

1. What are the goals of the Temple Orthopaedic PT Residency?

The goal of the Temple Orthopaedic PT Residency is to provide an educational experience that enables the resident gain clinical expertise in orthopaedic physical therapy. Residents will be able to assume leadership responsibilities including clinical specialist positions and serving as clinical instructors. Residents will be prepared to sit for the Orthopaedic Specialty Examination (OCS) at the completion of the residency.

2. What is the philosophy of the residency program?

Using a distance-based model, the residency is designed for the independent, self-motivated learner. The curriculum consists of a variety of teaching methods to enhance the resident's abilities. The residency does not adhere to one particular school of thought and evidence informed clinical decision making is the foundation of the curriculum.

3. Please describe the Residency Curriculum.

The residency consists of the two didactic courses and the two mentorship courses. The didactic courses are split into upper and lower quadrant and cover all musculoskeletal regions within that quadrant. Each didactic course is 15 weeks long and consists of a hybrid of on-line and in-person instruction. During each week of the course students will read articles and watch on-line audio enhanced lectures. Threaded discussion questions will be posed by the course faculty pertaining to each week's material. The residents respond to these questions in addition to commenting on each other's responses. Faculty will interact in these discussions to create a 'virtual' classroom. In addition to the threaded discussions there are also on-line examinations consisting of multiple choice questions related to the current week's material. These questions are written in a format similar to the Orthopaedic Specialty Examination.

During each of the lower and upper quadrant courses students will travel to the Temple campus for 3 weekend courses (Saturday and Sunday ~ 9AM-5PM each day.) The weekend courses focus on psychomotor skill acquisition in examination, exercise, and manual therapy. In addition advanced clinical decision making is emphasized through the use of patient case studies. During one weekend of each of the two didactic courses residents will prepare and give a 20 minute presentation on a topic related to the current weekend content.

The two mentorship courses are each 6 months in length. During this time residents receive both in-person and virtual mentoring. 150 hours of 1:1 mentoring treating patients with a clinician who is an Orthopaedic Certified Specialist (OCS) is the minimum requirement for the live mentoring. In addition, the resident will receive

virtual mentoring with faculty members through the use of virtual rounds. Virtual rounds will take place every other week in a virtual classroom using web conferencing. Within the virtual classroom, residents and faculty communicate via live audio and video feeds and are able to share presentations on the virtual blackboard. Residents will also collect standardized outcome measures for their patients monthly and submit these to the residency faculty. Faculty and the resident will discuss the resident's current clinical performance as shown by their outcome measures and develop plan for resident clinical performance improvement. Finally each resident will be required to submit a research abstract to national PT conference. Most residents prepare a case report and poster presentation of the case at CSM or the Annual AAOMPT Conference.

4. How do you ensure that your residents will be prepared to take the OCS exam upon completion of the program?

The Residency curriculum is based on the Orthopaedic Physical Therapy Description of Specialty Practice (DSP). The didactic content of the Residency including readings and lecture materials are selected using this document as a framework. It is expected that individuals completing the residency will have the most current knowledge based on the best available evidence. Additionally residents will have opportunities to answer multiple choice questions in a format similar to the OCS exam throughout the residency.

5. Is your program credentialed by the APTA?

The residency program received status as an official APTA credentialed residency program process in June 2012.

6. Would it be possible for me to contact one of your previous or current residents?

Yes. Contact the residency director (Dr. Bill Egan at bill.egan@temple.edu) and he will be able to provide you the contact information of a current or former resident.

7. What is the cost of tuition?

The residency currently consists of 24 academic units with the base cost of \$350 per unit. Tuition payment is spread out on a semester basis. For example, residents completing the residency over 14 months would pay for 12 units at the beginning of the first semester and 12 units at the beginning of the second semester. Temple does not currently offer any financial assistance or scholarships. Most residents receive some sort of tuition reimbursement from their employer, which they apply towards the residency tuition.

8. How does the 1:1 clinical mentorship arrange work?

Residents are responsible for securing a clinical mentor(s) who is willing and able to mentor the resident for the minimum of 150 1:1 hours. The residency director and faculty can assist the resident in locating clinical mentors. Most residents travel to their mentor's clinical site to receive the mentoring and treat patients together on the mentor's schedule. Depending on the resident's or mentor's schedule, 1:1 mentorship can take place several hours per week throughout the residency or can be accomplished in less frequent but longer blocks.

8. What are the admission requirements for the program?

Residents must be a US licensed physical therapist. Residents will have graduated from a CAPTE accredited entry-level physical therapy program. *Exceptions to this rule may be made for foreign trained physical therapists who have equivalent academic preparedness and are licensed as PT's in the US.* Residents are required to be working at least 20 hours per week seeing patients in an outpatient physical therapy setting specializing in treating patients with musculoskeletal disorders. The program highly encourages new and recent graduates to apply.

9. How are residents selected for the Temple Residency Program?

Residents are admitted to the program two times per year during either the Fall or Spring semester. Residents will submit their application through the RF-PTCAS system. Potential residents will be contacted by the program director in order to conduct a phone interview. The number of residents selected for each cohort is based on the resources and availability of the residency faculty. It is recommended that potential residents submit their application materials as early as possible to ensure a spot in the residency.

10. How many hours per week of work can the resident expect while enrolled in the residency?

Enrollment in the residency is a major commitment. Most residents continue to work full time clinical work while enrolled in the residency. Individual workload will vary slightly but residents can expect to spend on average 4-6 hours per week while enrolled in the two didactic courses in addition to the weekend lab courses. Individuals enrolled in the mentorship courses are required to complete at least 20 hours per week of patient care and an average 3 hours per week of 1:1 mentoring. Residents should expect additional time to collect and compile their outcome measures, participate in virtual rounds, and complete their research abstract.

11. What are the options for enrollment into the residency?

Residents can begin in either the fall (late August) or the spring (mid-January) semesters. Residents can complete the residency in 14 months or 26 months. Residents

who chose the 26-month option enroll in the didactic courses during the first year and the mentorship courses during the second year. Residents who chose the 14-month option are enrolled in the didactic and mentorship courses at the same time.