

WSU Five-Year Program Review  
Self-Study

Cover Page

Department/Program: Athletic Training & Occupational Therapy/Rehabilitation Sciences Program

Semester Submitted: Fall 2025

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## **Brief Introductory Statement**

(Should align with or complement the Annual Strategic Planning Report)

The Department of Athletic Training and Occupational Therapy (AT/OT) offers an undergraduate program in Rehabilitation Sciences (formerly called Athletic Therapy). Since its inception in 2009, this program has been designed to prepare students who are interested in pursuing professional graduate programs in athletic training, physical therapy, occupational therapy, physician's assistant programs, or medicine. Students who graduate from this major alone will not be eligible to sit for the board of certification (BOC) exam to become a certified athletic trainer or any other professional medical certification exam.

With many health care professions now requiring a graduate degree to practice, the majority of health care education has taken place at the graduate level. However, with a bachelor's degree still being a prerequisite for these professional graduate programs, the goal of the Rehabilitation Sciences program is to provide students with a pre-professional undergraduate program that not only fulfills the bachelor's degree requirement but also introduces students to the realm of health care in preparation for graduate school. We believe that the Rehabilitation Sciences program offered at Weber State University provides our students with an advantage when it comes to applying to graduate programs for health care professions. Currently, many graduate healthcare programs recommend students to major in science fields or their bachelor's degree, such as chemistry, biology, or zoology. Although these majors offer courses that provide necessary foundational knowledge to students regarding understanding the structures and functions of the human body, they do not introduce the students to clinical healthcare or provide hands-on skills. Our Rehabilitation Sciences program provides a balance between didactic and psychomotor learning that is unique to WSU and prepares students to succeed in a graduate-level health care program. Furthermore, our Rehabilitation Sciences program is the only one of its' kind in the state of Utah which makes our program an attractive option for potential students across the state.

In May 2021, we made a program name change from Athletic Therapy to Rehabilitation Sciences to better reflect the preparation our students receive to go on to professional graduate programs in healthcare. As a pre-professional healthcare program, we strive to provide students opportunities to obtain in-demand certifications and advanced skills that support students in their transition to a graduate professional program and clinical practice. We continue to search for new ways to collaborate with the other programs in the Dumke College of Health Professions to provide additional certifications for our students. In the 2020-2021 Academic year, we began an accelerated program for our Rehabilitation Sciences students seeking a Master's in Athletic Training (RHS to MSAT 3+2 program). Students interested in this route may now graduate with their bachelor's and master's degrees in just 5 years, compared to the traditional 6 years. In fall 2024, we entered an affiliation agreement with Rocky Mountain University of Health Professions programs in Occupational Therapy and Physical Therapy. These programs have reserved 5 slots for our Rehabilitation Sciences graduates who meet their admissions criteria. This provides assurance for our students in having a graduate school option, provided they meet the criteria. By enhancing our program with advanced skill training opportunities and accelerated pathways, we have been able to attract more students and better prepare them to enter competitive graduate programs.

## **Standard A - Mission Statement**

The mission of the Weber State University Rehabilitation Sciences program is to prepare students to enter professional graduate programs of study in health sciences and produce culturally competent students with foundational knowledge in injury evaluation techniques and therapeutic interventions to improve the quality of life and well-being of people in Utah and the world. This pre-professional program prepares students to enter professional graduate programs such as athletic training, physical therapy, occupational therapy, physician assistant programs, or medicine.

## Program Inventory

All Programs Offered:

2020-2025							
CIP Code	Award Level	Program Name	Fall 3 <sup>rd</sup> Week Enrollment				
			20-21	21-22	22-23	23-24	24-25
511199	BS	BS in Rehabilitation Sciences (formerly Athletic Therapy)	N/A	47	121	160	178
	BS	BS in Athletic Therapy (now Rehabilitation Sciences)	222	145	79	28	14
510913	MS	MSAT in Athletic Training	20	29	24	23	32
TOTAL Department Faculty FTE			112				
Department Faculty-to-Student Ratio			11.1				

The Department of Athletic Training & Occupational Therapy offers a Bachelor of Science in Rehabilitation Sciences program. The department also offers a *Master of Science in Athletic Training* and soon will offer a *Bachelor of Science in Occupational Therapy Assistant*. This program review, however, is solely focused on the Bachelor of Science in Rehabilitation Sciences program, formerly known as Athletic Therapy. The faculty in this department teach in both the RHS and Master of Science in Athletic Training and teach overload each semester, which explains the department faculty-to-student ratio listed in the table above. Also as seen in the above table, we submitted a curriculum change to revise our program and change our program name from Athletic Therapy to Rehabilitation Sciences. This change became effective in May 2021, and at that point, we began a 4-year phase-out of our Athletic Therapy program. This phase-out explains the drop in student enrollment in the Athletic Therapy program over the past 5 years and the rise in student enrollment in Rehabilitation Sciences. In the table below, we have shared an additional table showing our graduates in Athletic Therapy and Rehabilitation Sciences over the last 5 years reflecting the transition from Athletic Therapy to Rehabilitation Sciences.

Our Rehabilitation Sciences program is designed to equip students with the background knowledge, critical thinking, hands-on practical skills, and experience necessary to be strong candidates for graduate schools in areas of rehabilitative science such as athletic training, physical therapy, occupational therapy, chiropractic, physician assistant medicine, and physician medicine.

Notes: The disaggregated major and grad counts are displayed below. Trend shows the move from Athletic Therapy to Rehabilitation Sciences	2020-21	2021-22	2022-23	2023-24	2024-25
Athletic Therapy Majors	148	77	32	9	9
Rehabilitation Sciences Majors	86	119	170	179	185
<b>Total</b>	234	196	202	188	194
Athletic Therapy Grads	22	14	12	4	1
Rehabilitation Sciences Grads	3	8	17	24	31
<b>Total</b>	25	22	29	28	32

Version Date: August 2025

## Standard B - Curriculum

### Curriculum Map

Core Courses in Program	Program Learning Outcomes (PLO)						
	PL O 1	PL O 2	PL O 3	PL O 4	PLO 5	PLO 6	PLO 7
RHS 1550 – Introduction to Rehabilitation Sciences				A			A
RHS 2175 – Introduction to Sports Medicine	I/A	I	I	I	I/A		I
RHS 2300 – Emergency Response		I	I	I			
RHS 3300 – Evaluation and Care of Musculoskeletal Injuries – Lower Extremities		A	E	E			
RHS 3301 – Evaluation and Care of Musculoskeletal Injuries – Upper Extremities		A	A	E			
RHS 4150 – Therapeutic Modalities for Rehabilitation Sciences majors			A			I/A	
RHS 4250 – Rehabilitation for Rehabilitation Sciences majors	A		E	E	A	I/A	
RHS 4650 – Management for Rehabilitation Sciences majors							A
RHS 4890 INT – Cooperative Work Experience				A			

I = Introduced, E = Emphasized, A = Assessed comprehensively, **Highlighted** = newly aligned, not yet assessed

Following the 2019-2020 program review of our Athletic Therapy program, the faculty held an all-day strategic planning retreat to discuss revising the curriculum and changing the name of the program to Rehabilitation Sciences to be more descriptive of the type of program we were offering. The intent of the curriculum revision was to provide a program to better prepare students to enter professional graduate programs such as athletic training, physical therapy, occupational therapy, physician assistant programs, or medicine. After careful consideration of the type of student we wish to cultivate in our program, we further revised our program mission from “*Provide quality educational and internship experiences for students who are interested in pursuing a career in health care. This pre-professional program is designed for students preparing to enter professional graduate programs in athletic training, physical therapy, occupational therapy, physician’s assistant programs, or medicine*” to our current mission: “*The mission of the Weber State University Rehabilitation Sciences program is to prepare students to enter professional graduate programs of study in health sciences and produce culturally competent students with foundational knowledge in injury evaluation techniques and therapeutic interventions to improve the quality of life and well-being of people in Utah and the world.*” This new mission statement is clearly stated, aligns with the university’s mission, the program’s student learning outcomes, and program effectiveness outcomes. Each of our required RHS courses are designed to meet the mission of this program. After careful consideration of our 2019-2020 Program learning outcomes (PLOs), we revised our PLOs in 2022 to more appropriately assess how our students were

meeting our program mission. We have been gathering outcome data on these outcomes since 2023. Our students are introduced to the concepts of all our program learning outcomes but one (PLO 6) in our introductory course, RHS 2175. We have current data to report on assessing each outcome in two separate classes for outcomes 2, 3, 4, & 6 and have planned out new assignments to meet the additional second assessment for PLOs 1, 5, & 7 (highlighted areas in curriculum map grid).

As part of our strategic planning process, we also identified a need to provide students with a transparent plan for when required and elective courses would be offered. We have created an RHS course rotation schedule posted on [our website](#), which allows students to plan their grad maps accordingly. On this course rotation, we also indicate when courses will be offered in various formats (face-to-face, hybrid, and online). Students can select the format that works best for their learning situation by knowing when it will be offered during their 4-year degree. Offering this set course and format rotation allows our program to ensure we have the appropriate amount of faculty available to teach each course to support the amount of students while still holding to our mission to prepare students with the knowledge and skills to be qualified applicants for graduate programs.

Through our curriculum revision, streamlining the RHS required courses and offering a wider variety of elective courses. We also revised our application process for students, which allows them to apply to the program after completing their prerequisites and still be eligible to take our RHS 3,000-level courses as well as all of our RHS electives while waiting for program acceptance. This removes a previous barrier where students would be unable to continue progressing toward their degree during the semester they were applying for the program. With our program revisions now in place, we are achieving a relatively low complexity analytics score of 67 (1-500). This low complexity score indicates fewer classes that could hold students back from completing their degree in four years.

## **Standard C - Student Learning Outcomes and Assessment**

### **A. Measurable Program Learning Outcomes**

In 2022, we revised the previous PLOs to more comprehensively align with the program's mission and goals following our curriculum changes in 2021. Our previous PLOs were:

- 1. Educate patients and manage risk for safe performance and function.*
- 2. Implement standard evaluation techniques and formulate a clinical impression for the determination of a course of action.*
- 3. Employ standard care procedures and communicate outcomes for efficient and appropriate care of the injured individual.*
- 4. Recondition patients for optimal performance and function.*
- 5. Understand and adhere to approved organizational and professional practices and guidelines to ensure personal and organizational well-being.*
- 6. Prepare for graduate school through satisfying pre-requisites and completing applications to graduate programs of choice.*

Our current PLOs that we have been assessing for the past two years are listed below.

At the end of their study at WSU, students in this program will:

1. Educate patients in safe performance of exercise techniques to minimize risk during a therapeutic intervention session.
2. Implement evaluation techniques in the assessment of an injured or ill patient.
3. Formulate a clinical impression for the determination of a patients' plan of care.

4. Employ effective communication as a part of an interprofessional healthcare team to appropriately care for all patients.
5. Recondition patients for optimal performance and function.
6. Engage in critical appraisal of clinical research to advance the students' knowledge and provide quality care to their patients.
7. Identify and implement professional management practices and guidelines to ensure personal and organizational well-being.

B. *How do the program faculty assess their instructional program offerings and outcomes? Do program faculty engage advisory groups, such as local and state employer,s in assessment? If not, how do the program faculty ensure learning and content are relevant?*

We have been assessing our PLOs since 2023 and utilize that data to assess our instructional program offerings and determine if our courses and assignments are equipping students to meet those PLOs. Each semester, the Office of Institutional Effectiveness sends us a report of our PLO assessment data. This data is reviewed each semester to determine if course or program changes are needed.

Beginning in 2022, we have held an annual advisory board meeting for our Rehabilitation Sciences program. This advisory board is comprised of healthcare professionals across a variety of settings (hospital, clinic, secondary school, and University) in the fields of medicine, physical therapy, occupational therapy, chiropractic, and athletic training. Our advisory board agenda regularly includes program updates, a review of alumni survey data, strengths of our students, knowledge gaps the clinicians are seeing in our students, and recommendations for program and course improvements.

C. Other programs

- a. General Education Outcomes (if applicable)

N/A

- b. Concurrent Enrollment

Our program offers two concurrent enrollment courses. Both of these courses are required courses for our program, and each course provides an introduction to the content of our PLOs. In each of our concurrent enrollment Sandbox courses, we include pathways to applying for our Rehabilitation Sciences program. Offering these two courses as current enrollment allows students to enter and progress through our program more quickly as they begin college with already 6 credits completed toward their program requirements.

**RHS 2175 (formerly AT 2175): Introduction to Sports Medicine** is a course that was previously only taught to high school students within the Concurrent Enrollment program but was first offered on campus at WSU in Summer 2019. Two of our faculty worked to design this course with a broad overview of sports medicine. In 2021, we created a Canvas Sandbox course to standardize the delivery of the course content, labs, and assessments across secondary schools and the University. In 2023, we re-wrote the course to align with Utah's current strands and standards for Exercise Science/Sports Medicine. Additionally, we re-wrote the course outcomes to align with the strands and standards, and have been gathering assessment data on those outcomes since Fall 2024. This course is now offered on campus in two formats (hybrid and online) each semester and is offered annually at 32 secondary schools.

**RHS 2300: Emergency Response** is a course offered at 41 secondary schools and at Weber State University each semester (Summer, Fall, and Spring). This course is typically taught at WSU by our adjunct or full-time faculty members. The course instruction is standardized through a Sandbox Course, between the secondary schools and WSU, as indicated by the inclusion of the American Red Cross: Emergency Medical Response standards. This is necessary so that all students (secondary or college) are eligible to obtain American Red Cross certification in Emergency Response and CPR for the Professional Rescuer after completing RHS 2300. This course is also designed to align with Utah's Strands and Standards and has been measuring course learning outcomes across the University and current enrollment courses since 2024.

c. Other interdisciplinary work

N/A

### Five/Seven-year Assessment Summary

Since our last program review (2019-2020), we have only had one biennial assessment report which occurred in Fall 2022. The Rehabilitation Sciences program at Weber State University was launched in Summer 2021, transitioning from the former Athletic Therapy program.

In 2022, we revised our program mission and PLOs to better align with what we would like graduates of our program to look like. At this time we also created an initial evidence-of-learning grid. That assessment plan grid was later revised again in 2023 before we began gathering out outcomes data. In our assessment plan, new direct measures were created and aligned with Canvas rubrics for accessibility and consistency across various instructors. Benchmarks were set (generally 80–90% of students meeting specified competency thresholds across labs, projects, exams, and field evaluations). Indirect measures of our student success include a Graduation Exit Survey and Alumni Follow-up Survey to track graduate school acceptance, preparation, and employment outcomes.

#### *Program Achievements & Progress Since Last Review:*

**Renaming of program:** In 2021, the program was streamlined and renamed as Rehabilitation Sciences to allow flexibility for students pursuing different pre-professional pathways.

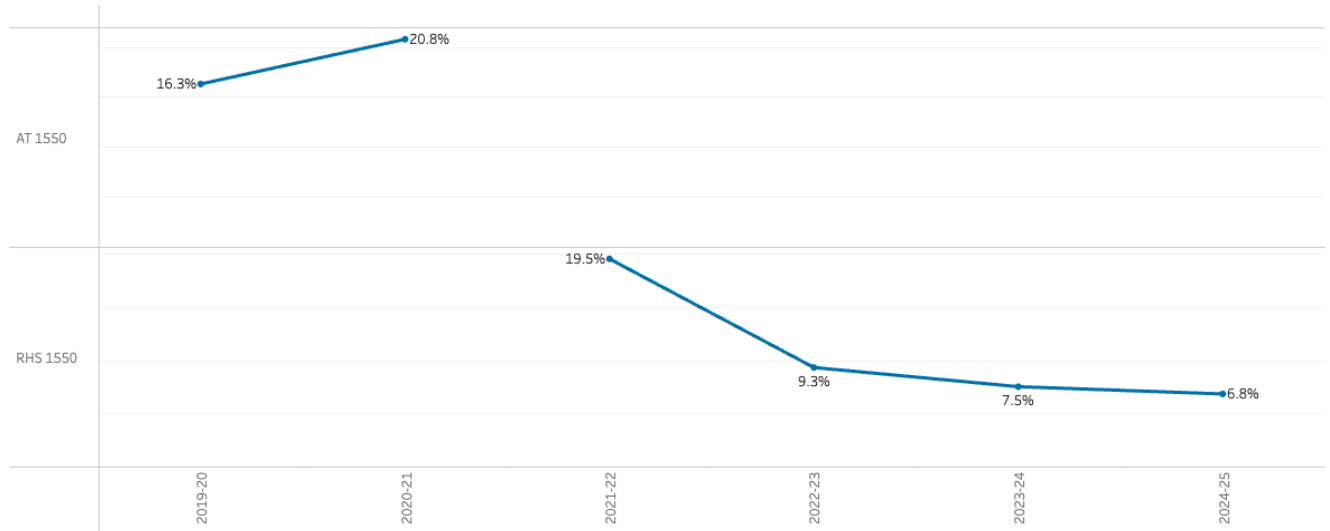
**Advising:** In 2021, a part-time departmental academic advisor role was created by expanding the Administrative Specialist II position, improving accessibility of student advising. In 2022, we noticed a greater need for advising which led to hiring a full-time academic advisor/recruiter/marketer in fall 2024.

**Advisory Board:** Our external board was established in November 2022 with six healthcare professionals (AT, PT, OT, PA, DC, MD) to support program growth. We have been meeting with this board annually since spring 2023.

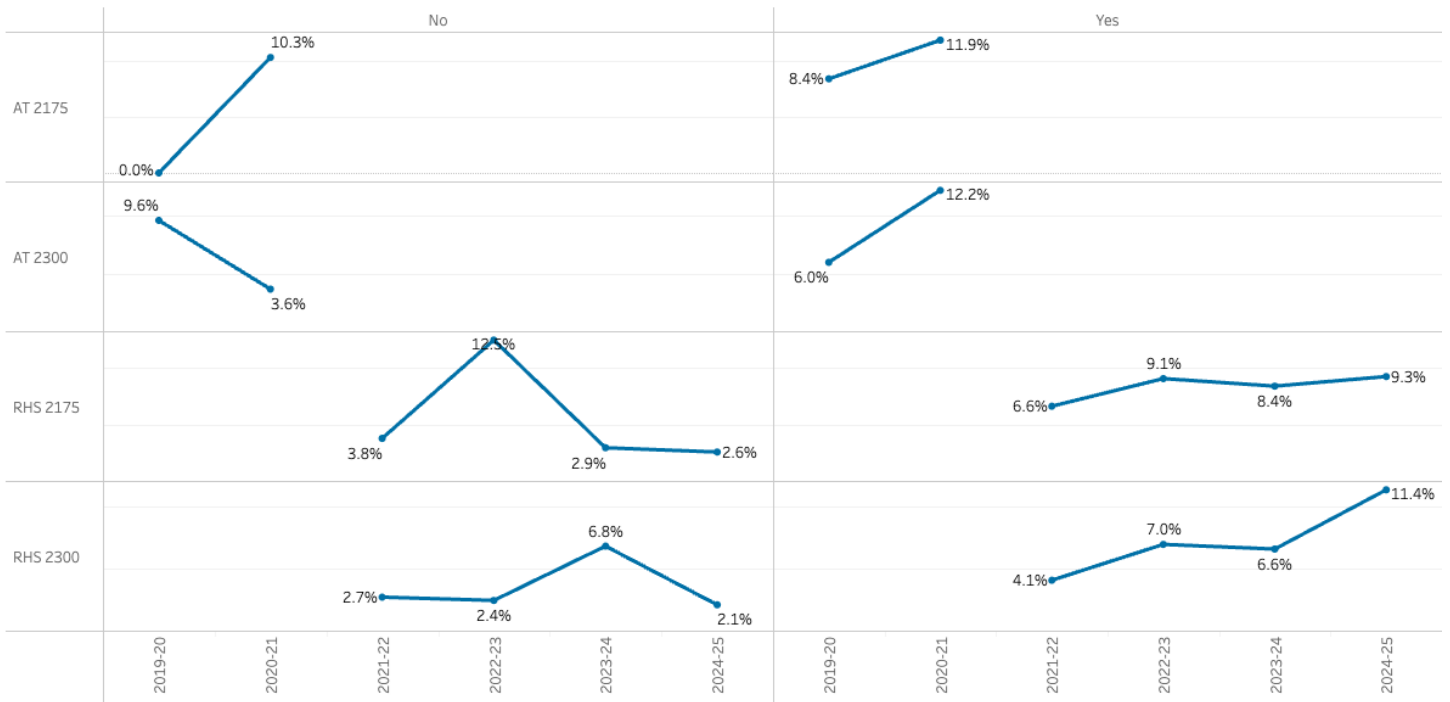
#### *Student Achievement & DFWI Data from 2022 biennial assessment report:*

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- In our previous biennial assessment report, DFWI analysis revealed higher failure/withdrawal rates in **RHS 1550 (Intro)**, especially among first-year students and in online sections during the pandemic. Starfish alerts are now used for early intervention and our on-campus instructors utilize this program. In 2024, after implementing Starfish alerts more diligently and hiring an academic advisor to intervene early and meet with at-risk students, our DFWI rates have decreased from 19.5% in RHS 1550 in 2021-22 AY to just 6.8% during the 2024-25 AY across all sections and formats. *(See screenshot below)*



- In our previous biennial assessment report, online sections of RHS 3300/3301 showed lower performance than face-to-face/hybrid, prompting consideration of reducing online offerings. The faculty agreed to reducing online offerings to once a year. We still recognize lower performance in these online offerings as well as RHS 4150 and see the need for standardizing the content delivery across face-to-face and online courses.
- In our previous biennial assessment report, concurrent enrollment courses (RHS 2175, RHS 2300) showed slightly higher failure rates than non-concurrent university courses, likely due to differences in student maturity. Unfortunately, we are still seeing higher DFWI rates in our concurrent enrollment offerings of RHS 2175 (9.3%) and RHS 2300 (11.4%) compared to our on-campus offerings (2.6% for RHS 2175 and 2.1% for RHS 2300). *(See screenshot below which indicates on-campus offerings on the left and concurrent enrollment offerings on the right)* We see this as an area for growth in identifying students early who are not meeting the benchmarks in the RHS 2300 and RHS 2175 concurrent courses so that the concurrent enrollment instructors can help these students succeed. In our next concurrent enrollment professional development meeting, we will teach our concurrent enrollment instructors how to recognize academically at-risk students early on in the course so that they can reach out to them with academic supports. We will also equip our concurrent enrollment instructors with information about our dual enrollment advising center so they can refer the students to that resource to help them succeed.



*Evidence of Learning Assessment:*

During the 2023-2024 and 2024–2025 academic years, our program assessed student learning across our seven PLOs core competencies using both direct and indirect measures. Overall, students demonstrated strong performance in several key areas, with a few measures falling below established thresholds and prompting targeted action plans.

During the 2024-2025 academic year (*see appendix G for evidence-of-learning grids*), students met or exceeded expectations in their ability to educate patients in safe performance of exercise techniques (RHS 4250 labs) and in their competence with evaluation skills through final video assessments in RHS 3300 and RHS 3301. Similarly, students achieved or surpassed thresholds in outcomes related to reconditioning patients (RHS 4250 case and rehab plan), critical appraisal of clinical research (RHS 4250 annotated bibliography), and professional management practices (RHS 4650 facility design project and LinkedIn portfolio). No curricular or pedagogical changes are needed in these areas at this time.

However, two outcomes revealed areas for improvement. In formulating a clinical impression for patient care (RHS 4150 final exam essays and RHS 3301 SOAP notes) and in the critical appraisal of clinical research through oral presentation (RHS 4150 Ignite presentations), thresholds were not met. Faculty attributed these results largely to the online delivery of RHS 4150 in Fall 2024, which limited hands-on practice and contributed to weaker student performance compared to face-to-face instruction. As a result, the program will revise the online version of RHS 4150 and work toward greater standardization between online and face-to-face course delivery.

Finally, we have identified gaps in assessing our PLOs in two separate required courses across the curriculum so, several new measures (e.g., RHS 2175 Rehabilitation Techniques lab, RHS 1550 reflection and resume

assignments) have been aligned with the PLOs that were in need of an additional assessment, and data collection for these assessments will begin in Fall 2025.

### Resource Allocation

The Rehabilitation Sciences program at Weber State University demonstrates appropriate and mission-consistent allocation of resources to support effective curriculum delivery and student success. Our program's mission: "to prepare culturally competent, pre-professional students for graduate studies in health sciences", is achieved through a combination of high-quality faculty instruction, well-equipped learning environments with state of the art laboratory equipment, and department-specific advising support.

### **Faculty Resources and Teaching Capacity**

The Department of Athletic Training & Occupational Therapy maintains a balanced student-to-faculty ratio of approximately 11:1 where all of the faculty teach in both the MS in Athletic Training and RHS programs, which allows for small class sizes and individualized instruction consistent with a hands-on, skill-based curriculum. Faculty qualifications are exemplary, with all full-time instructors/professors holding at least a master's degree and the majority possessing terminal degrees (PhD or EdD). This ensures students receive instruction from experienced clinician-educators who align their teaching directly with the program's mission to develop foundational clinical reasoning and patient-care skills. The hiring of adjunct faculty with professional expertise across various healthcare fields (athletic training, physical therapy, occupational therapy, and emergency healthcare) further broadens instructional variety and supports interdisciplinary learning outcomes.

### **Fiscal Stewardship**

Departmental funding has grown proportionally with student enrollment and instructional needs—from \$665,678 in FY2021 to \$936,138 in FY2025—while maintaining a stable cost per FTE (~\$8,300–\$9,200). This indicates responsible use of institutional funds to sustain academic quality without disproportionate expenditure growth.

### **Alignment with Mission and Outcomes**

All resource allocations (faculty expertise, lab resources, and advising services) are directly tied to preparing students for graduate education and professional healthcare practice. Shared lab access, advanced certifications (e.g., American Red Cross Emergency Response), and integrated internship placements demonstrate alignment with the mission to develop competent, practice-ready graduates. The consistently strong student performance across learning outcomes and increased graduate placement success further validate that current resource levels are adequate and effectively deployed.

### Assessment of Graduating Students

We issue a graduation exit survey to all of our graduates in Rehabilitation Sciences the week of their graduation. This survey asks graduates to indicate if they have applied to graduate school, if they have been accepted, and where they will be attending graduate school. We also issue an alumni survey annually to gather data of our graduates in the last 5 years, asking them to indicate their current practice setting, professional licensure status, and where they attended (or are currently attending) graduate school.

