and programs.

### **ABOUT US....**

Founded by Phil Davidson and Mary Theiler in January 1998, Community Rehab Physical Therapy and Sports Medicine offers a personalized approach to physical therapy and rehabilitation.

Our goal at Community Rehab is total patient and physician satisfaction. As a private physical therapy provider, our focus is on helping our patients' recovery from their injury in a timely and efficient manner.

At Community Rehab, our objectives for physical therapy include:

- Increase and maintain muscle strength and endurance
- Restore and increase range of motion in joints
- Increase coordination and function
- Minimize pain
- Decrease spasm and spasticity
- Minimize swelling
- Promote healing of soft tissue lesions
- Prevent contractures and deformities
- Correct gait deviations
- Correct postural deviations
- Patient and family education

# **Community Rehab Physical Therapy Student Affiliation Handbook Services**

## **Services...**

Our professional staff is experienced with all types of musculoskeletal conditions. In addition to general physical therapy and rehabilitation, we have developed specific programs including.

## **Recreational and Athletic Injuries**

While most recreational athletes recover quickly following injury, some require physical therapy to assist recovery. Our goal is to safely return each individual to the previous level of function, as well as providing them with the tools necessary to prevent a condition from becoming a chronic problem. Patients are often involved in the treatment of the following conditions: ACL and/or PCL injury and surgical reconstruction, chronic ankle sprain, low back strain, hamstring tightness or strain, tendonitis, plantar fasciitis and other general muscular strains.

## **Aquatic Therapy**

Community Rehab Physical Therapy & Sports Medicine now offers aquatic therapy as a part of its' line of rehabilitation services. Aquatic therapy is a beneficial part of a comprehensive rehabilitation program. Water reduces the effect of gravity and often allows an accelerated rate of recovery. The resistance that water provides enhances the effectiveness and efficiency of aquatic-based exercise.

The staff at Community Rehab will utilize aquatic therapy to promote basic concepts of rehabilitation such as range of motion, flexibility, strength and endurance. The buoyancy of the water allows for exercises designed to improve ambulation ability and balance issues.

## **Traumatic Conditions**

After an incident of trauma such as motor vehicle accidents, traumatic fractures, shoulder separations, etc., many individuals need some type of rehabilitative care to maximize function and prevent future complications. Goals for therapy following trauma include decreasing swelling and inflammation of joints, decreasing muscle spasm and promoting healing of soft tissue lesions, while preventing scar tissue restrictions and restoring functional mobility, strength and endurance.

## **Postural Deviations**

Many adults demonstrate significant postural deviations, which may contribute to current musculoskeletal pain and disorders as well as those that are discovered years later in life. Our therapists can evaluate an individual's posture and provide a specific stretching and strengthening program to reduce pain and prevent further postural deterioration. Physical therapy can often assist in minimizing the affects of the following conditions; excessive kyphosis, forward head, excessive lumbar lordosis, rounded shoulders, headaches as a result of poor posture, scoliosis and torticollis.

## **General Orthopedics**

# **Community Rehab Physical Therapy**

## **Student Affiliation Handbook**

Some of the patients we treat suffer from a variety of musculoskeletal disorders that compromise their ability to perform daily activities. Often a flexibility and strengthening program utilizing modalities will allow these individuals to function at a higher level. Conditions often treated with physical therapy include: spinal dysfunction, arthritic conditions, patello-femoral dysfunction and post-operative rehabilitation.

### General Pediatrics

Some children suffer from a variety of musculoskeletal disorders, which compromise their ability to perform daily activities. Often a flexibility and strengthening program utilizing modalities will allow children to function at a higher level. Conditions often treated with physical therapy include: JRA, Osgood-Schlatters, patellar tendonitis, patello-femoral tracking problems and congenital hip displasia.

### Fitness Programs

Fitness evaluations and programs for those desiring to improve their fitness level are also available. The goal of the fitness program is to assist each participant to achieve and/or maintain a healthy level of fitness in order to maximize functional abilities and aid in the prevention of injuries.

### Joint Rehab

Patients who undergo total joint replacement have unique needs regarding physical therapy. Education is as important as exercise in dealing with rehabilitation following total joint replacement. The physical therapists at Community Rehab work closely with the patient and their family to ensure clear understanding of the goals and expectations throughout the rehabilitation process. Attention to detail during the rehabilitation process helps to ensure the success of a total joint replacement at Community Rehab.

### Work Injuries

We work with all types of injuries sustained while at work. We emphasize getting the patient back to work quickly and safely. Our focus is on treatment, prevention, and education. We maintain open communication with the patient, physician, employer, and the case manager allowing for a quick recovery and a safe return to duty.

