

# THERAPEUTIC MASSAGE Program Policy Manual



2015-2016

## TABLE OF CONTENTS

<b>2015/2016</b>	<b>Page</b>
Table of Contents .....	1, 2
Welcome.....	3
TM Program Mission & Philosophy.....	4
TM Program Performance Expectations .....	5
TM Program Curriculum.....	6
TM Core Course Descriptions .....	7-8
TM Program Schedule.....	9
Safety .....	9
Practicum Experience.....	9-10
Criminal Background Checks.....	10-13
Classroom & Practicum Attendance Policy .....	14-15
Leave of Absence Policy.....	15
Dress Code .....	15-16
Professional Conduct.....	16
Physical Examination .....	16
Pregnancy Policy.....	16
Bloodborne Pathogens & HIV Policy .....	17-19
Grades .....	20-21
Testing.....	21
Academic Honesty .....	21
Appeal of Final Grade.....	22
Withdrawal/Re-entry .....	22-23
Counseling.....	22
Sexual Harassment.....	23
Messages/Student Communication.....	23
Staff Directory.....	24

## **Appendices**

<b>Appendix A</b> .....	25
Program Policy Agreement.....	26
Confidentiality Statement .....	27-28
Criminal Activity Waiver .....	29
Consent Form .....	30
Student Laboratory Participation Agreement .....	31
Release of Information Form .....	32
Practicum Responsibilities .....	33
Physical Examination & Immunization Record .....	34-37
TM Student Physical Abilities Requirements.....	38-39
Practicum Attendance Record.....	40
<b>Appendix B</b> .....	41
Instructor Evaluation Form .....	42
Client Evaluation Form .....	43
Professional Development Assessment Form .....	44-46

## **WELCOME**

Welcome to the Indian Hills Community College Therapeutic Massage (TM) program. The TM program is four (4) terms (12 months) in length. It is a 1000 hour program. Upon successful completion of this program, a Diploma in Therapeutic Massage will be awarded.

Indian Hills Community College is accredited by the Higher Learning Commission, member of the North Central Association and the State of Iowa, Iowa Department of Education. The Therapeutic Massage program is approved by the Iowa Board of Massage Therapy Examiners and the Missouri Board of Massage Therapy Examiners.

The Therapeutic Massage program is part of the Health Sciences Division. This division is led by the Dean of Health Sciences. The Department Chair of Health Programs reports to the Dean, and can also help with any questions you may have. The Therapeutic Massage Program is led by a Program Director, who oversees the Therapeutic Massage Instructor.

The TM student handbook is to serve as a guide for all students enrolled in the Therapeutic Massage program. It is a supplement to the Indian Hills Community College Student Handbook and College Catalog; consequently all policies and regulations from the handbook and catalog are to be observed in addition to those outlined in the following pages.

We welcome you and want you to know we are here to assist you in every way possible. It is a privilege to have each of you in the Therapeutic Massage program.

## **THERAPEUTIC MASSAGE PROGRAM MISSION**

The Therapeutic Massage program, as an integral part of the Indian Hills Community College, has the following mission:

The Indian Hills Community College Therapeutic Massage Program's mission, with the central unifying purpose of student learning, is to graduate knowledgeable, competent, self-assured, adaptable and service-oriented individuals who perform therapeutic massage in an ethical, legal, safe and effective manner.

## **THERAPEUTIC MASSAGE PROGRAM PHILOSOPHY**

We believe therapeutic massage is an art and science that has as its primary focus the health needs of all individuals -- needs ranging from states of high-level wellness to states of illness, disability and impending death. Therefore, education in the Therapeutic Massage program is based on a specialized body of knowledge and skills related to the use of systematic manual or mechanical manipulations of the soft tissues of the body for therapeutic purposes.

We believe that learning is an individual and continuous process resulting in behavioral changes which can be measured, that learning is facilitated and affected by motivation, self-discipline and structured experiences and that the role of the instructor is to guide the learner, identify learning needs, and implement the best approaches to meet these needs. We further believe that the Therapeutic Massage student is an adult learner and as such is ultimately responsible for his/her lifelong learning. We believe that the best knowledge base for practice is a combination of general and technical education. This allows the student to develop into an effective practitioner, responsible, culturally-sensitive citizen and more fulfilled mature individual.