## Standard D - Academic Advising and Student Engagement

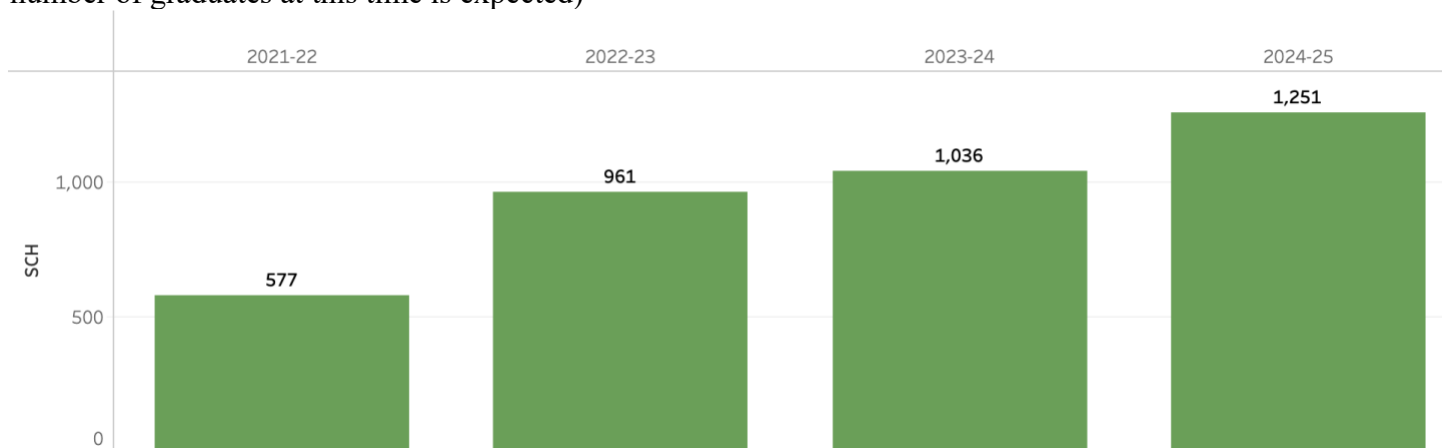
### Advising Strategy and Process

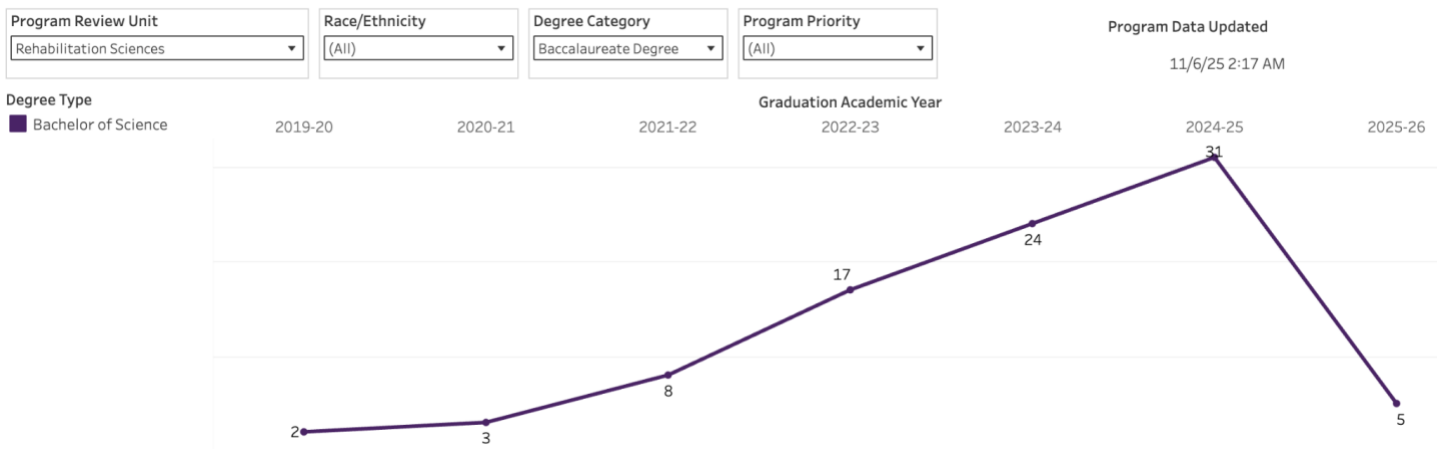
The department has a dedicated academic advisor recruiter on staff. They meet with current and prospective students either in person or virtually to go over program requirements and paths that are unique to each student's current situation. Students schedule appointments in person or virtually using a Google calendar scheduler. Appointments are 30-60 minutes and the students' "CatTracks" will be reviewed with them to determine their most ideal path forward to create a "Grad Map". These paths are based on the student's post-graduate goals and any and all pre-requisite courses are included.

Along with advising, the academic advisor recruiter also speaks in other departments and attends recruitment events both on and off campus. These guest speaker opportunities usually involve a presentation and Q&A and events usually include a table with information, swag and the opportunity to answer any questions someone may have. Flyers, cards and contact information are given to any prospective students. These recruiting efforts provide us with a wide-variety of students interested in our program, and our strategic advising equips students with the information needed to stay in our program and succeed.

### Effectiveness of Advising

Our students have noted anecdotal evidence of appreciating having a department-specific advisor. We have also shown steady growth in rehabilitation sciences enrollment and graduation rates since hiring our full-time advisor recruiter. (See below for enrollment and graduation data-note the 2025-2026 AY is still ongoing so a low number of graduates at this time is expected)





We have also noticed improvements in our retention for our department from the semester our advisor was hired (Fall 2023) until Fall 2024. (evidenced by the graph below)

### Health Professions Fall-to-Fall Retention

Academic Unit	Choose Display	Initial First-Time Students	Not Retained	Retained in Major	Retained in College	Retained Out of College	Total Retained	Retention Rate
Health Professions	Fall 2020	883	377	394	13	99	506	57.3%
	Fall 2021	728	305	301	13	109	423	58.1%
	Fall 2022	745	320	290	14	121	425	57.0%
	Fall 2023	822	375	342	6	99	447	54.4%
	Fall 2024	929	417	357	17	138	512	55.1%

### Health Professions Fall-to-Fall Retention by Department

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Choose Reporting Units

Athletic Trng/Occupation Thpy

Academic Unit	Choose Display	Initial First-Time Students	Not Retained	Retained in Major	Retained in College	Retained Out of College	Total Retained	Retention Rate
Athletic Trng/Occupation Thpy	Fall 2019	19	8	9	0	2	11	57.9%
	Fall 2020	41	18	19	0	4	23	56.1%
	Fall 2021	39	17	17	1	4	22	56.4%
	Fall 2022	40	16	15	1	8	24	60.0%
	Fall 2023	38	13	22	0	3	25	65.8%
Fall 2024	33	13	15	0	5	20	60.6%	

### Past Changes and Future Recommendations

The addition of the dedicated advisor was the biggest change made in order to support our students more effectively. They also teach the RHS 1550, Introduction to Rehabilitation Sciences course, which has a section dedicated to the advising process and graduation requirements. This has had a positive impact on students getting the information they need sooner in order to graduate in a timely manner.

## Standard E - Faculty

### Programmatic/Departmental Teaching Standards

- a. The program faculty members are held to the Dumke College of Health Professions teaching standards and policies and procedures for tenure and promotion (per the tenure document and PPM 8-11). The department chair reviews faculty in their second year. Peer review committees review faculty according to policy in their third and sixth year. Department and college ranking tenure and evaluation committees also review faculty in the areas of teaching, scholarship, and service in their third and sixth years, according to policy.
- b. Faculty teaching schedules are determined by the department chair in consultation with the program director and faculty member. They are established based on the strengths of the faculty member, the needs of the program, and performance factors. All courses taught by tenured, tenure-track, non-tenured faculty members, and adjunct faculty are evaluated by students through end-of-the-semester course evaluations.

### Faculty Qualifications

All faculty who teach Rehabilitation courses possess at least a master's degree; however, several possess terminal degrees (EdD or PhD) as well. There is one faculty member with a BS degree only who teaches RHS 1300 and RHS 2300, Les Stone. However, he is EMT certified and is an Instructor Trainer for the American Red Cross in both Emergency Response and CPR/AED for the Professional Rescuer and Health Care Provider, so we feel he is qualified to teach the content in both of those courses that offer those certifications. He is retiring this year, and individuals with master's degrees will be teaching those courses going forward.

### Faculty Scholarship

#### **Publications**

##### **Valerie Herzog:**

Stedge HL, Herzog V, Kinslow BL, Martin M. Prolonged Impact of Simulation Education on Athletic Training Students' Perceived Self-Confidence in Recognizing and Managing Exertional Heat Stroke: A Follow-up Study. *The Internet Journal of Allied Health Sciences and Practice*. 2025;22(4):Article 1.

Stedge HL, Martin M, Kinslow BL, Herzog V, Reyes C. Athletic Training Students' Experiences and Perceptions of Exertional Heat Stroke Simulated Encounters: A Qualitative Analysis. *The Journal of Sports Medicine and Allied Health Sciences*. 2024;10(2).

Stedge HL, Herzog V, Kinslow B, Martin M. Athletic Training Students' Perceived Self-Confidence Performing Rectal Thermometry Following Simulated Encounters: A Mixed Methods Study. *The Internet Journal of Allied Health Sciences and Practice*. 2023;21(4):Article 12.

Stedge H, Cappaert T, Herzog VW, Kinslow B, Martin M. Test–Retest Reliability and Minimum Detectable Change of the Athletic Trainers' Self-Confidence Scale. *International Journal of Athletic Therapy and*

*Training*. 2023;28:253-257. <https://doi.org/10.1123/ijatt.2022-0024>

Herzog VW, Cohen A. Sports Medicine Research Practices for Categorizing Transgender and/or Intersex Participants. *Journal of Sport Rehabilitation*. 2022;31(3):294-298. <https://doi.org/10.1123/jsr.2021-0251>

Stedje H, Herzog VW. Self-Confidence and Perceptions of Athletic Training Students Following Simulated Experiences: A mixed-methods pilot study. *Internet Journal of Allied Health Sciences and Practice*. 2021;19(3):#5.

### **Hannah Stedje:**

Donahue M, Stedje HL. All in a Day's Work: Using Simulation to Prepare Athletic Training Students for Clinical Practice. *The Internet Journal of Allied Health Sciences and Practice*. 2025 Apr 15;23(2), Article 7.

Stedje HL, Herzog V, Kinslow BL, Martin M. Prolonged Impact of Simulation Education on Athletic Training Students' Perceived Self-Confidence in Recognizing and Managing Exertional Heat Stroke: A Follow-up Study. *The Internet Journal of Allied Health Sciences and Practice*. 2025 Jan 22;23(2), Article 1.

Stedje, HL., Herzog, VW., Kinslow, B, & Martin. M. (2025). Exertional Heat Illness Management Education and Practices of Certified Athletic Trainers: An Exploratory Study. *International Journal of Athletic Therapy and Training*. Advance online publication. <https://doi.org/10.1123/ijatt.2024-0089>.

Stedje, HL, Martin, M., Kinslow B., Herzog,VW., Reyes, C. Athletic training students' experiences and perceptions of exertional heat stroke simulated encounters: A qualitative analysis. *Journal of Sports Medicine and Allied Health Sciences: Official Journal of the Ohio Athletic Trainers Association*: 2024 Oct. Vol. 10: Iss 2, Article 1. Available at: <https://scholarworks.bgsu.edu/jsmahs/vol10/iss2/1>

Stedje, HL, Herzog, VW., Kinslow B., Martin, M. Athletic training students' perceived self-confidence performing rectal thermometry following simulated encounters: a mixed methods study. *The Internet Journal of Allied Health Sciences and Practice*. 2023 Sept 21;21(4), Article 12

Stedje, HL., Cappaert, T, Herzog, VW., Kinslow, B, & Martin, M. Test–Retest Reliability and Minimum Detectable Change of the Athletic Trainers' Self-Confidence Scale. *International Journal of Athletic Therapy and Training*. 2022 Dec 24;28(5):253-257 <https://doi.org/10.1123/ijatt.2022-0024>.

Ward A, Stedje H, Tischler D. Students' experience of a college wellness course. *Health Education Journal*. April 2022; 1-11. <https://doi.org/10.1177/00178969221092732>

Stedje HL, Miyashita T. Effect of the Use of High-Fidelity Manikin Simulation for Learning Emergency Cardiovascular Care Skills: A Critically Appraised Topic. *International Journal of Athletic Therapy and Training*. 2022;27(2):54-58. <https://doi.org/10.1123/ijatt.2020-0120>.

Stedje HL, Herzog V. Self-Confidence and Perceptions of Athletic Training Students Following Simulated Experiences: A Mixed-Methods Pilot Study. *The Internet Journal of Allied Health Sciences and Practice*. 2021 Jan 01;19(3), Article 5.

Stedje, HL, Armstrong, K. The Effects of Intermittent Pneumatic Compression on the Reduction of Exercise-Induced Muscle Damage in Endurance Athletes: A Critically Appraised Topic. *Journal of Sport Rehabilitation*. 2021;30(4):668-671. <https://doi.org/10.1123/jsr.2020-0364>

Stedje HL, Medina McKeon JM. A Supervised Pelvic Floor Training Program Has Minimal Effect on the Prevalence of Postpartum Diastasis Recti Abdominis: A Critically Appraised Paper. *International Journal of Athletic Therapy and Training*. 2020;25(6):299-302. doi:10.1123/ijatt.2019-0112

### **Conrad Gabler:**

Venegas LA, Perkins RK, Padovich MR, Avila J, Gabler CM. Effects of Short-Term Knee Immobilization on Quadriceps Structure and Function. *Journal of Athletic Training (Supplement)*. 2023;558(6S):72

Thompson XD, Gabler CM, Mattacola CG. The Relationship between Rate of Torque Development and Vertical Jump Performance: Implications for ACL Injury? *Journal of Athletic Training and Sports Health Care (Advanced Release May/June 2020)*.

Sakai RS, Gabler CM, McCormick DM, Aguilar DA. Blood Biomarkers for Bone Remodeling are Expressed Differently Between Collegiate Cross Country Athletes With and Without a History of Lower Extremity Stress Fracture. *Journal of Athletic Training (Supplement)*. 2020;55(6):370

McCormick DM, Sakai RS, Gabler CM, Aguilar DA. Body Composition and Iron Related Biomarkers are Influenced by Years of Cross Country Collegiate Participation. *Journal of Athletic Training (Supplement)*. 2020;55(6):338

### **Matthew Donahue**

Donahue M, Stedje HL. All in a Day's Work: Using Simulation to Prepare Athletic Training Students for Clinical Practice. *The Internet Journal of Allied Health Sciences and Practice*. 2025 Apr 15;23(2), Article 7.

### **Joshua Sponbeck**

Swanson, D. A., **Sponbeck, J. K.**, Swanson, D. C., Allen, S. P., & Johnson, A. W. (2025). Validity of MRI and Ultrasound Volume Measurements of Foot Muscles and Plantar Fascia Cross-Sectional Area Within Older Adults With and Without Chronic Plantar Fasciitis. *Journal of Foot and Ankle Research*, 18(3), e70076.

Ridge, S. T., Trotter, T., **Sponbeck, J. K.**, Johnson, A. W., Hunter, I., & Bruening, D. A. (2025). Variability Among Individual Male Runners Influences Cumulative Loading More Than Foot Strike Type. *Sports Health*, 19417381251333415

**Sponbeck, J.**, Gisseman, B., Lefevre, C., Shuler, E., Hager, R., & Johnson, A. W. (2024). A Comparison of Achilles Tendon Morphological Characteristics Based Upon VISA-A Score in Active Adults Over Age 50. *International Journal of Exercise Science*, 17(3), 1517.

**Sponbeck, J. K.**, Moody, M. A., Mitchell, U. H., Neves, C. D., & Johnson, A. W. (2022). Multifidus muscle cross-sectional area adaptations over two volleyball seasons and one off-season in athletes with and without low back pain. *Journal of Back and Musculoskeletal Rehabilitation*, (Preprint), 1-8.

Swanson, D. C., **Sponbeck, J. K.**, Swanson, D. A., Stevens, C. D., Allen, S. P., Mitchell, U. H., ... & Johnson, A. W. (2022). Validity of ultrasound imaging for intrinsic foot muscle cross-sectional area measurements demonstrated by strong agreement with MRI. *BMC Musculoskeletal Disorders*, 23(1), 1-12.

Bethers, A. H., Swanson, D. C., **Sponbeck, J. K.**, Mitchell, U. H., Draper, D. O., Feland, J. B., & Johnson, A. W. (2021). Positional release therapy and therapeutic massage reduce muscle trigger and tender points. *Journal of Bodywork and Movement Therapies*, 28, 264-270.

**Sponbeck, J. K.**, Frandsen, C. R., Ridge, S. T., Swanson, D. A., Swanson, D. C., & Johnson, A. W. (2021). Leg muscle cross-sectional area measured by ultrasound is highly correlated with MRI. *Journal of Foot and Ankle Research*, 14(1), 1-

**Sponbeck, J. K.**, Hunter, I., Neves, K. A., Swanson, D. C., Swanson, D. A., & Johnson, A. W. (2020). Achilles tendon acute and prolonged adaptations during early and late collegiate cross-country season. *Physical Therapy in Sport*,

Neves, C. D., **Sponbeck, J. K.**, Neves, K. A., Mitchell, U. H., Hunter, I., & Johnson, A. W. (2020). The Achilles Tendon Response to a Bout of Running is not affected by Triceps Surae Stretch Training in Runners. *Journal of Sports Science & Medicine*, 19(2), 358.

**Sponbeck, J. K.**, Perkins, C. L., Berg, M. J., & Rigby, J. H. (2017). Achilles tendon cross sectional area changes over a division i ncaa cross country season. *International journal of exercise science*, 10(8), 1226.

## **Oral Presentations**

### **Valerie Herzog:**

Herzog VW, Stedje HL. Aquatic Therapy for Injury Prevention, Rehabilitation, and Sport Performance. (Oct. 2025) at the World Federation for Athletic Training & Therapy World Congress in Dublin, Ireland.

Herzog VW. (Apr. 29, 2025) Live interview – Women’s Injuries – Treatment and Prevention - on SiriusXM-Doctor Radio with Primary Care Medicine show hosts, Marina Kurian, MD, bariatric surgeon with the NYU Langone Medical Center and her co-host Rachel Lustgarten, RDN, a registered dietitian in New York City. Their show airs LIVE every Tuesday from 8-10amET on SiriusXM-Doctor Radio (Ch. 110).

Herzog V. (Jan. 2024) (Never Stop Learning) Podcast featured on the Wrap it Up Sports Medicine + More.

Burke A, Herzog V, Mensch J. (Nov. 2024) [Thinking Globally: Recruiting Internationally and Identifying Partners for Clinical Experiences](#). Podcast sponsored by the World Federation of Athletic Training and Therapy as part of the Let's ChAT series.

Herzog V. Advocacy Resources – What ASAHP has Developed and How to Use Them. Presented as a breakout session at the Association of Schools Advancing Health Professions (ASAHP) Annual Conference in Atlanta, GA on Oct. 8, 2024.

Horokyski M, Abdenour TE, Herzog V. (June 2024) Mentoring: A Need of Minoritized Populations Entering the Health Professions. Presented as a poster at the National Association of Advisors for the Health Professions (NAAHP) Conference in Cincinnati, OH.

Choi H, Kinouchi Y, Stedje H, Herzog V. (June 2023) Acute and Residual Effects of IASTM and Percussion Massager on Hamstring Range of Motion and Patient Satisfaction. Presented at the International Olympic Committee Injury and Illness Prevention Conference in Monaco (Feb. 2024) and at the National Athletic Trainers' Association Clinical Symposium in Indianapolis, IN (June 2023) and at the (Abstract was also published in the Journal of Athletic Training – 58(3).

Jackson C, Bradley-Guidry C, Herzog V, García-Martínez J. Maintaining High-Quality Health Professions Education through Advocacy Efforts in an Uncertain Legislative Climate. National webinar presented on behalf of the Association of Schools Advancing Health Professions (ASAHP) on Jan. 30, 2024.

Bell K, Breitbach A, Zipp G, Kuperschmidt S, Herzog V, Henzi D, Kapralos B, Hoggatt Krumwiede K, Swann E. (October 2023) Regional Summits: Using the ASAHP Stakeholder Engagement Model to Promote Interprofessional Collaboration. Presented as a breakout session at the Association of Schools Advancing Health Professions Conference in Ft. Lauderdale, FL.

Bradley-Guidry C, Garcia-Martínez J, Portee C, Simmons M, Herzog V (Moderator and Organizer). (October 2023) Accreditation – Maneuvering through Conflicts between States and Accreditors. Presented as a plenary panel discussion at the Association of Schools Advancing Health Professions Conference in Ft. Lauderdale, FL.

Herzog, VW. (March 2023) Tenacious Advocacy. One of the features in the National Athletic Trainers' Association Women's History Month Blog Series. <https://www.nata.org/blog/lydia-hicks/tenacious-advocacy-diversity>

Abdenour T, Herzog VW. (Nov. 2022) Recruitment of HBCU Undergraduate Students to an Athletic Training Program: A Case Series. Presented at the Virtual Athletic Training Educators' Conference, National Athletic Trainers' Association.

Herzog VW. (Nov. 2022) Recruiting and Retaining Diverse Students: Preparing Professionals for Clinical Care  
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in a Multi-cultural Health Care System. Presented at the Virtual Athletic Training Educators' Conference, National Athletic Trainers' Association.

Herzog VW, Cohen A. (Oct. 2022) Clinical Research with Transgender and/or Intersex Participants. Presented at the Annual Conference of the Association of Schools Advancing Health Professions in Long Beach, CA.

Radel J, Alvarez JR, Herzog VW, Garcia-Martinez J. (Oct. 2022) Establishing Mutually-Beneficial Partnerships with HBCUs. Presented at the Annual Conference of the Association of Schools Advancing Health Professions in Long Beach, CA.

Beissner K, Herzog VW, St. Hill H. (Oct. 2022) Be a voice for change. Enhance your Advocacy Skills. Presented at the Annual Conference of the Association of Schools Advancing Health Professions in Long Beach, CA.

Lawrence J, Herzog VW. (June 2022) Health Care Policy Update and Advocacy for the Health Professions. Part 1: The 2020 Election and Beyond – What Does It Mean for Health Care Policy and Health Professionals? Part 2: You Can Make a Difference! How Athletic Trainers Can Engage in Advocacy. Presented at the National Athletic Trainers' Association Clinical Symposium in Philadelphia, PA.

Ozawa Y, Fujii N, Herzog VW, Hanaki S. (June 2022) The Effect of Proprioceptive Neuromuscular Facilitation and Dynamic Stretching on Range of Motion, Vertical Jump Performance, and Dynamic Balance. Oral presentation Free Communication (peer-reviewed) at the National Athletic Trainers' Association Clinical Symposium in Philadelphia, PA. Also a published abstract in the *Journal of Athletic Training*. 2022;57(6S):S-87.

**Hannah Stedje:**

Donahue M, Stedje HL. (Oct 2025) Implementing Simulations in the Workplace. Oral presentation at 13th WFATT World Congress, Dublin, Ireland.

Herzog VW, Stedje HL. (Oct 2025) Aquatic Therapy for Injury Prevention, Rehabilitation, and Sport Performance. Workshop presentation at 13th WFATT World Congress, Dublin, Ireland.

Donahue M, Stedje HL (June 2025) Perceived Learning Needs of Athletic Training Students During Immersive Clinical Experiences. Oral presentation Free Communication (peer-reviewed) at the National Athletic Trainers' Association Clinical Symposium in Orlando, FL.

Stedje HL, Donahue M (Dec 2024) Stop the Clock Before it Starts. Oral workshop at UATA Annual Meeting and Clinical Symposium, Ogden, UT.

Stedje HL (March 2024) Inclusive Teaching Practices. Panel member at WSU Thrive Symposium, Ogden, UT.

Stedge HL, Herzog VW, Martin M, Kinslow B. (March 2024) The Effects of Simulation Education on Athletic Training Students' Self-Confidence when Performing Rectal Thermometry: A Mixed Methods Study. Oral Presentation at RMATA Annual Symposium, Provo, UT.

Stedge HL, Corbin N. (Nov 2023) Creating an Inclusive Syllabus. RMUoHP Teaching and Learning Summit, Provo, UT.

Stedge HL, Herzog VW, Martin M, Kinslow B. (July 2023) Athletic Training Students' Perceived Self-Confidence Performing Rectal Thermometry Following Simulated Encounters. Rapid Fire Oral Presentation at RMUoHP 7th Annual Scholarship Symposium, Provo, UT.

Stedge HL, Herzog VW, Martin M, Kinslow B. (June 2023) Athletic Training Students' Perceived Self-Confidence Performing Rectal Thermometry Following Simulated Encounters. Rapid Fire Oral Presentation at NATA Clinical Symposia and Expo, Indianapolis IN.

Stedge HL, Larsen JM. (Feb 2023) The Use of Simulation in Health Professions Education. Oral webinar. WFATT.

Stedge HL, Herzog VW, Martin M, Kinslow B. (Feb 2023) Athletic Training Students' Perceived Self-Confidence Performing Rectal Thermometry Following Simulated Encounters. Dissertation Defense. Provo, UT.

Stedge HL. (Dec 2022) Best Practices for Recognizing Exertional Heat Stroke. Oral Presentation. UATA Annual Symposium, Sandy, UT.

**Conrad Gabler:**

Gabler CM (October 2025). Quad Blue: Reviving the Quadriceps in Early ACL Rehabilitation. Oral presentation at 13th WFATT World Congress, Dublin, Ireland.

Vinacco CJ, Fuscone AM, Puntso ETT, Gabler CM (June 2025). The Neurocognitive and Psychobehavioral Effects of Visual Constraints during a Reactive Cutting Task in Patients after ACL Reconstruction. An oral presentation at the 2025 Rocky Mountain Athletic Trainers' Association Clinical Symposium. Casper, WY.

Porter BJ, Luo P, Gabler CM (April 2025). Outcome Measures Associated with Successful Recovery after Anterior Cruciate Ligament Reconstruction. An oral presentation at the 2nd Annual Research & Engagement Symposium, Ogden, UT

Gabler CM (Dec 2024). Cupping for the Modern Athletic Trainer. Oral presentation and workshop at UATA Annual Meeting and Clinical Symposium, Ogden, UT.

Venegas LA, Perkins RK, Padovich MR, Avila J, Gabler CM (June 2023). Effects of Short-Term Knee Immobilization on Quadriceps Structure and Function. An oral presentation at the 74th Annual National Athletic Trainers' Association Clinical Symposia & AT Expo. Indianapolis, IN.

Nohara Y, Gabler CM (April 2022). The Effect of The Effect of Static and Dynamic Cupping on Dorsiflexion Range of Motion, Pain, and Hemodynamics. An oral presentation at the Rocky Mountain Athletic Trainers' Association Annual Clinical Symposium. Albuquerque, NM.

Sakai R, McCormick D, Aguilar DA, Gabler CM (June 2021). Blood Biomarkers for Bone Remodeling are Expressed Differently Between Collegiate Cross-Country Athletes With and Without a History of Lower Extremity Stress Fracture. Accepted for an oral presentation at the 71st Annual National Athletic Trainers' Association Clinical Symposia & AT Expo. Atlanta, GA.

Hamill K, Ogden J, Richey R, Gabler CM (April 2020). Comparison of Soft Tissue Mobilization Techniques on Improving Quadriceps Strength, Flexibility, and Functional Performance. Accepted for an oral presentation at the Rocky Mountain Athletic Trainers' Association Annual Clinical Symposium. Albuquerque, NM.

Luo PH, Gabler CM (March 2021). Clinical Measures Related to Return to Activity Success after Anterior Cruciate Ligament Reconstruction. An oral presentation at the 16th Annual Office of Undergraduate Research Symposium, Ogden, UT.

Gray M, Gabler CM (March 2020). Lower Limb Symmetry in Healthy, Physically Active College Students. An oral presentation at the 15th Annual Office of Undergraduate Research Symposium, Ogden, UT.

### **Robyn Thompson**

Thompson, R. & Fait, L. (2024, November). The Community as Your Clinic: Practical Ways to Use the Natural Environment for Treating Infants, Children & Youth. Short Course Presentation, Utah Occupational Therapy Association Annual State Conference, Orem, Utah. Conference Short Course, Refereed, Presented, 11/2024

Fait, L. & Thompson, R. (2024, November). Overcoming Imposter Syndrome as an Occupational Therapy Practitioner or Student: Strategies for Success. Short Course Presentation, Utah Occupational Therapy Association Annual State Conference, Orem, Utah. Conference Short Course, Refereed, Presented, 11/2024

Dibble, E. Smith, L., Thompson, R. (2019, July). Across the College and in the Classroom: ePortfolio as an effective and efficient High-Impact Practice. Short Course Presentation, Annual National Conference, The Association for Authentic, Experiential, and Evidence based Learning, New York City, New York. Conference Short Course, Refereed, Presented, 7/2019

### **Rhonda Roth**

Version Date: August 2025

Roth, R. (2023). Taking Pediatric Occupational Therapy Outdoors: A Pilot of the Sensational Nature Explorers. Short Course Presentation, Utah Occupational Therapy Association Annual State Conference, Orem, Utah.

Gray, S & Roth, R. (2022). Comprehensive Behavioral Intervention for Tics: An Introduction. Short Course Presentation, Utah Occupational Therapy Association Annual State Conference, Provo, Utah.

### **Matthew Donahue**

Donahue M, Stedje HL. (Oct 2025) Implementing Simulations in the Workplace. Oral presentation at 13th WFATT World Congress, Dublin, Ireland.

Donahue M, Stedje HL (June 2025) Perceived Learning Needs of Athletic Training Students During Immersive Clinical Experiences. Oral presentation Free Communication (peer-reviewed) at the National Athletic Trainers' Association Clinical Symposium in Orlando, FL.

Stedje HL, Donahue M (Dec 2024) Stop the Clock Before it Starts. Oral workshop at UATA Annual Meeting and Clinical Symposium, Ogden, UT.

### **Joshua Sponbeck**

**Sponbeck, J. K.**, Perkins, C. L., Berg, M. J., & Rigby, J. H. (2017). Achilles tendon cross sectional area changes over a division i ncaa cross country season. Oral Presentation Rocky Mountain Athletic Trainers Conference Albuquerque, NM, April 8, 2016

**Sponbeck, J. K.** (2023). *Loading Force in Recreational Runners and its Effect on Achilles Tendon Biomechanical Properties* (Doctoral dissertation, Brigham Young University). Oral Presentation World Federation of Athletic Trainers and Therapists Maynooth, Ireland, October 16, 2025

### **Poster Presentations**

#### **Valerie Herzog:**

Simmons Z, Lindley K, Rollins S, Blanchard B, Dickinson H, Petersen A, Valdez J, Weston N, Herzog VW. A Comparison of Intramuscular Temperature between Three Cryotherapy Modalities. Poster presented at the National Athletic Trainers' Association Clinical Symposium in Orlando, FL. Also a published abstract in the *Journal of Athletic Training*. 2025.

Rollins S, Blanchard B, Lindley K, Simmons Z, Dickinson H, Petersen A, Valdez J, Weston N, Herzog VW. A Comparison of Satisfaction between Three Cryotherapy Modalities. Poster presented at the National Athletic Trainers' Association Clinical Symposium in Orlando, FL. Also a published abstract in the *Journal of Athletic Training*. 2025.

Rupe T, Bland M, Watkins B, Herzog V. (June 2023) GameReady® 2.0 Reduces Intramuscular Temperature More than the Hyperice X. Poster was presented at the National Athletic Trainers' Association Clinical

Symposium (peer-reviewed) in Indianapolis, IN. Also a published abstract in the *Journal of Athletic Training*. 2023;58(6S):S-212.

Herzog VW, Matthews L, Castiana M. (June 2022) The Effects of the Game Ready® vs. a Frozen Elastic Bandage on Intramuscular Temperature. Poster was presented at the National Athletic Trainers' Association Clinical Symposium (peer-reviewed) in Philadelphia, PA. Also a published abstract in the *Journal of Athletic Training*. 2022;57(6S):S-307.

### **Conrad Gabler:**

Jones A, Deuel S, Manning B, Gabler CM (October 2025). Changes in Genu Recurvatum Throughout the Menstrual Cycle in College Female Athletes. 13th World Federation of Athletic Training & Therapy World Congress. Maynooth, Ireland.

Porter BJ, Gabler CM (June 2025). Outcome Measures Associated with Successful Recovery after Anterior Cruciate Ligament Reconstruction. A poster presentation at the 76th Annual National Athletic Trainers' Association Clinical Symposia & AT Expo. Orlando, FL.

Yeom C, Gabler CM (April 2022). The effects of compression pants on mitigating fatigue during repetitive submaximal running. A poster presentation at the Rocky Mountain Athletic Trainers' Association Annual Clinical Symposium. Albuquerque, NM.

Vinacco CJ, Fuscone AM, Puntso ETT, Gabler CM (April 2025). The Neurocognitive and Psychobehavioral Effects of Visual Constraints during a Reactive Cutting Task in Patients after ACL Reconstruction. A poster presentation at the 2nd Annual Research & Engagement Symposium, Ogden, UT.

Jones A, Deuel S, Manning B, Gabler CM (April 2024). Changes in Genu Recurvatum Throughout the Menstrual Cycle in College Female Athletes. A poster presentation at the 1st Annual Research & Engagement Symposium, Ogden, UT.

Villanueva M, Nohora Y, Gabler CM (March 2022). The Vascular Effects of Cupping Therapy at the Posterior Lower Limb. A poster presentation at the 17th Annual Office of Undergraduate Research Symposium, Ogden, UT.

### **Matthew Donahue**

Hardiman H, Donahue M, Dowdell B. (January 2024) A Comparison of Active and Passive Recovery Strategies Between Repeated Bouts of Submaximal Exercise. A poster presentation at the Big Sky Sports Medicine Conference, Big Sky MT.

### **Joshua Sponbeck**

MacCabe, M., Krupp, T., Sponbeck, J., Johnson, W., & Bruening, D. (2024). The Effect of Ankle and Hallux Positioning on Hallux Force Production. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 14, No. 4, p. 142).

Radford, A. R., Hollifield, S. S., Sponbeck, J., Nguyen, C. L., & Johnson, A. W. (2024). Effect of Age on Achilles Tendon Condition for Long Distance Runners: A Preliminary Report. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 14, No. 4, p. 111).

Hinkle, L. J., Sponbeck, J. K., Fellingham, G. W., & Johnson, A. W. (2024). QUANTIFYING ATROPHY OF INTRINSIC FOOT MUSCLES VIA MAGNETIC RESONANCE IMAGING: A PILOT STUDY. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 8, No. 12, p. 19).

Wilwand, M., Sponbeck, J., Allen, S. P., Snow, G., Hunter, I., & Johnson, A. W. (2024). Lower Extremity Muscle Volume as a Prediction for Sprint Speed in Collegiate Football Players. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 14, No. 4, p. 5).

Hinkle, L. J., Sponbeck, J. K., Fellingham, G. W., & Johnson, A. W. (2024). QUANTIFYING ATROPHY OF INTRINSIC FOOT MUSCLES VIA MAGNETIC RESONANCE IMAGING: A PILOT STUDY. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 8, No. 12, p. 19).

JACK, H., KENNARD, K., JEZEK, S., SPONBECK, J., WILWAND, M., & JOHNSON, A. W. (2023). No Difference found in Hamstring Strength across Division I Football Positions. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 14, No. 3, p. 60).

Robinson, E., Willes, J., Swanson, D., Swanson, D., Sponbeck, J., & Johnson, W. (2023). Validity of Ultrasound Imaging of Abductor Hallucis Volume Demonstrated by Strong Agreement with MRI. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 14, No. 3, p. 69).

Stewart, J. J., Sponbeck, J. K., Nguyen, C., Wilwand, M., & Johnson, A. W. (2023). Assessing the Muscle Size and Size Asymmetry of the Gluteus Maximus and the Hamstring. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 14, No. 3, p. 31).

Jeffery, E. S., Sponbeck, J., Gisseman, B., LaFevre, C., Mitchell, U., Feland, B., & Johnson, A. W. (2023). Analysis Of Male And Female Size Differences Of The Achilles Tendon In Active Aging Adults: 994. *Medicine & Science in Sports & Exercise*, 55(9S), 335.

John, A. M., Nelson, M., Felix, B., Sponbeck, J., & Feland, J. B. (2023). Do Cross Sectional Area and Muscle Stiffness of the Gastrocnemius Muscle of Senior Athletes Correlate with Each Other?.

Armknacht, E., Sponbeck, J. K., Allen, S., Bott, S., Dillon, C., Nguyen, C., ... & Johnson, A. W. (2023). Employing echogenicity as a tool to predict injury to Achilles tendon.

Kaitong, L., Johnson, A. W., Allen, S., Bott, S., Dillon, C., Sponbeck, J. K., ... & Allen, A. (2023). The Effect of Menstruation Duration on the Achilles Tendon Cross-Sectional Area in Female Ballet Dancers.

Smedley, A., Sponbeck, J., Smedley, B., & Johnson, A. W. (2022). Aging Male Runners Show Achilles Tendon Thinning Following a 10k Run While Females Do Not-Pilot Analysis. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 14, No. 2, p. 174).

Gisseman, B., Sponbeck, J., Jeffery, E., LeFevre, C., Feland, B., Hager, R., & Johnson, A. W. (2022). Preliminary Analysis of Male and Female Size Differences of the Achilles Tendon in Active Aging Adults. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 14, No. 2, p. 122).

Sponbeck, J. K., Brogan, L., Ludwig, Z., Batty, C., Hunter, I., & Johnson, A. W. (2022, February). Single Running Bout Achilles Tendon Adaptations in Elite Male Runners with Various Foot Strike Patterns. In *2022 Combined Sections Meeting (CSM)*. APTA.

Johnson, A. W., Swanson, D. C., Mitchell, U. H., Sponbeck, J. K., Swanson, D. A., Allen, S., ... & George, J. D. (2022, February). Ultrasound Imaging Provides Validity Measurement of Intrinsic Foot Muscle Size Compared to MRI. In *2022 Combined Sections Meeting (CSM)*. APTA.

Sponbeck, J., Hunter, I., Brogan, L., Ludwig, Z., Batty, C., & Johnson, W. (2021). Single Running Bout Achilles Tendon Stiffness Adaptations in Elite Male Runners with Various Foot Strike Patterns. In *International Journal of Exercise Science: Conference Proceedings* (Vol. 14, No. 1, p. 54).

Rigby, J. H., Sponbeck, J. K., Perkins, C., & Berg, M. (2017). Achilles Tendon Cross Sectional Area Changes Over a NCAA Division I Cross Country Season. *Journal of Athletic Training*, 52(6), S109.

### Mentoring Activities

New faculty are mentored by the Department Chair and the Program Director. All current faculty are willing to share course materials and meet with the new faculty member or adjunct to review how the course is typically taught and answer their questions. New faculty are strongly encouraged to attend new faculty training sessions, including those offered by the Center of Excellence for Teaching and Learning (CETL). The Program Director and/or Department Chair check in with new faculty on a regular basis to answer questions and review/discuss any issues that have arisen thus far.

### Ongoing Review and Professional Development

Each of our tenure-track faculty undergo regular professional development opportunities which are listed below.

#### **Valerie Herzog:**

Earned a Microcredential on Inclusive Teaching for Equitable Learning from the Association of College and University Educators (ACUE) in 2022.

Attend the NATA Educators' Conference in 2022 and 2024.

Completed Academic Coaching training in 2024 and 2025, sponsored by the WSU Center for Excellence in Teaching and Learning.

#### **Hannah Stedje:**

Attended the NATA Virtual Educators' Conference in 2024.

Earned a Certificate in Effective Instruction from the Association of College and University Educators (ACUE) in May 2023

Earned a Graduate Certificate in Health Professions Education in August 2022.

Completed WSU E-Learning Certificate in Dec 2020.

Version Date: August 2025

### **Matthew Donahue**

WSU AI Learning Community May 2024

Earned four Badges from the Association of College and University Educators (ACUE) for AI in Learning in May 2024.

Completed WSU E-Learning Certificate in Dec 2022.

### **Conrad Gabler**

Completed WSU E-Learning Certification in Dec 2023.

Attended the CAATE Accreditation Conference in Sept 2022.

### **Robyn Thompson**

Earned a Microcredential on Inclusive Teaching for Equitable Learning from the Association of College and University Educators (ACUE) in Fall 2024.

Earned a Microcredential on Inclusive Teaching for Engaged Learning from the Association of College and University Educators (ACUE) in Spring 2025.

Attended WSU Inspire and Innovate WSU Workshop Summer 2025.

Professional Credential-Feeding Fundamentals, Certified SOFFI Professional-Supporting Oral Feeding in Fragile Infants, January 2024

### **Rhonda Roth**

Completed the Higher Education Teaching Specialization (HETS) at the University of Utah - 2022

Became a Certified Provider in Comprehensive Behavioral Intervention for Tics (CBIT) with the Tourette Association of America in 2022

Became Certified in the Beckman Oral Motor Protocol through Beckman and Associates in 2023

Completed the Goldman Saks 10,000 Small Businesses Program in Utah in 2024

Completed Inspiring Inquiry and Life Long Learning in your Online Course through ACUE in 2025

Completed Effective Teaching 101 through ACUE 9-9-2025

Version Date: August 2025

Use and impact of high-impact educational experiences

- Internships (RHS 2890 and 4890)
- Undergraduate research (RHS 4800)
- Hands-on, instructor-supervised laboratory activities (RHS 1300, 2175, 2300, 2431, 3300, 3301, 3550, 4150, 4250).

**Please respond to the following prompt:**

*Describe faculty engagement in department governance, in academic planning, and in maintaining a positive learning environment for its students.*

-All faculty participate in weekly department meetings where curriculum decisions and other important decisions are made collaboratively. When time allows, faculty share teaching innovations during these meetings that encourage student engagement and learning. When challenging situations involving students emerge, discussions and decisions are made collaboratively between faculty, staff, program directors, and the department chair, where appropriate.

## Standard F – Program Support

Support Staff, Administration, Facilities, Equipment, and Library

### Adequacy of Staff

i. Include evidence of ongoing Staff Development

Our staff member who serves as academic advisor/recruiter regularly participates in staff development opportunities. In the past year, he has completed the following:

- Climbing with Confidence: Data Literacy Essentials  
*“Data isn’t just for analysts—understanding and using data is essential for everyone. In this hands-on session, you’ll learn the fundamentals of data literacy tailored to higher ed professionals, especially front-line staff. We’ll explore how to interpret, work with, and confidently communicate data that’s relevant to your role and the university’s goals.”*
- Advisor Information Series  
*“Designed for advisors to learn more about their role and the tools at their disposal to assist students the best way possible”*
- Monthly University Academic Advising Committee (UAAC) meetings/trainings

### Adequacy of Administrative Support

In 2023, the departmental administrative specialist resigned and we opted to replace them with an academic advisor/recruiter to fill this unmet need. We hired a work-study student to complete many of the tasks that an administrative specialist would have done. The advisor/recruiter retained the official role as the reconciler. This has worked adequately, but is not sufficient to support our department, especially with the addition of the bachelor's degree program in Occupational Therapy Assistant. The Dean's office has secured funding to allow us to hire an ½ time administrative specialist as of November 2025. The position will be posted in mid-November 2025.

