



Neurologic Residency Curriculum

BPRN 804	Orientation & Introduction to the Neurologic Residency	4 CH
BPRN 808	Advanced Neurologic Practice Overview	36 CH
BPRF 810	Professionalism in PT Practice	4 CH
BPRO 815	Diagnostic Testing**	12 CH
BPRN 824	Medical Screening**	9 CH
BPRF 825	Evidence Based Practice	12 CH
BPRF 830	Clinical Problem Solving	12 CH
BPRF 835	Research Methods	8 CH
BPRF 840	Practice Management for the Advanced Practitioner	4 CH
BPRF 845	Education Theory	4 CH
BPRN 864	Advanced NPT Management of the Patient post CVA	40 CH
BPRN 866	Advanced NPT Management of the Patient post SCI	40 CH
BPRN 874	Advanced NPT Management of the Patient post BI	40 CH
BPRN 876	Advanced NPT Management of the Vestibular Patient	40 CH
BPRN 878	Advanced NPT Management of the Neurologic Patient	40 CH

** Denotes a course performed via an independent study format.

305 total hours of classroom (didactic and psychomotor lab) learning experiences (includes 10 hours for case study presentations).

274 hours will be Wednesday (36), Thursday (5), Friday (6) and Saturday (7)
 21 hours will be Independent Study Courses on Diagnostic Imaging & Medical Screening
 10 hours will be Case Study Presentations (4 evenings)

In addition, each Resident will have dedicated 28 hours to written (20 hours- a 5-hour, written final and 10 quizzes at 1.5 hours each) and practical exams (8 hours), not including preparation time.

CH = in class contact hours

BPRO Key

B = Brooks
 P = Physical Therapy
 R = Residency
 O = Orthopaedic
 N= Neurologic

BPRF Key

B = Brooks
 P = Physical Therapy
 R = Residency
 F= Foundational



Neurologic Residency Shadowing Experiences Objectives

Residents will perform “shadowing” experiences in several specialty areas/services to provide them with background information to improve their understanding of the specialty area/service and their decision making ability in terms of appropriate referrals to that specialty area/service. Shadowing will also improve the resident’s ability to communicate with other healthcare providers and will provide them with information regarding the patient’s previous experiences (such as those coming from an orthopaedic in-patient rehabilitation program). The shadowing will be a passive observation of the specialty area/service in terms of participation, but the communication will be interactive between the resident and the practitioner(s) being observed.

At the end of the experience, the Resident will be able to:

- Develop a rapport with practitioners and staff within the specialty area/service
- Understand the specific nomenclature for the specialty area/service
- Describe the unique components of the specialty area/service
- Describe appropriate interactions between their personal practice setting and the specialty area/service observed
- Identify mechanisms to improve the quality of referrals to and/or from the specialty area/service
- Identify criteria for referral to the observed specialty area/service
- Educate patients regarding basis for referral to the specialty area/service

Shadowing experiences will take place in the following specialty areas/services:

- Cyberdyne Outpatient Program
- PM&R Follow-up Clinic
- Neuro Recovery Center
- Peer Shadowing (shadowing other residents within the program)



Neurologic Residency Resident Directed Learning Activities

- Clinical Observation/Interaction Experience
 - PM&R Follow-up Spasticity Clinic 4 CH
 - Peer Residents 72 CH

- Journal Club (including prep time) 20 CH

- Research Activities 20 CH

- Case Studies (including prep time, but not presentation) 40 CH

- In-services to Brooks Staff (2/Res- including prep time) 10 CH

- Supervision of First Professional PT Student 320-480 CH

Total Hours = 586-646