Course Change Form

Date of Request: October 5, 2009
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Course Addition

1. Course Title: Observation and Measurement
   Prefix & Num: PTA 2210

2. Pre-requisite(s): Acceptance into PTA Program
   Co-requisite(s): PTA 1020 - 200, 210, 2110, 2200, 2211, 2400
   Instructor permission required: No
   Credits: 2.00
   Class Hours/Week: *LEC: 2.00 *LBC w/CR: 0.00 *LNC w/NO CR: 0.00
   Clinical: 0.00 Practicum: 0.00 Independent Study: 0.00

3. Semester to be Implemented: Spring, 2010
   Day ☒ Extended Day ☐ Grade type Regular

4. Cost Code: HEA118
   Lab Fee: $0.00
   Additional Fees: $0.00
   Potential WLF: 2.00

5. Is this course designed for a specific group? Yes
   Who? Accepted PTA Program students
   Why?

6. Catalog Description: ☒ Now in Print, or ☐ Proposed Below:
   A discussion of the bases for recognizing movement and other dysfunctions and the tools used for data collection and problem solving in physical therapy are reviewed. These include goniometry, manual muscle testing, posture, vital signs, sensation, gait and balance, etc. Students are instructed in the role and scope of the PTA in regard to these measures. Patient progress and accurate reporting to the physical therapist are emphasized. 2 lecture hours per week.

7. Course justification (attach sheets if needed):
   A part of the approved curriculum for the limited-entry Physical Therapist Assistant Program.

8. Are library resources adequate to support this change? Yes
   If not, how are those resources to be acquired?

9. Are technical and other resources available? Yes
   If not, how are those resources to be acquired?

10. Relationship to the curriculum: Would the course fill a G.E. requirement? No
    If yes, which G.E. area?
    If it does not fill a G.E. requirement, would the course offer elective credit? Yes

11. Transferability of the course: List comparable courses at other colleges and universities:

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<th>G.E.</th>
<th>Elective</th>
<th>Course Title</th>
<th>Credits</th>
<th>Prefix &amp; Num.</th>
<th>Institution</th>
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<td>Data Collection for the PTA</td>
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<td>PTA 2350</td>
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Approval Signatures:

Department Chair: [Signature] Date: 10/7/09

Associate Dean/Dean: [Signature] Date: 10/7/09

Curriculum Chair: [Signature] Date: 

Academic VP: [Signature] Date: