

**SACRED HEART UNIVERSITY
GRADUATE PROGRAM IN OCCUPATIONAL THERAPY**

**OT 577 LEVEL I FIELDWORK
Late Spring/Summer 2025**

COURSE SYLLABUS

Credit Hours: 1
Course Instructor: Nicole Peloso Smith, MS, OTR/L
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Office E-mail: peloso-n@sacredheart.edu
Office Hours: By appointment
Class Format: Simucases/Debriefs, Seminar and fieldwork experiences.
Class Time: Thursdays 8-11 for simulation debrief and seminars and additionally...
1. Simucase: Online simulations
2. In person experiences
3. In-person simulations at CHE, July 10, 17, July 31
(subject to updates)

COURSE DESCRIPTION

The purpose of Level I Fieldwork is for the student to integrate academic learning with clinical practice. It is designed to enhance clinical reasoning processes by integrating knowledge from previous educational and work experiences with current courses and weekly fieldwork experiences. Fieldwork experiences in combination with PBL, lab, and seminar will focus on reflective processes, therapeutic relationships, ethical practice, and other professional issues for working adult populations with a variety of needs for occupational therapy services. Self-direction and class participation are essential aspects of this course.

All students will engage in simulated fieldwork experiences, debriefings, seminars, assigned in-person experiences, and in person simulations at CHE as assigned by the course instructor. Please refer to the Topical Outline for exact dates and topics.

Fieldwork experiences will be determined by the course instructor, the Academic Fieldwork Coordinator. Fieldwork experiences focuses on developing students' observational skills, understanding the roles of the professional teams, developing relationships with adult and geriatric populations, assessing needs of those populations and practicing professional behaviors. Fieldwork experiences are aligned with academic content.

RELATIONSHIP TO OCCUPATIONAL THERAPY PRACTICE AND AOTA VISION 2025

“As an inclusive profession, occupational therapy maximizes health, well-being and quality of life for all people, populations and communities through effective solutions that facilitate participation in everyday living.” Fieldwork experiences are designed to promote clinical reasoning and reflective practice, transmit the values and beliefs that enable ethical practice, and develop professionalism and competence.

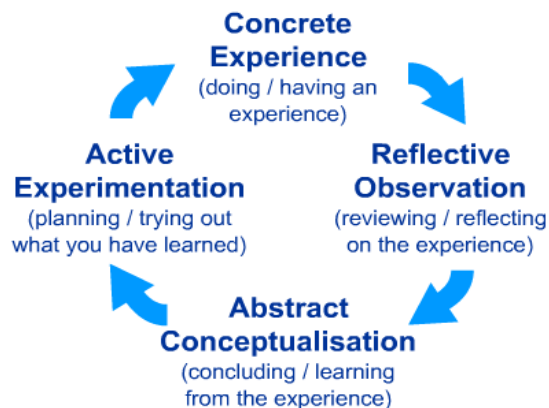
RELATIONSHIP TO CURRICULUM DESIGN

Level I Fieldwork supports the scaffolding of knowledge and critical-thinking as it requires students to integrate what they learn in PBL, seminar, and lab and apply that knowledge to fieldwork experiences. The expectation is that the student be given the opportunity to interact with community based and health professionals and clients to better understand the therapeutic process.

CONCEPTUAL MODEL FOR THIS COURSE

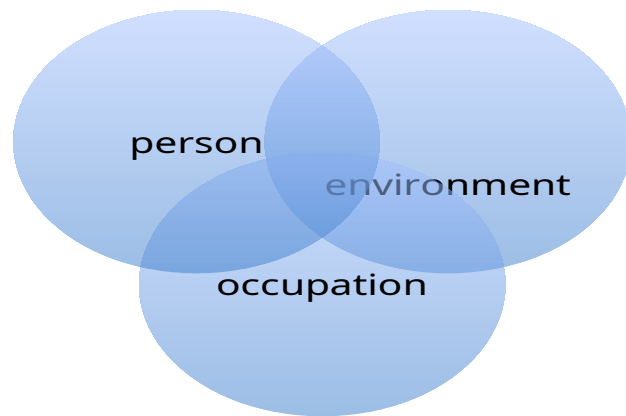
The framework for this course is the experiential learning theory (ELT) (Kolb, 1984) and the person, environment, and occupation model (Law et al, 1996). Please read the attached two articles to familiarize yourself with the framework.