### Adequacy of Facilities and Equipment

The Athletic Training & Occupational Therapy Department is housed in the Swenson Building within the Stromberg Complex. The facility provides adequate classrooms, laboratories, and equipment to support the program. Faculty members have written and received several on-campus research grants for equipment needed for teaching and research.

The department has a laboratory classroom (Room 315) containing approximately \$100,000 in state-of-the-art therapy equipment, including three different lasers, two different shortwave diathermy units, a lumbar/cervical traction unit, and a variety of electrical stimulation/ultrasound combination units. There is also a large variety of rehabilitation equipment and supplies, general medical assessment tools, and taping/bracing/casting supplies.

The Rehabilitation Sciences program also utilizes Room 229 in the Swenson Building, which has both a classroom area as well as a large open area. The open area is used for practicing first aid/CPR skills,

spineboarding, orthopedic assessment, and rehabilitation techniques.

The Rehabilitation Sciences program also has access to a Gait Analysis/Biomechanics lab equipped with a new isokinetic dynamometer, camera system, force plates, and a wireless EMG system. The department faculty and students also use the Nutrition/Biochemistry lab (Room 133) for research studies, which houses additional equipment, including an Isothermix for measuring intramuscular temperature, a diagnostic ultrasound unit, a forceplate, and a -80 degree freezer for storing samples.

Finally, with the addition of our Occupational Therapy Assistant program, we are adding a new facility (Occupational Therapy Pathways Building) which RHS students will be able to utilize for classes and laboratory activities beginning in the Fall 2026 semester.

### Adequacy of Library Resources

The Stewart Library provides information resources and services to multiple WSU campuses. Print, electronic, including databases, and audiovisual materials are provided in adequate titles. Hours of operation are extensive and meet student and faculty needs. The library website (<http://library.weber.edu>) assists with meeting 24/7 needs. Jason Francis is the librarian assigned to the Dumke College of Health Professions. Each librarian has an annual budget to provide current resources for the program. The resources more than adequately meet the program, faculty, and student needs. When a resource is not in the library, the interlibrary loan process enables access to most materials.

## **Standard G - Relationships with External Communities**

### Description of Role in External Communities

The Rehabilitation Sciences program utilizes many off-campus internship sites that were developed over the past 15+ years through efforts by all of the faculty. The number, quality, and variety of internship sites benefit our students tremendously as they provide a breadth of clinical opportunities and experiences. Through their internships at these sites, students have the opportunity to work with a variety of health care professionals in several different settings, including outpatient rehabilitation, inpatient rehabilitation, athletic training at the collegiate level, athletic training at the high school level, family practice clinics, orthopedic clinics, etc. Among our various internship sites, we also have each of our program Advisory Committee members serve as internship supervisors at their clinical sites. See Appendix E for a current list of student internship sites.

### Summary of External Advisory Committee Minutes

#### Spring 2024 Advisory Committee Meeting:

The focus of our conversation during the meeting was improving students' interpersonal/soft skills with patients. We have been working on incorporating this in all the Rehabilitation Sciences classes, but we are looking toward redesigning the therapeutic rehabilitation course (RHS 4250), and it would fit well to weave the shared decision-making philosophy and patient communication more into that course.

\*We are now implementing these suggestions in our Fall 2025 RHS 4250 course.

Spring 2025 Advisory Committee Meeting:

During our meeting, we discussed the internship experience for our Rehabilitation Sciences students. Many of our students secure their internship at their current place of work, but we have a few students who do not know where to intern. For these students, our advisory board members will be recommended as the first individuals to reach out to for internship opportunities.

\*We are now implementing this improvement during Fall 2025.

An area we felt our students could improve on was professional communication.

We discussed weaving patient education and referral role plays into our evaluation courses (RHS 3300 & RHS 3301) as well as our therapeutic interventions courses (RHS 4150 & RHS 4250).

\*We now include several professional communication-building opportunities in these courses.

For students applying to MD school, we were advised to encourage our students to have additional service, research, and/or international experiences along with excellent grades.

\*We are now encouraging these students to take our RHS 4800 Individual Projects course if they are interested in being involved with research.

Our board members also recommended we help prepare our students for "the grind" that patient care has and ensure they have a passion for this field.

\*We introduce this in our introduction to rehabilitation sciences course (RHS 1550), but we will work on making this clearer in the course.

Lastly, we invited our advisory board members to be guest speakers for either our introduction to rehabilitation sciences course (RHS 1550) or our RHS 4250 (rehabilitation techniques) course.

\*We now have several of these members speaking in these two courses.

### Community and Graduate Success

As the Bachelor of Science in Rehabilitation Sciences program is designed to equip our graduates to apply for and attend a graduate program in healthcare, currently, our only way of tracking our graduate success is through our graduate survey and alumni survey issued annually.

Over the past 10 years, we have been able to acquire data from the Dumke Pre-Medical Program at Weber State University. This data shows the annual number of Athletic Therapy/Rehabilitation Sciences majors who have applied to medical school, and the percentage who were accepted.

In the previous academic year (2024-2025), we only had one graduate from our programs apply for Medical school but that student was accepted, so our departmental acceptance rate is 100%. Our departmental average MCAT score is also 508 which is higher than both the WSU average as well as the National average score.

**Standard H – Program Summary**  
 Results of Previous Program Reviews

Date of Previous Program Review:		
Text of Recommendation	Intended Action	Progress (be specific)
<p>Recommendation 1            Unmet Learning Outcome (2.A) for AT 3300: Less than 90% of students will earn an 70% or better on both the written exam and oral/practical exam.</p>	<p>AT 3300 and AT 3301 have been undergoing revision since the admission into the Bachelor of Science in Athletic Training program was discontinued (Fall 2018). The faculty scheduled a faculty retreat in Spring 2020 to discuss proposed changes to the Athletic Therapy curriculum, including the course content and structure of AT 3300 and AT 3301.</p>	<p>Year 1: Spring 2020 faculty retreat. Revised the structure of AT 3000 and AT 3301 to focus on professional communication and history taking of non-life threatening orthopedic injuries and narrow the evaluation to just one gold standard selective tissue test per injury.            Year 2 Action: Submitted curriculum proposal to change AT 3300/3301 to RHS 3300/3301            Year 3 Action: Proposal approved; oral practical exams removed from RHS 3300/3301            Year 4 Action: Learning outcome measures changed to final evaluation video podcast in RHS 3300 and final cranial nerve evaluation video podcast in RHS 3301. <b>FULFILLED (See Appendix G)</b></p>

<p>Recommendation 2 AT 2175 is being taught differently at Weber State University than at high schools (concurrent enrollment).</p>	<p>The instructors who are teaching AT 2175 will be meeting in Summer 2020 to discuss structure of the course and agree on standardized method of pedagogy for high school instructors to follow.</p>	<p>Year 1: Spring 2020 faculty retreat. Decided to offer the course in both an online and a hybrid format including a broad overview of sports medicine Year 2 Action: Course re-written to be offered in online or hybrid format. Sandbox course created to offer standard delivery across high schools and University. Curriculum proposal to change AT 2175 to RHS 2175 Year 3 Action: RHS 2175 offered in Hybrid, and Online formats with two sections offered each semester. Introduced course rotation schedule so that students could select if they wished to take the course in the Hybrid or the Online format. Year 4 Action: Course and learning outcomes redesigned to meet the new strands and standards for high school sports medicine courses. Began collecting assessment data on those course learning outcomes to help meet concurrent enrollment accreditation standards. <b>FULFILLED</b></p>
<p>Recommendation 3 The current Athletic Therapy program curriculum is biased towards pre-athletic training students, and restrictive to students who are trying to complete graduate prerequisite courses outside of athletic training.</p>	<p>The faculty scheduled a faculty retreat in Spring 2020 to discuss a revision of the Athletic Therapy curriculum that would accommodate the prerequisite coursework of graduate programs outside of Weber State University.</p>	<p>Year 1 Action: Spring 2020 faculty retreat: Decided to develop pre-professional maps to assist students with obtaining prerequisites for graduate programs Year 2 Action: Curriculum proposal to reduce overall required credits, offer</p>

		<p>elective options, and allow more space for students to take prerequisites for their chosen graduate school field.</p> <p>Year 3 Action: Curriculum proposal approved and program renamed to Rehabilitation Sciences reducing the total program credits from 63 to 57 credits minimum which includes a choice of 4 RHS electives for students to choose 1 to take.</p> <p>Developed the 3+2 program for RHS to MSAT.</p> <p>Year 4 Action: We now have a variety different healthcare providers teaching the RHS courses as adjuncts.</p> <p><b>FULFILLED</b></p>
<p>Recommendation 4 Admission into the Athletic Therapy program is currently approved on a rolling basis. This makes it difficult for students to plan for graduation, and for advisors to track the admission/graduation timeline of numerous students.</p>	<p>The faculty scheduled a faculty retreat in Spring 2020 to discuss the application process of the Athletic Therapy program. We are also planning to meet with the Health Sciences department to discuss the possibility of adding an Athletic Therapy track within their Health Sciences (AS) program, which could be a route for students to apply to the Bachelor of Science in Athletic Therapy program.</p>	<p>Year 1 Action: Spring 2020 faculty retreat discussed dividing advising responsibilities between part-time admin, program director, and College of Health Professions</p> <p>Year 2 Action: Hired full-time admin to partially handle advising duties. Moved admission into the program up a year so students apply to the program after completing 2,000 level courses to keep students on track for graduating on time.</p> <p>Year 3 Action: Noticed a greater need for advising within our program.</p> <p>Year 4 Action: Hired full-time advisor/recruiter/marketer and streamlined</p>

		<p>our online admissions process to have 3 application cycles a year. Worked with Health Sciences to add an RHS track to their A.S. as a route for applying to the RHS program, but the proposal was rejected by the registrar. As an alternative to this proposal, students who are taking their A.S. in Health Sciences who hope to go on to an RHS bachelors will be directed by the DCHP advisors to take RHS prerequisites quite in the A.S.</p> <p><b>FULFILLED</b></p>
<p>Recommendation 5 The current name of the major/program (Athletic Therapy) is confusing to students and colleagues at Weber State University.</p>	<p>The faculty has discussed a major/program name change to Rehabilitation Sciences. We plan to submit a proposal for this name change in Fall 2020.</p>	<p>Year 1 Action: Submitted proposal for name change to Rehabilitation Sciences Year 2 Action: Proposal approved Year 3 Action: Enrolling students in RHS while phasing out Athletic Therapy Year 4 Action: Last Athletic Therapy students graduated in summer 2025.</p> <p><b>FULFILLED</b></p>
<p>Recommendation 6 Need for departmental academic advisor</p>	<p>Submit a proposal for either a part-time staff to serve as the departmental academic advisor, or increase our part-time Administrative Specialist II to full-time status with the added responsibility/title of departmental academic advisor.</p>	<p>Year 1 Action: Proposal for part-time department admin transition to full-time and add the responsibility of academic advisor Year 2 Action: Full-time admin with split responsibility of academic advisor Year 3 Action: See a greater need for more academic advising as well as marketing/recruiting</p>

		Year 4 Action: Hired full-time marketing/recruiting/academic advisor and admin duties are now completed by a work-study student. New need identified for full-time admin for our department now that we have the OTA program as well.
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**Program Summary Narrative**

Over the past five years, our program has undergone a series of intentional changes designed to address identified challenges, improve student learning outcomes, and align our curriculum with evolving educational and professional needs.

**Assessment of AT 3300/3301 Learning Outcomes**

An initial concern was identified with AT 3300, where less than 90% of students achieved a 70% or better on both the written and oral/practical exams. To address this, faculty met in Spring 2020 and revised AT 3000 and AT 3301, shifting the focus to professional communication and patient history-taking for non-life-threatening orthopedic injuries, while narrowing evaluations to a single gold-standard selective tissue test per injury. In the second year, a curriculum proposal was submitted to rename our program as Rehabilitation Sciences and thus reclassify AT 3300/3301 as RHS 3300/3301. By year 3, the proposal was approved. At this time, we reorganized the course content which removed the oral practical exams and replaced them with more appropriate capstone assessments which aligned more fully with the new course outcomes. In the fourth year, we implemented the new assessments: final evaluation video podcasts (RHS 3300) and cranial nerve evaluation video podcasts (RHS 3301) and began utilizing those assessments for our program learning outcomes. With these changes, the learning outcome was successfully met (see Appendix G).

**Standardization of AT 2175/RHS 2175 Across Institutions**

Another issue identified in our previous program review was inconsistency in how AT 2175 was delivered at high schools as concurrent enrollment but was not offered at Weber State. In Spring 2020, faculty decided to redesign the course and offer it in both online and hybrid formats with a broad sports medicine overview. By year two, the course was rewritten, standardized in a sandbox course, and a curriculum proposal was submitted to rename it RHS 2175. In the third year, RHS 2175 launched in both formats with multiple sections each semester, supported by a rotation schedule for student flexibility. By year four, course content and learning

outcomes were aligned with new state high school sports medicine standards, and assessment data collection began to meet concurrent enrollment accreditation requirements. This recommendation was successfully fulfilled.

### **Curricular Flexibility and Graduate Preparation**

The program's initial structure was overly oriented toward pre-athletic training students, limiting flexibility for students preparing for other graduate health fields. In Spring 2020, the faculty developed pre-professional maps to support various health profession-related pathways. In year two, a curriculum proposal was submitted to reduce required credits, expand elective offerings, and create space for prerequisite coursework in other health professions. This proposal was approved in year three, resulting in the renamed Rehabilitation Sciences program with reduced credits (63 to 57) and flexible elective choices. The 3+2 pathway to the MSAT was also developed during this time. By year four, a variety of healthcare providers joined the program as adjunct faculty, further broadening student learning experiences.