### Balance Screens

Poor balance is a major cause of injury in people over the age of 55. By identifying and treating balance and strength deficits, life threatening injuries can be prevented. We offer balance screens to assess your balance and functional strength. A brief history and exam can help prevent other more serious problems that can occur from fall, now and in the future.

### Other Programs

A customized rehabilitation program can be developed based upon the specific needs of each patient. Community Rehab uses a background of extensive knowledge to formulate rehabilitation strategies that

# **Community Rehab Physical Therapy Student Affiliation Handbook**

are appropriate for the individual diagnosis and recommendations from the physician. Some of these include:

- Athletic Training
- Balance Deficits Posture
- Post -Operative Rehabilitation
- Aquatic Instruction
- TNS/NMS Rental
- Industrial Injuries
- Sports Rehabilitation Programs - including protocols for ACL, meniscal, and patellofemoral conditions of the knee and scapular stabilization, rotator cuff, labrial injury and throwing programs for shoulder pathology.

## **Community Rehab Inc. Student Affiliation Checklists**

### **Front office**

<b>Task</b>	<b>Performed</b>
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## Community Rehab Physical Therapy Student Affiliation Handbook

Phone use	
Copier use	
Fax use	
Scheduling Procedure	
Patient Registration	
MVA liability procedure	
Work Comp Procedure	
Medicare Procedure	
Filing Procedure	
Billing Procedure	
Co-Pay Collection procedure	
Billing Office Communication	
Fitness program Procedure	
Review HIPAA Regulations	
Safety procedures	

### Clinical Procedure

<b>Task</b>	<b>Performed</b>
Clinic Cleaning Procedure	
Hot Pack Application	
Cold Pack Application	
Ultrasound Performance	
Estim Application	
TENS Unit	
NMES Unit	
Iontophoresis Application	
Cervical Traction	
Pelvic Traction	
Gym Equipment	
Documentation Procedures	

# Community Rehab Physical Therapy Student Affiliation Handbook

**Please print and fill these last 2 pages out and return to your CI on your first day. (use black ink)**

Name\_\_\_\_\_

Address\_\_\_\_\_

Phone numbers\_\_\_\_\_

Emergency Contact Name\_\_\_\_\_

Emergency Contact Number\_\_\_\_\_

**Community Rehab  
CONFIDENTIALITY STATEMENT**

Every provider of medical services and equipment has a legal and ethical responsibility to safeguard the privacy of all patients and to protect the confidentiality of their health information. The provider must also assure that its employees, independent contractors, and business associates keep protected health information confidential. I understand that in the course of my employment or other affiliation with Community Rehab, I may come into possession of confidential information. I also understand that my personal access codes used to access computer systems are also an integral aspect of this confidential information.

By signing this document, I agree to the following:

1. I agree not to disclose or discuss any patient, member, human resources, and/or management information with others, including friends and family, who do not have a need-to-know.
2. I agree not to access any information, or utilize equipment, other than what is required to do my job, even if I don't tell anyone else.
3. I agree not to discuss patient, human resources, or administrative information where others can overhear the conversation, e.g. in hallways, elevators, public transportation, at restaurants or social events. It is not acceptable to discuss clinical information in public areas even if a members name is not used. This can raise doubts with patients and other providers about our respect for patient's privacy.
4. I agree not to make inquiries for other personnel who do not have proper authority.
5. I agree not to willingly inform another person of my computer password or knowingly use another person's computer password instead of my own for any reason. I understand that passwords must not be written down where others can find and/or use them. I also understand that I must not log on and allow another person to use a computer under my password.
6. I agree not to make unauthorized transmissions, inquiries, modifications, or purging of data in my employer's computer system. Such unauthorized transmissions include, but are not limited to, removing and/or transferring data from the computer systems to unauthorized locations, e.g. home.
7. I agree to log off prior to leaving any computer or terminal unattended.
8. I agree to keep papers with protected health information in a secure place, to promptly remove them from unsecured locations such as copy machines and conference rooms, and to place them in the appropriate locked bin for shredding when they are no longer needed.
9. I understand that accessing data must not occur simply to satisfy a curiosity, and it is unacceptable to look up data, e.g. a friend's birthday, address or phone number. Information may only be viewed when required for my job.
10. If I am assigned a key to the facilities, I agree to (1) refrain from making copies of the key; (2) refrain from allowing any person not employed in this office to use the key; (3) immediately turn in the key upon termination of my employment; and (4) to immediately report any loss of my key to the Privacy Officer and/or my supervisor.
11. If I am the last employee to leave the facility, I understand that it is my responsibility to insure that all access doors are locked.

I acknowledge that I have received training on the HIPAA Privacy Rule and this entity's privacy policies. I also acknowledge that I have been given a copy of these policies.

**DATED** this \_\_\_\_ day of \_\_\_\_\_, 200\_.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Witness