Experiential Learning Theory



Copied from: Kolb, D., Boyatzis, R., Mainemelis, C. (2000) Experiential Learning Theory: Previous Research and New Directions. In R. J. Sternberg and L. F. Zhang (Eds.), Perspectives on cognitive, learning, and thinking styles. NJ: Lawrence Erlbaum, 2000. For this syllabus and educational purposes only.

Person, Environment, and Occupation Model



Copied from: Law, M., cooper, B., Strong, S., Stewart, D., Rigby, P., & Letts, L. (1996). The Person-Environment-Occupation Model: A transactive approach to occupational performance. *Canadian Journal of Occupational Therapy*, 63,(1), 9-23 for this syllabus and educational purposes only.

MY THOUGHTS ABOUT KNOWLEDGE AND LEARNING

Acquiring knowledge is a dynamic process that is layered and supported by a solid foundation. Building a foundation of knowledge in a particular area takes resiliency, persistence, active engagement, and a willingness to accept that proficiency takes time and hard work. I believe that students learn best in a safe environment and a student's ability to learn is dependent on perceived self-efficacy to succeed, and whether the environment is conducive to success. It is my commitment to each student to provide a positive, supportive learning environment with the perceived intention that all students will succeed in this course. I will be diligent in creating fieldwork experiences are conducive for student learning. In the event that a student does not feel they are supported, it is the student's responsibility to discuss the concerns with me. I commit to advocate for each student's learning and will do what is necessary to ensure a productive learning environment.

WHAT YOU CAN EXPECT FROM ME

I am committed to providing all students with the resources they need to successfully engage, interpret, and analyze experiences observed and practiced during the fieldwork experiences. I will provide a safe environment that encourages open discussion about fieldwork experiences. I will provide the resources to assist students in bridging the gap between academia and practical experience. I will start seminar on time every day and will make every effort to finish on time. I will give you 100% of myself when we are in seminar and will be physically, emotionally, cognitively, and spiritually present.

Assignments are posted on Blackboard at the beginning of the semester. I will make every effort to adhere to the course topical outline but unforeseen circumstances may

arise that may require schedule flexibility. I will make every effort to post assignment grades within two weeks of receiving them.

WHAT I EXPECT OF YOU

I expect all students to be committed to learning and be prepared to discuss and integrate fieldwork experiences. I expect all students to come to class on time and to be 100% present during the class sessions. I expect all students to try as hard as they can, but I do not expect perfection. I understand that students learn in different ways and expect students to communicate with us if our teaching style or the fieldwork environment is not conducive to your learning style. I will make every effort to modify my style within reason in order to ensure success. I expect every student to represent the University and the Program in a professional manner at all times.

TEACHING LEARNING METHODS

Students will participate in a variety of in-person and simulation experiences; as well as seminars and debriefings. Online classroom discussions, assignments and activities related to fieldwork experiences will reflect on the evaluation and intervention of adult clients as they engage in areas of occupational performance.

PULLING IT ALL TOGETHER

Each program in OT must meet the same Accreditation Council for Occupational Therapy Education (ACOTE) standards. To review each standard, please refer the ACOTE website at <https://acoteonline.org/accreditation-explained/standards/>

Our learning objectives are linked to the standards as well as our program objectives, our program mission and vision, and our overall curricular design. The course learning objectives and the program objectives are linked to the ACOTE standards that are addressed in this course, as well as how we plan to meet and measure the learning objectives for this course.

LEARNING OBJECTIVES: Occupational therapists need to understand anatomy and movement in order to understand how to adapt or modify occupations for humans who may have difficulty being successful in occupations of their choice, or for those who may need refinement to improve occupational proficiency and wellbeing.

One of our program's philosophical statements reads: "Throughout the course of life, we engage in four inter-related dimensions of existence; DOING, BEING, BECOMING, and BELONGING (Wilcock, 2014). DOING reflects who we are and shapes who we become. Through DOING with others, we can have the opportunity to BELONG. BELONGING supports our resilience and participation in life. The search for truth, meaning, and spirituality differentiates humans from other creatures and facilitates capacity for adapting to adversity."

The student will actively participate to accomplish and meet the objectives to:

Learning Objective	Program Objective	ACOTE standard (2018)	ACOTE Standard	Learning Experiences	How will the Learning
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			(2023)		Objective be Measured?
Demonstrate emerging professional, written, and oral communication skills in interactive learning with peers, building relationships with clients, and participating in professional practice arenas	Exhibit critical thinking, clinical reasoning, use of evidence, and competence in skills requisite for entry-level, holistic application of occupational therapy process.	B.4.23. <i>Effective Communication</i> Identify occupational needs through effective communication with patients, families, communities, and members of the interprofessional team in a responsive and responsible manner that supports a team approach to the promotion of health and wellness.	B.3.21. <i>Effective Communication</i> Demonstrate effective communication with clients, care partners, communities, and members of the intraprofessional and interprofessional teams in a responsive and responsible manner that supports a team approach to promote client outcomes	Classroom discussions; simulations & written assignments	90% or more on simulations, assignments
Conduct professional observations and prepare written documentation that reflects knowledge of occupational performance in relation to environment/context, development expectations, and challenges to occupational performance for various individuals	Exhibit critical thinking, clinical reasoning, use of evidence, and competence in skills requisite for entry-level, holistic application of occupational therapy process.	B.4.2. <i>Clinical Reasoning</i> Demonstrate clinical reasoning to evaluate, analyze, diagnose, and provide occupation based interventions to address client factors, performance patterns, and performance skills.	B.3.2. <i>Professional Reasoning</i> Demonstrate professional reasoning to evaluate, analyze, diagnose, and provide occupation-based interventions that: • Address client factors, performance patterns, and performance skills. • Focus on creation, promotion, establishment, restoration, maintenance,	Class discussion; FW experience, Discussion boards	Discussion Board on psychosocial factors affecting occupational performance, FW assignment checklist, final FW evaluation

			modification, and prevention.		
Demonstrate cultural/ethical awareness and respect for diversity when discussing, interpreting, reporting, and engaging with others in classroom and professional practice environments	Respond to unmet occupational and educational needs in underserved communities through leadership, advocacy, and service.	B.7.1. <i>Ethical Decision Making</i> Demonstrate knowledge of the AOTA Occupational Therapy Code of Ethics and AOTA Standards of Practice and use them as a guide for ethical decision making in professional interactions, client interventions, employment settings, and when confronted with personal and organizational ethical conflicts.	B.2.10. <i>Ethics and Professional Interactions</i> Demonstrate knowledge of the current published American Occupational Therapy Association (AOTA) Occupational Therapy Code of Ethics and AOTA Standards of Practice and use them as a guide for ethical decision making in professional interactions, client interventions, employment settings, and when confronted with personal and organizational ethical conflicts.	Classroom discussion; FW experience	Final FW evaluation
Participate in assigned level I FW experiences and adhere to University's, the OT Program's, and the settings' policies and procedures, including safety requirements	Practice in a safe, legal and ethical manner.	B.3.7. <i>Safety of Self and Others</i> Demonstrate sound judgment in regard to safety of self and others and adhere to safety regulations throughout the occupational therapy process as appropriate to the setting and scope of practice. This	B.2.8. <i>Safety of Self and Others</i> Demonstrate sound judgment regarding safety of self and others and adhere to safety regulations throughout the occupational therapy process as appropriate to the setting and scope of practice. This	Classroom discussion; FW experience	Final FW evaluation

		must include the ability to assess and monitor vital signs (e.g., blood pressure, heart rate, respiratory status, and temperature) to ensure that the client is stable for intervention.	must include the ability to assess and monitor vital signs (e.g., blood pressure, heart rate, respiratory status, and temperature) to ensure that the client is stable for intervention.		
Participate and interpret at least screening or assessment tool adhering to appropriate procedures and protocols	Practice in a safe, legal and ethical manner.	B.4.4. <i>Standardized and Nonstandardized Screening and Assessment Tools</i> Evaluate client(s)' occupational performance, including occupational profile, by analyzing and selecting standardized and non-standardized screenings and assessment tools to determine the need for occupational therapy intervention(s). Assessment methods must take into consideration cultural and contextual factors of the client. Interpret evaluation findings of occupational performance and participation deficits to develop occupation-based	B.3.3 Standardized and Nonstandardized Screening and Assessment Tools Evaluate client(s)' occupational performance, including occupational profile, by analyzing and selecting standardized and non-standardized screenings and assessment tools to determine the need for occupational therapy intervention(s). Assessment methods must take into consideration cultural and contextual factors of the client. Identify and appropriately delegate components of the evaluation to an occupational therapy assistant.	FW experience	Simulations, including MVPT

		intervention plans and strategies. Intervention plans and strategies must be client centered, culturally relevant, reflective of current occupational therapy practice, and based on available evidence. B.4.5. <i>Application of Assessment Tools and Interpretation of Results</i> Select and apply assessment tools, considering client needs, and cultural and contextual factors. Administer selected standardized and nonstandardized assessments using appropriate procedures and protocols. Interpret the results based on psychometric properties of tests considering factors that might bias assessment results (e.g., culture and disability status related to the person and context).	Demonstrate intraprofessional collaboration to establish and document an occupational therapy assistant's competence regarding screening and assessment tools. B.3.4 <i>Application of Assessment Tools and Interpretation of Results</i> Interpret evaluation findings including: • Occupational performance and participation deficits. • Results based on psychometric properties of tests considering factors that might bias assessment results (e.g., culture and disability status related to the person and context). • Criterion-referenced and norm referenced standardized test		
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			scores on an understanding of sampling, normative data, standard and criterion scores, reliability, and validity.		
Develop occupation- based therapeutic interventions appropriate to specific client(s) and setting.	Exhibit critical thinking, clinical reasoning, use of evidence, and competence in skills requisite for entry-level, holistic application of occupational therapy process.	B.4.10 <i>Provide Interventions and Procedures</i> Recommend and provide direct interventions and procedures to persons, groups, and populations to enhance safety, health and wellness, and performance in occupations. This must include the ability to select and deliver occupations and activities, preparatory methods and tasks (including therapeutic exercise), education and training, and advocacy.	B.3.6. <i>Provide Interventions and Procedures</i> Recommend and provide direct interventions and procedures to persons, groups, or populations to enhance safety, health and wellness, chronic condition management, and performance in occupations. This must include the ability to collaborate with the occupational therapy assistant related to interventions and selecting and delivering occupations and activities: • Occupations as a therapeutic intervention • Interventions to support occupations including therapeutic exercise • Interventions to	FW experience Checklist items	Simulations

			support well-being (e.g., complementary health and integrative health) • Interventions to support self-advocacy related to the person, groups, or populations. • Virtual interventions		
Develop skills in self-assessment and reflection in order to support personal and professional development and professional behaviors	Exhibit critical thinking and clinical reasoning skills requisite for entry-level occupational therapy practice and ongoing continued competency.	B.4.1 <i>Therapeutic Use of Self</i> Demonstrate therapeutic use of self, including one's personality, insights, perceptions, and judgments, as part of the therapeutic process in both individual and group interaction.	B.3.1 <i>Therapeutic Use of Self</i> Demonstrate therapeutic use of self, including one's personality, insights, perceptions, and judgments, as part of the therapeutic process in both individual and group interaction.	Classroom discussion; FW experience	SEFWE
Develop skills in patient mobility	Practice in a safe, legal and ethical manner.	B.4.13. <i>Functional Mobility</i> Provide recommendations and training in techniques to enhance functional mobility, including physical transfers, wheelchair management, and mobility devices.	B.3.12. <i>Functional Mobility</i> Provide recommendations and training in techniques to enhance functional mobility, including physical transfers, wheelchair management, and mobility devices.	FW experience	Simulations
Conduct professional observations and prepare written	Exhibit critical thinking and clinical reasoning skills	B.4.3. <i>Occupation Based Interventions</i> Utilize clinical	DELETED	Seminar and FW experience	SEFWE, simulations