### **Admissions and Advising Improvements**

Admission into the Athletic Therapy (now Rehabilitation Sciences) program was originally handled on a rolling basis, creating challenges for both students and advisors. At the 2020 faculty retreat, we decided to divide the responsibilities of advising between administration, program leadership, and the College of Health Professions. In year two, a full-time administrator was hired, and admissions were shifted earlier in students' academic careers to keep them on track for timely graduation. By year three, the demand for advising grew, and in year four, a full-time advisor/recruiter/marketer was hired. Admissions were streamlined into three annual cycles, and collaboration with Health Sciences created a clearer pathway for A.S. students into the RHS program. While one proposed RHS track addition to the Health Sciences A.S. degree was rejected, advisors now guide students to take RHS prerequisites during their A.S. coursework. This process has now been successfully fulfilled.

### **Program Identity and Name Change**

Finally, confusion surrounding the program's original name, Athletic Therapy, prompted a faculty proposal in year one to rename the program Rehabilitation Sciences. The proposal was approved in year two, and by year three, students were enrolled under the new program title (Rehabilitation Sciences) while phasing out the former (Athletic Therapy). The last cohort of Athletic Therapy students graduated in summer 2025, completing the transition. This initiative is now fulfilled.

### **Standard I – Career Outcomes; Ongoing Program Demand and Career Advising**

The ongoing demand for the careers pursued by graduates of our Rehabilitation Sciences program (which leads to graduate school in athletic training, chiropractic, medicine, occupational therapy, orthotist-prosthetist, physical therapy, and physician assistant medicine) can be evaluated by examining the completion rates of these advanced degree programs and the overall job market activity for related health and medical occupations, particularly in Utah, where many of our students wish to enter the workforce. The Office of Institutional Effectiveness provides our program with data on these graduate programs and occupations from a company called Lightcast.

### **Demand for our Graduates entering Graduate Programs**

While this data is not fully representative of the graduates of our Rehabilitation Sciences students, it does represent the programs and career fields our students are preparing to enter across the Mountain Division region (AZ, CO, ID, MT, NV, NM, UT, WY). The growth rates of these programs and previous data on graduate completions indicate that our program is well-positioned to not only have a variety of options for our students to enter graduate programs, but also have a high rate of graduation and job success.

<b>Graduate Program Professional Field</b>	<b>Geographic Region</b>	<b>2023 Completions</b>	<b>Growth (2019-2023)</b>	<b>Predominant Award Level</b>
Physical Therapy/Therapist (51.2308)	Mountain Division	994	34%	Doctorate Degree (98.7%)
Occupational Therapy/Therapist (51.2306)	Mountain Division	322	35%	Master's (52.8%) & Doctorate (47.2%)
Physician Assistant (51.0912)	Mountain Division	719	57%	Master's Degree (98.3%)
Medicine (51.1201)	Mountain Division	689	12%	Doctorate Degree (100.0%)
Athletic Training/Trainer (51.0913)	Mountain Division	184	63%	Master's Degree (98.4%)

Chiropractic (51.0101)	United States	2,681	7%	Doctorate Degree (100.0%)
Orthotist/Prosthetist (51.2307)	United States	250	22%	Master's Degree (100.0%)

### **Demand for Related Undergraduate/Preparatory Programs in Utah**

In 2023, Weber State University accounted for the majority of undergraduate/preparatory program completions in Utah that prepare students for graduate school in these health profession-related fields (29, or 90.6% market share).

### **Demand for the Corresponding Jobs in Utah**

The Lightcast analysis of 14 medical, health professions, and athletic training occupations in Utah (including Athletic Trainers and Physician Assistants, among others) shows there were 41,913 jobs in these occupations in Utah in 2020, projected to grow by 23.9% to 51,932 jobs by 2025.

Armed with this data, we will continue to work with our advising team to help prepare competitive students for acceptance into their graduate schools of choice so that they can become qualified clinicians in the workforce upon graduation.

Career advising is available to our students through the Dumke College of Health Professions advisors and our academic advisor/recruiter. In addition to these services, our college career services representative speaks in our RHS 1550 (Introduction to Rehabilitation Sciences) about graduate school and career readiness items such as building a resume and interviewing skills. This class is also designed to introduce students to each of the career options Rehabilitation Sciences graduates may pursue after their graduate school education. This class brings in guest speakers from various health professions to share with students a day in their life, their journey to this field, and the educational pathway to the field. Along with RHS 1550, our internship classes (RHS 2890 and RHS 4890) pair a student with a supervising clinician in their chosen career field to observe and learn from. The assignments in these internship classes are designed to facilitate conversations between the student and their supervisor regarding the educational pathway to this career, the continuing education requirements, tips for graduate school, and advise for the student preparing to enter the profession.

APPENDICES

Appendix A: Student and Faculty Statistical Summary

<b>Rehabilitation Sciences</b>	2020-21	2021-22	2022-23	2023-24	2024-25*
<b>Department Student Credit Hours Total <sup>1</sup></b>	<b>2,009</b>	<b>2,338</b>	<b>2,455</b>	<b>2,344</b>	<b>2,813</b>
Athletic Therapy SCH	1,359	0	0	0	0
Rehabilitation Sciences SCH		1,363	1,613	1,579	1,732
Master of Athletic Training SCH	650	975	842	765	1,081
<b>Department Student FTE Total <sup>2</sup></b>	<b>78.00</b>	<b>94.00</b>	<b>96.00</b>	<b>91.00</b>	<b>112.00</b>
Athletic Therapy FTE	45.00	0.00	0.00	0.00	0.00
Rehabilitation Sciences FTE		45.00	54.00	53.00	58.00
Master of Athletic Training FTE	33.00	49.00	42.00	38.00	54.00
<b>Undergrad Student Majors <sup>3</sup></b>					
Student Majors	234	196	202	188	194
<b>Undergrad Program Graduates <sup>4</sup></b>					

Bachelor Degree	25	22	29	28	32
<b>Undergrad Student Demographic Profile <sup>5</sup></b>					
Female	107	94	115	111	111
Male	127	102	87	77	83
<b>Faculty FTE Total <sup>6</sup></b>	<b>7.6</b>	<b>7.7</b>	<b>8.5</b>	<b>8.2</b>	N/A
Adjunct FTE	3.5	3.2	3.9	3.6	N/A
Contract FTE	4.1	4.6	4.6	4.6	N/A
<b>Student/Faculty Ratio <sup>7</sup></b>	<b>10.3</b>	<b>12.2</b>	<b>11.3</b>	<b>11.1</b>	<b>N/A</b>

Appendix B:

**Faculty**

	<b>Tenured</b>	<b>Tenure-Track</b>	<b>Other Contract</b>	<b>Adjunct</b>
<b>Number of faculty with Doctoral degrees</b>	3	3	1	1
<b>Number of faculty with Master’s degrees</b>	0	0	0	2
<b>Number of faculty with Bachelor’s degrees</b>	0	0	0	1
<b>Other Faculty</b>	0	0	0	0
<b>Total</b>	3	3	1	4

**Most recent completed year (2024-25); contract/Adjunct Faculty Profile**

<b>Name</b>	<b>Rank</b>	<b>Tenure Status</b>	<b>Highest Degree</b>	<b>Years of Teaching</b>	<b>Areas of Expertise</b>
Valerie Herzog	Prof.	Tenured	EdD	26	Rehabilitation, Management, Research
Matthew Donahue	Assoc. Prof.	Tenured	PhD	13	Emergency Care, Orthopedic Assessment, Research
Conrad Gabler	Assoc. Prof.	Tenured	PhD	10	Therapeutic Interventions, Manual Therapy, Orthopedic Assessment

Alysia Cohen	Assoc. Prof.	Tenured	PhD	15	Sport Psychology, Rehabilitation
Hannah Stedge	Assistant Prof.	Tenure-track	PhD	13	Rehabilitation, Orthopedic Assessment, Environmental Illnesses
Joshua Sponbeck	Instructor	NA	PhD	6	Rehabilitation, Anatomy & Physiology, Biomechanics
Justin Valdez	Staff	NA	MS	2	Emergency Care
Breana Cutler	Adjunct	NA	MS	1	Taping & Splinting, Emergency Care
Lester Stone	Adjunct	NA	BS	15	Emergency Care
Alex Leonardi	Adjunct	NA	MS	5	Orthopedic Assessment
Ashley Tanner	Adjunct	NA	DPT	1	Therapeutic Interventions

**Academic Year 2023-2024; contract/Adjunct Faculty Profile**

<b>Name</b>	<b>Rank</b>	<b>Tenure Status</b>	<b>Highest Degree</b>	<b>Years of Teaching</b>	<b>Areas of Expertise</b>
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Valerie Herzog	Prof.	Tenured	EdD	26	Rehabilitation, Management, Research
Matthew Donahue	Assoc. Prof.	Tenured	PhD	12	Emergency Care, Orthopedic Assessment, Research
Conrad Gabler	Assoc. Prof.	Tenured	PhD	10	Therapeutic Interventions, Manual Therapy, Orthopedic Assessment
Alysia Cohen	Assoc. Prof.	Tenured	PhD	14	Sport Psychology, Rehabilitation
Hannah Stedje	Assistant Prof.	Tenure-track	PhD	12	Rehabilitation, Orthopedic Assessment, Environmental Illnesses
Justin Valdez	Staff	NA	MS	2	Emergency Care
Lester Stone	Adjunct	NA	BS	14	Emergency Care
Alex Leonardi	Adjunct	NA	MS	4	Orthopedic Assessment

**Academic Year 2022-2023; contract/Adjunct Faculty Profile**

<b>Name</b>	<b>Rank</b>	<b>Tenure Status</b>	<b>Highest Degree</b>	<b>Years of Teaching</b>	<b>Areas of Expertise</b>
Valerie Herzog	Prof.	Tenured	EdD	26	Rehabilitation, Management, Research
Matthew Donahue	Assoc. Prof.	Tenured	PhD	12	Emergency Care, Orthopedic Assessment, Research
Conrad Gabler	Assoc. Prof.	Tenured	PhD	10	Therapeutic Interventions, Manual Therapy, Orthopedic Assessment
Alysia Cohen	Assoc. Prof.	Tenured	PhD	13	Sport Psychology, Rehabilitation
Hannah Stedje	Instructor	Non tenure-track	PhD	11	Rehabilitation, Orthopedic Assessment, Environmental Illnesses
Lester Stone	Adjunct	NA	BS	13	Emergency Care
Alex Leonardi	Adjunct	NA	MS	3	Orthopedic Assessment

**Academic Year 2021-2022; contract/Adjunct Faculty Profile**

Version Date: August 2025

<b>Name</b>	<b>Rank</b>	<b>Tenure Status</b>	<b>Highest Degree</b>	<b>Years of Teaching</b>	<b>Areas of Expertise</b>
Valerie Herzog	Prof.	Tenured	EdD	23	Rehabilitation, Management, Research
Matthew Donahue	Assoc. Prof.	Tenured	PhD	10	Emergency Care, Orthopedic Assessment, Research
Conrad Gabler	Assist. Prof.	Tenure-track	PhD	6	Therapeutic Interventions, Manual Therapy, Orthopedic Assessment
Alysia Cohen	Assoc. Prof.	Tenured	PhD	12	Sport Psychology, Rehabilitation
Hannah Stedge	Instructor	Non tenure-track	PhD	10	Rehabilitation, Orthopedic Assessment, Environmental Illnesses
Lester Stone	Adjunct	NA	BS	12	Emergency Care
Alex Leonardi	Adjunct	NA	MS	2	Orthopedic Assessment

**Academic Year 2020-2021; contract/Adjunct Faculty Profile**

Version Date: August 2025

<b>Name</b>	<b>Rank</b>	<b>Tenure Status</b>	<b>Highest Degree</b>	<b>Years of Teaching</b>	<b>Areas of Expertise</b>
Valerie Herzog	Prof.	Tenured	EdD	22	Rehabilitation, Management, Research
Matthew Donahue	Assoc. Prof.	Tenured	PhD	9	Emergency Care, Orthopedic Assessment, Research
Conrad Gabler	Assist. Prof.	Tenure-track	PhD	5	Therapeutic Interventions, Manual Therapy, Orthopedic Assessment
Alysia Cohen	Assist. Prof.	Tenure-track	PhD	11	Sport Psychology, Rehabilitation
Hannah Stedje	Instructor	Non tenure-track	PhD	9	Rehabilitation, Orthopedic Assessment, Environmental Illnesses
Lester Stone	Adjunct	NA	BS	11	Emergency Care
Alex Leonardi	Adjunct	NA	MS	1	Orthopedic Assessment

Appendix C: Staff Profile

Version Date: August 2025

Name	Job Title	Years of Employment	Areas of Expertise
Justin Valdez	Academic Advisor/Recruiter	2	Emergency Care, Advising, and Career Exploration

Appendix D: Financial Analysis Summary

<b>Department of Athletic Training &amp; Occupational Therapy</b>					
<b>Funding</b>	<b>2020-21</b>	<b>2021-22</b>	<b>2022-23</b>	<b>2023-24</b>	<b>2024-25*</b>
Appropriated Fund	592,813	677,368	719,178	732,259	837,561
Other: IW Funding from CE	\$47,530	26,495	71,298	64,874	70,215
Special Legislative Appropriation					
Grants or Contracts					
Special Fees/Differential Tuition	25,335	22,231	38,139	40,072	28,362
<b>Total</b>	<b>665,678</b>	<b>726,094</b>	<b>828,615</b>	<b>837,205</b>	<b>936,138</b>

Student FTE Total <sup>1</sup>	78.00	94.00	96.00	91.00	112.00
Cost per FTE <sup>2</sup>	8534.33	7724.40	8631.41	9200.05	8358.38

Appendix E: External Community Involvement Names and Organizations

Name	Organization
Veronica Bain, ATC	Intermountain Healthcare
Brittany Kester, PA, ATC	Ogden Clinic
Steven Scharmann, MD	Intermountain Healthcare
Keoni Dellermann, DC, ATC	Renew Sports Med
Deven Bawden, DPT	Body Tune Physical Therapy
Darin Stratford, OT	Intermountain Healthcare