documentation that reflects knowledge of occupational performance in relation to environment/context, development expectations, and challenges to occupational performance for various individuals	requisite for entry-level occupational therapy practice and ongoing continued competency	reasoning to facilitate occupation-based interventions that address client factors. This must include interventions focused on promotion, compensation, adaptation, and prevention. B.4.29. <i>Reimbursement Systems and Documentation</i> Demonstrate knowledge of various reimbursement systems and funding mechanisms (e.g., federal, state, third party, private payer), appeals mechanisms, treatment/diagnosis codes (e.g., CPT®, ICD, DSM® codes), and coding and documentation requirements that affect consumers and the practice of occupational therapy. Documentation must effectively communicate the need and rationale for occupational therapy services.	B.4.3. <i>Documentation of Services</i> Demonstrate knowledge of various reimbursement systems and funding mechanisms (e.g., federal, state, local, third party, private payer), appeals mechanisms, treatment/diagnosis codes (e.g., CPT®, ICD, DSM® codes), and durable medical equipment coding (e.g., HCPCS) and documentation requirements (e.g., equipment justifications) that affect consumers and the practice of occupational therapy. Documentation		
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			must effectively communicate the need and rationale for occupational therapy services.		
Understand and adhere to the AOTA <i>Code of Ethics</i> and begin to formulate one's own ethical practice	Practice in a safe, legal and ethical manner.	B.7.1 <i>Ethical Decision Making</i> Demonstrate knowledge of the American Occupational Therapy Association (OTA) Occupational Therapy Code of Ethics and OTA Standards of Practice and use them as a guide for ethical decision making in professional interactions, client interventions, employment settings, and when confronted with personal and organizational ethical conflicts.	DELETED- Added to B.2.3. <i>Ethics and Professional Interactions</i> Apply, analyze, and evaluate the interaction of occupation and activity, including areas of occupation, performance skills, performance patterns, context, and client factors.	Class room discussion; FW experience	Simulations

THE PROGRAM WILL MEET THE FOLLOWING ACOTE STANDARDS FOR LEVEL I FIELDWORK (2018 standards)

C.1.1. Ensure that the fieldwork program reflects the sequence and scope of content in the curriculum design, in collaboration with faculty, so that fieldwork experiences in traditional, nontraditional, and emerging settings strengthen the ties between didactic and fieldwork education.
C.1.8. Ensure that personnel who supervise Level I fieldwork are informed of the curriculum and fieldwork program design and affirm their ability to support the fieldwork experience. This must occur prior to the onset of the Level I fieldwork. Examples include, but are not limited to, currently licensed or otherwise regulated occupational therapists and occupational therapy assistants, psychologists, physician assistants, teachers, social workers, physicians, speech language pathologists, nurses, and physical therapists.
C.1.9. Document that Level I fieldwork is provided to students and is not substituted for any

part of the Level II fieldwork. Ensure that Level I fieldwork enriches didactic coursework through directed observation and participation in selected aspects of the occupational therapy process, and includes mechanisms for formal evaluation of student performance.

The program must have clearly documented student learning objectives expected of the Level I fieldwork.

Level I fieldwork may be met through one or more of the following instructional methods:

- Simulated environments
- Standardized patients
- Faculty practice
- Faculty-led site experiences
- Supervision by a fieldwork educator in a practice environment

All Level I fieldwork must be comparable in rigor.

THE PROGRAM WILL MEET THE FOLLOWING ACOTE STANDARDS FOR LEVEL I FIELDWORK (2023 standards)

C.1.1. Ensure that the fieldwork program reflects the sequence and scope of content in the curriculum design, in collaboration with faculty, so that fieldwork experiences in traditional, nontraditional, and emerging settings strengthen the ties between didactic and fieldwork education

C.1.10. Ensure that fieldwork educators who supervise Level I fieldwork are informed of the curriculum and fieldwork program design and affirm their ability to support the fieldwork experience. This must occur prior to the onset of the Level I fieldwork. Examples include, but are not limited to, currently licensed or otherwise regulated occupational therapists and occupational therapy assistants, psychologists, physician assistants, teachers, social workers, physicians, speech-language pathologists, nurses, and physical therapists.

C.1.11. Demonstrate that Level I fieldwork is provided to students and is not substituted for any part of the Level II fieldwork. Document mechanisms for formal evaluation of student performance.

Level I fieldwork may be met through one or more of the following instructional methods:

- Virtual environments
- Simulated environments
- Standardized patients
- Faculty- practice
- Faculty-led site visits
- Supervision by a fieldwork educator in a practice environment

Documents that all students have similar Level I fieldwork experiences (e.g., learning activities, objectives, assignments, and outcome measures.)

RECOMMENDED TEXT

Napier,B. (2012) *Occupational Therapy Fieldwork Survival Guide*. MD:AOTA Press.

McConnell, T.H. (2007). *The Nature of Disease: Pathology for the Health Profession*. NY: Lippincott Williams & Wilkins.

Sames, K.M (2009). *Documenting Occupational Therapy Practice (2nd ed)*. Upper Saddle River, NJ: Prentice Hall.

Select Readings (refer to BB under assignment/reading tab)

GRADING

Maintaining Pre-requisites on Castlebranch	5%
Exxat Hours/SEFWE on Exxat	5%
FW eval & Summary	5%
Successful completion of Fieldwork experience and corresponding assignments/worksheet	50%
In person simulation/Simucase Assignments	30%
Discussion Board Posts	5%

- Please note that there will be a 10% grade deduction for **any** late submission each day that an assignment is late

DESCRIPTION OF ASSIGNMENTS*

Assignment	Description
Maintaining Pre-requisites	Maintaining all health and safety pre-requisites as required by the program and individual sites. Individual sites might have extra requirements. These must be completed within two weeks of notification. Screenshot on maintained pre-requisites uploaded to BB.
EXXAT Hours	Complete weekly hours on EXXAT and submit for approval – Due no later than July 31, 2025 . Screenshot of completed hours submitted on BB.
Student Eval of FW Experience	Complete on EXXAT- Due no later than July 31, 2025
In-person experiences. Complete FW Worksheet and upload to Blackboard	Assigned directly by the course instructor. These are generally 5-week experiences ~3 hours per week, mostly on Wednesdays and Fridays (Some T/Th). Students will run individual sessions, groups and/or complete individual assignments/evaluations at the discretion of the clinical/community supervisor. Complete FW worksheet and corresponding assignments and upload to Blackboard by July 31, 2025 . Each week of FW, you will be expected to develop a treatment plan (or complete the assignment assigned by your FWE) and write a corresponding SOAP note) and have your FWE sign off on it.
Simucase Case Assignments	Complete all assigned interventions, assessments, and part task trainer on Simucase as described in the topical outline.

	Complete until you reach 90%. Complete any assigned corresponding assignments/worksheets.
Simulations at CHE	Attend your assigned simulation time, come prepared, dressed professionally.
Discussion Board	Answer discussion questions on Blackboard and respond to 2 of your classmates. Opens 6/12, Due by 7/24

CLASS/FIELDWORK ATTENDANCE POLICY & PROCEDURE

Attendance is mandatory. Simulations need to be completed by the due date in bold in the Topical Outline below.

Procedures

- Absence or tardiness related to illness or other emergency situation should be discussed with the course instructor as soon as possible. Documentation from a physician will be required for 3 or more days of absences due to illness, or for any family emergencies.
- On-Line Simulation Procedures:
 - Cases will be debriefed the day after the corresponding cases on Simucase are due.
 - Debriefing sessions will be led each week by students in each section on Thursday mornings.
 - Debriefing sections will correspond with LAB sections and are:
 - Lab D- 9:00 am
 - Lab C 9:30 am
 - Lab B 10:00 am
 - Lab A 10:30 am
- In Person Simulation Procedures
 - Students will be assigned through Nicole/Sheelagh in late June.
 - Simulations are generally 1-1.5 hours long at CHE.
 - You will get pre-brief information and should be prepared to interact with the patient as described in the pre-brief.
 - Preparation should include reviewing diagnosis, acceptable vital sign parameters, getting to know patient procedures, and any instructions on pre-brief materials.
 - Students with fieldwork during simulations will be given priority and should avoid double-booking.
 - In-person Simulations are considered pass/fail. Any student that does not pass an In-person simulation will receive an incomplete for the course. Remedial work must be completed by the week of the Fall 2025 semester.
- Discussion questions will be posted on Blackboard June 12-July 24. Please answer the question thoughtfully and respond to 2 of your classmates' submissions.
- Students will be assigned to in-person experience. These will occur mostly on Wednesdays or Fridays (some T/Th). The course instructor will contact you directly once you have been assigned to one of these experiences.

- All hours are to be recorded on Exxat all in-person experiences.