Appendix F: Site Visit Team (both internal and external members)

Name	Position	Affiliation
Bryan Gee, PhD., OTD, OTR/L, BCP, CLA, FAOTA	Director of Doctor of Occupational Therapy Program, Chair of the Department of Occupational Therapy	External – Rocky Mountain University of Health Professions
Jordan West, PT, DPT	Assistant Professor, Health Sciences	Internal – Weber State University

Appendix G: Evidence of Learning Courses within the Major

<b>Evidence of Learning: Courses within the Major</b>					
<b>Measurable Learning Outcome</b>	<b>Method of Measurement</b>	<b>Threshold for Evidence of Student Learning</b>	<b>Findings Linked to Learning Outcomes for AY 24-25</b>	<b>Interpretation of Findings</b>	<b>Action Plan/Use of Results</b>
	<b>Direct and Indirect Measures*</b>				
1) Educate patients in safe performance of exercise techniques to minimize risk during a therapeutic intervention session.	Measure 1: RHS 4250 labs	Measure 1: 90% of students will score a "meets expectations" rating (4/5 or better) in ability to safely educate patients	Measure 1: 100% of students met threshold	Measure 1: Students successfully demonstrated appropriate skills to meet this threshold	Measure 1: No curricular or pedagogical changes needed at this time
	Measure 2: RHS 2175 Rehabilitation Techniques lab	Measure 2: 90% of students will score a "approaching expectations" (3/5 or better) in ability to safely educate patients	Newly aligned measure. No data to report yet.	N/A	Measure 2: Begin collecting this assessment data in Fall 2025
2) Implement evaluation techniques in the assessment of an injured or ill patient.	Measure 1: RHS 3300 Final evaluation video	Measure 1a: 90% of students will score a 3/5 level on a five-point rubric.	Measure 1a: 100% of students met threshold	Measure 1: Students successfully demonstrated competence	Measure 1: No curricular or pedagogical changes needed at this time
		Measure 1b: 100% of students will	Measure 1b: 100% of students met threshold		

<b>Evidence of Learning: Courses within the Major</b>					
<b>Measurable Learning Outcome</b>	<b>Method of Measurement</b>  <b>Direct and Indirect Measures*</b>	<b>Threshold for Evidence of Student Learning</b>	<b>Findings Linked to Learning Outcomes for AY 24-25</b>	<b>Interpretation of Findings</b>	<b>Action Plan/Use of Results</b>
		score a 2/5 on a five-point rubric.			
	Measure 2: RHS 3301 final cranial nerve assessment video	Measure 2a: 90% of students will score a 3/5 level on a five-point rubric	Measure 2a: 100% of students met threshold	Measure 2: Students successfully demonstrated competence	Measure 2: No curricular or pedagogical changes needed at this time
		Measure 2b: 100% of students will score at a 2/5 level or higher on a five-point rubric	Measure 2b: 100% of students met threshold		
3) Formulate a clinical impression for the determination of a patients' plan of care.	Measure 1: RHS 4150 Patient treatment performance	Measure 1: 90% of students will earn a 4/5 or better on a standardized rubric for both final exam essay questions involving a patient care scenario.	Measure 1: 64.71% of students scored a 4/5 on the final exam questions	Measure 1: Our students did not meet the threshold for competence in this measure. However, we taught 4150 online in fall 2024 which students performed poorly in due to less hands-on	Measure 1: Change needed- Consider revising the RHS 4150 online course to better equip students with hands' on skills

**Evidence of Learning: Courses within the Major**

<b>Measurable Learning Outcome</b>	<b>Method of Measurement</b>  <b>Direct and Indirect Measures*</b>	<b>Threshold for Evidence of Student Learning</b>	<b>Findings Linked to Learning Outcomes for AY 24-25</b>	<b>Interpretation of Findings</b>	<b>Action Plan/Use of Results</b>
				practice and these scores lowered the overall average.	
	Measure 2: RHS 3301 Final (head/neck evaluation) SOAP note	Measure 2: 90% of students will earn a 3/5 rating on their ability to write an immediate plan of care in the head/neck SOAP note	Measure 2: 87.50% of students earned a 3/5 or higher	Measure 2: Our students did not meet the threshold for competence in this measure. The average scores differed greatly between our online and face to face formats which lowered our overall average scores.	Measure 2: Change needed- We will work to standardize the delivery between face to face and online offerings of this course.
4) Employ effective communication as a part of an interprofessional healthcare team to	Measure 1: RHS 1550 Patient Population Reflection Paper	Measure 1: 80% of students will score a 90% on a faculty-developed rubric assessing their ability to reflect on their awareness of	Newly aligned measure. No data to report yet	N/A	Measure 1: Begin collecting this assessment data in Fall 2025

**Evidence of Learning: Courses within the Major**

<b>Measurable Learning Outcome</b>	<b>Method of Measurement</b>  <b>Direct and Indirect Measures*</b>	<b>Threshold for Evidence of Student Learning</b>	<b>Findings Linked to Learning Outcomes for AY 24-25</b>	<b>Interpretation of Findings</b>	<b>Action Plan/Use of Results</b>
appropriately care for all patients.		care for all patient populations.			
	Measure 2: RHS 4890 Patient and healthcare team communication	Measure 2: 90% of students will be rated as “strongly agree” when supervisors are asked “student communicates effectively with other members of the healthcare team and administration”	Measure 2: More than 90% of students met this threshold	Measure 2: Our students are practicing effective patient and healthcare team communication	Measure 2: No curricular or pedagogical changes needed at this time
5) Recondition patients for optimal performance and function.	Measure 1: RHS 4250 Orthopedic Case & Rehabilitation Plan	Measure 1: 90% of students will earn an 80% or better on the assigned case & written rehabilitation plan as scored by a standardized rubric.	Measure 1: 100% of students met threshold	Measure 1: Our students are meeting a minimum level of competency in designing rehabilitation programs as a foundation to prepare them for graduate school	Measure 1: No curricular or pedagogical changes needed at this time

<b>Evidence of Learning: Courses within the Major</b>					
<b>Measurable Learning Outcome</b>	<b>Method of Measurement</b>	<b>Threshold for Evidence of Student Learning</b>	<b>Findings Linked to Learning Outcomes for AY 24-25</b>	<b>Interpretation of Findings</b>	<b>Action Plan/Use of Results</b>
	<b>Direct and Indirect Measures*</b>				
	Measure 2: RHS 2175 Rehabilitation Techniques lab	Measure 2: 90% of students will score a “approaching expectations” (3/5 or better) in ability to safely educate patients	Newly aligned measure. No data to report yet	N/A	Measure 2: Begin collecting this assessment data in Fall 2025
6) Engage in critical appraisal of clinical research to advance the students’ knowledge and provide quality care to their patients.	Measure 1: RHS 4250 Written annotated bibliography	Measure 1: 90% of students will score a 70% or better on the written annotated bibliography and clinical decision	Measure 1: 100% of students met threshold	Measure 1: Our students are demonstrating early competency in the ability to critically appraise literature to formulate a clinical decision	Measure 1: No curricular or pedagogical changes needed at this time
	Measure 2: RHS 4150 Ignite presentation	Measure 2: 90% of students will score an 80% or higher on the Ignite presentation	Measure 2: 76.47% of students met threshold in fall; 100% of students met threshold in spring	Our students did not meet the threshold for competence in this measure. However, we taught 4150 online in fall 2024 which students performed poorly in	Measure 2: Change needed- Consider revising the RHS 4150 online course to better equip students with hands’ on skills

**Evidence of Learning: Courses within the Major**

<b>Measurable Learning Outcome</b>	<b>Method of Measurement</b>  <b>Direct and Indirect Measures*</b>	<b>Threshold for Evidence of Student Learning</b>	<b>Findings Linked to Learning Outcomes for AY 24-25</b>	<b>Interpretation of Findings</b>	<b>Action Plan/Use of Results</b>
				due to less hands-on practice and these scores lowered the overall average.	
7) Identify and implement professional management practices and guidelines to ensure personal and organizational well-being.	Measure 1: RHS 4650 Facility design project	Measure 1: 100% of students will earn an 80% or better on the facility project	Measure 1: 100% of students met threshold	Measure 1: Our students are demonstrating early competency in professional management practices which will better prepare them for graduate school and clinical practice	Measure 1: No curricular or pedagogical changes needed at this time
	Measure 2: RHS 4650 LinkedIn Portfolio Assignment	Measure 2: 90% of students will score an 80% or higher on their portfolio assignment	Measure 2: 100% of students met threshold	Measure 2: Our students are demonstrating early competency in professional management practices which will better prepare them	Measure 2: No curricular or pedagogical changes needed at this time

Evidence of Learning: Courses within the Major					
Measurable Learning Outcome	Method of Measurement  Direct and Indirect Measures*	Threshold for Evidence of Student Learning	Findings Linked to Learning Outcomes for AY 24-25	Interpretation of Findings	Action Plan/Use of Results
				for graduate school and clinical practice	
	Measure 3: RHS 1550 Resume assignment	80% of students will score an 80% or higher on their initial resume draft	Newly aligned measure. No data to report yet	N/A	Measure 3: Begin collecting this assessment data in Fall 2025

#### Appendix H: Sample Signature Assignments

##### **RHS 3300 Final Evaluation Video:**

You will be assigned an injury and must create a 3-7 min video explaining how you would do an evaluation for that injury. This would be a tutorial video for how to do an evaluation and not actually a video of an injury evaluation. Therefore, you only need someone to act as a “model” in your video. They do not have to answer any questions or exhibit the injury at all. The video should include:

- A thorough history of questions you need to ask a patient suffering from a condition in this body area. (10 pts)
  - Differential Diagnosis for this injury (3 pathologies) (10 pts)
- Observations that you would see if a patient had this injury (10 pts)
- Palpation (what you should palpate in the area as well as the findings for this injury [for example, if it were a tibia fracture, you would have palpable deformity, point tenderness, crepitus...]) (10 pts)
- Range of motion you should do for this evaluation as well as the findings (again, what you would find if this injury were present) (10 pts)
  - Special tests you should do (1 to rule out each of your differential diagnosis and 1 to rule in the pathology [you may use palpation, ROM, muscle testing as a “test” if applicable. For example, you would rule out a fracture with palpation]). Please list the name of the special test, what pathology it tests for, and demonstrate how to perform it. (10 pts)

-State instructions you would give the patient regarding this diagnosis as well as the typical management for this condition.  
(10 pts)

Podcasts should:

- Visually demonstrate each evaluation skill
- Verbally instruct viewer how to perform skill
  - Narrator should point on relevant information (hand position, starting point, end point... etc)
- Chose best camera angle for each skill... if needed, record from multiple angles to picture the important aspects of the skill
- When possible ensure a solid backdrop. (i.e at least no people walking behind you..etc)

-Create a 1 page written handout on Injury, Diagnostic Process, and Care for the injury (25 pts)

### **RHS 4250 Final Annotated bibliography project:**

In this assignment, you will do a literature search on a specific rehabilitation technique of your choice and write an annotated bibliography including five articles. Choose from either the provided topic ideas, or propose an idea of your own to me. The topic needs to be a specific rehabilitation intervention or prevention of a specific condition or related conditions.

Tips for writing the bibliography: Your identification of “strengths” and “weaknesses” should focus on the article’s research design and methods and not on their outcomes or conclusions. For example, what did the authors do well and what were the weaknesses in their methodology design?

Format for the annotated bibliography should include the headings below for each article. Each article bibliography should be 1 page (so 5 pages total):

Citation (AMA or APA)

Background and Purpose (of the article)

Participants

Methods

Results

Version Date: August 2025

## Discussion and Conclusions

### Strengths

### Weaknesses

### **RHS 4250 Elbow Case Rehabilitation Plan**

You will be assigned to an elbow patient case pathology. Based on the pathology you are assigned, you will read select information on the patient cases and profiles related to the pathology. You will create an individual reconditioning two-week rehabilitation program for the case. The program should identify the problem areas, establish patient goals, and prescribe exercises. Exercises should be directed toward the patients' goals and result in returning the patient to their optimal performance and function. Upon completion of this rehabilitation program, you will instruct a peer in these exercises.

### **RHS 1550 Patient Population Reflection Paper**

In this reflection paper (minimum 500 words), describe how you view working with different patient populations as part of a healthcare team. Focus on how communication with other healthcare professionals contributes to providing appropriate care for all patients. Use the following guiding questions to support your reflection:

1. Team-Based Communication
  - How do you see communication playing a role in working with other members of a healthcare team (such as doctors, nurses, therapists, pharmacists, or social workers) to support patient care?
  - What communication strategies or approaches do you believe are most effective in a team setting?
2. Challenges in Providing High-Quality Care
  - What potential challenges do you anticipate when providing consistent, high-quality care to patients with different backgrounds, needs, or circumstances?
  - How might collaboration and communication within the team help address these challenges?
3. Opportunities in Patient Care
  - In what ways can working closely with a team improve the care you provide to various patients?
  - Can you identify any situations where strong communication might lead to better outcomes for patients?
4. Defining Top Quality Care
  - In your opinion, what does "top quality care" look like in practice?
  - How can working effectively as part of a team help ensure all patients receive that level of care?

## **RHS 4650 Facility Design Project**

Over the course of the semester, students work through Canvas modules to design a rehabilitation facility. These assignments build on each other, and they end the semester having edited a policy and procedures manual and facility floor plan.

### *-Select a Facility Type*

- Students select the type, facility attributes, and size

### *-PPM Assignments*

- Locate a PPM

  - Students source a PPM from a clinical site, previous job or online

- Policy Review assignments

  - For each of these assignments students will review the current policy in their PPM, they will add or edit based on discussed best practices.

    - Topics

      - Americans with Disabilities Act

      - Family Medical Leave Act

      - FLSA

      - Risk Management

      - Background checks and Drug Testing

### *-Bidding Process*

- In this assignment students determine the largest needs for their new facility, identify vendors and prepare RFP/Bid Requests to acquire these items.

### *-Facility Design*

- Students utilize online tools to design a facility layout works best based on their chosen facility, best practice and clinical experience.