Policy

Students are expected to attend, come prepared, and participate in scheduled classroom, clinical, and related activities.

1. A 90% attendance rate for all classes is required. An absence rate of greater than 10% in any course for any reason will result in a full letter grade deduction from the final course grade. Clinical and professional behavior skills are critical for practice and are learned during in-class experiences and laboratories.
2. Students are responsible for learning all material and course requirements. Opportunities to make up activities will be at the complete discretion of the course instructor and/or fieldwork supervisor.
3. Attendance is mandatory for all specified Level I FW dates (refer to topical outline). Students who miss FW experiences are required to make up the time as long as the supervisor is amenable to a make-up date and time.
4. Students are required to inform the course instructor of any absences **before** the seminar/debriefing and/or FW experience. Absence or tardiness related to illness or other emergencies should be discussed with the course instructor as soon as possible. If a student is unable to attend a FW experience, it is the responsibility of the student to inform the course instructor of the intended absence prior to the day of the FW experience. In the event of an emergency, the student must contact the instructor within 24 hours.
5. All assignments are due prior to the due date, as outlined in the topical outline and in accordance with specific fieldwork experiences. Assignments will be given a 10% deduction for each day late. All in-person write-ups are due no later than one week after completion of the experience. The only exception is due to extenuating circumstances and contact with the course instructor and agreement for an alternate due date.

TOPICAL OUTLINE

DATE	TOPIC	READINGS/ ASSIGNMENT (completed before seminar)	KEY CONCEPTS
Week 1 5/1 Full group Seminar 9:30-10:30am	Seminar – Review FW expectations, syllabus, and Level I Fieldwork assignments. Intro to Alex- THR (75)	*Review FW syllabus *Double check you will stay in compliance with Castle Branch-many annuals come due in summer	Review Simucase Be sure you understand the assignments required for this semester

Week 2 5/8 Debrief Groups LABS D 9-9:30 C 9:30-10 B 10-10:30 A 10:30-11	Debrief Alex	Simucase to 90% Due 5/7, 11:59pm	Complete Alex Due 5/8, 11:59pm Alex- SOAP note- submit to BB
Week 3 5/15 No in person class	Simucase: Tubes and Lines Mobilization Management (30) Simucase: Supplemental Oxygen Types (15)		Complete to 90% and upload screenshots by 5/15, 11:59 am
Week 4 5/22 No in person class	Simucase: Electronic Documentation- Outpatient Setting (30) Electronic Documentation- Acute Care (30)		Complete to 90% and upload screenshots by 5/22, 11:59 am
Week 5 5/29 Full group Seminar 9:30-10:30am ZOOM	Guest Speaker- Alliance Orthopedics Intro to Damon- MS		
Week 6 6/5 Assignment must be complete- could go it during debrief times or on own scheduled time	Intro to Molly- CHF (75)	Simucase to 90%, Due 6/4, 11:59pm **refer to BB for groups**	Complete Damon Due, 6/5, 11:59pm Damon- SOAP note- Submit to BB
Week 7 6/12 Debrief Groups	Discussion Board Opens 6/12 Intro to Frank- PD/dementia (45)	Simucase to 90%, Due 6/11, 11:59pm	Complete Molly Due 6/12, 11:59pm Molly- SOAP note- submit to BB
Week 8 6/19 Juneteeth- NO CLASS!	Continue Frank		
Week 9		Simucase to 90%,	Complete Frank

6/26 Debrief Groups	Intro to Ed (tx 1)- CVA (60)	Due 6/25, 11:59pm	Due 6/26, 11:59 pm Frank- SOAP note-submit to BB
Week 10 7/3 NO CLASS!	Continue with Ed		
Week 11 7/10 SIMULATIONS at CHE			Complete to 90% and upload screenshot by 7/10, 11:59 am
Week 12 7/17 SIMULATIONS at CHE			
Week 13 7/24 NO CLASS!			Discussion Board Closes 7/24
Week 14 7/31 SIMULATIONS at CHE			- Completed FW worksheet, signed off by FWE - FW hours submitted in EXXAT (& screenshot in BB) & SEFWE completed in Exxat - Screenshot of compliance in Castlebranch in BB - ALL submitted no later than 7/31/25