## **THERAPEUTIC MASSAGE PROGRAM PERFORMANCE EXPECTATIONS**

The TM curriculum has been designed to promote learning and development so that following completion of the Indian Hills Community College Therapeutic Massage Program each graduate will:

- Possess the knowledge, skills and attitudes necessary to perform as an entry-level massage therapist
- Appreciate the need for life-long learning to maintain professional competency
- Adhere to legal and ethical professional standards
- Use effective oral and written communication skills
- Possess entrepreneurial skills

The competencies identified in the Therapeutic Massage program are consistent with the content specified by the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB). Competencies related to general knowledge of body systems, detailed knowledge of anatomy, physiology and kinesiology, pathology, assessment, therapeutic massage application, professional standards, ethics and business and legal practices are incorporated into the Therapeutic Massage program.

## THERAPEUTIC MASSAGE PROGRAM CURRICULUM

The TM curriculum is designed as a progression with increasing complexity of each subsequent course. All Therapeutic Massage core courses must be taken during the designated term.

<b>TERM I</b>		
<u>Course Number</u>	<u>Course Name</u>	<u>Credit Hours</u>
BIO175	Human Anatomy	3
BIO176	Human Anatomy Lab	1
CSC105	Computer Essentials	1
HSC113	Medical Terminology	2
MST102	Fundamentals in Therapeutic Massage	<u>2.5</u>
		9.5
<b>TERM II</b>		
BIO178	Physiology	3
BIO179	Physiology Lab	1
HSC212	Pathophysiology	3
MST170	Therapeutic Massage I	4
MST791	Orientation to Therapeutic Massage Practicum	<u>1</u>
		12
<b>TERM III</b>		
MST112	Ethics/Professionalism	2
MST119	Kinesiology for Massage	3
MST171	Therapeutic Massage II	5
MST801	Therapeutic Massage Practicum I	<u>2.5</u>
		12.5
<b>TERM IV</b>		
MST172	Therapeutic Massage III	5
MST806	Therapeutic Massage Practicum II	2.5
MST949	Topics in Therapeutic Massage	3
BUS130	Introduction to Entrepreneurship	<u>3</u>
		13.5
<b>PROGRAM TOTAL</b>		<b>47.5</b>

## TM CORE COURSE DESCRIPTIONS

### TERM I

#### **MST102 Fundamentals in Therapeutic Massage 2.5**

This course provides an introduction to the profession of therapeutic massage. The historical perspective of therapeutic massage will be discussed. Professionalism, record keeping, hygiene, sanitation and safety factors will be introduced. Certification in American Heart Association First Aid and Basic Life Support will be completed.

### TERM II

#### **MST170 Therapeutic Massage I 4**

This course introduces the basic concepts of therapeutic massage. Indications for massage, approaches to care, pathology, and contraindications of therapeutic massage are discussed. Body mechanics and massage preparation are examined.

Prerequisite: MST102 Fundamentals in Therapeutic Massage, BIO175 Human Anatomy, BIO176 Human Anatomy Lab

#### **MST791 Orientation to Therapeutic Massage Practicum 1**

This course introduces students to practicum experience. Students will gain an understanding of massage techniques in a supervised setting. Basic massage skills required to perform a chair massage will be introduced. Professional behaviors, interpersonal communication and customer service will be emphasized. Students will complete required HIPAA, Infection Control and Mandatory Child/Dependent Adult Abuse Reporting Training for Health Care Providers

Prerequisite: Concurrent with MST170 Therapeutic Massage I.

### TERM III

#### **MST112 Ethics/Professionalism 2**

This course discusses professionalism and ethical issues related to the practice of therapeutic massage. Communication styles, standards of practice, informed consent, confidentiality, professional boundaries, ethical decision making, referral guidelines and HIPAA regulations are presented. Laws and regulations related to credentials and licensing are examined.

Prerequisite: MST170 Therapeutic Massage I

#### **MST119 Kinesiology for Massage 3**

This course introduces the study of movement as related to the human body. Topics presented include the skeletal system, joint classification, anatomy of joints, muscular system, types of joint motion, and the neuromuscular system. Posture, exercise and the gait cycle will be discussed. Prerequisite: BIO178 Human Physiology and BIO179 Human Physiology Lab, MST

170



**MST171 Therapeutic Massage II 5**  
Massage manipulation and techniques are explained. Assessment techniques, client interview procedures and care/treatment plan development are presented. Massage interventions are implemented in the laboratory setting.  
Prerequisite: MST170 Therapeutic Massage I, BIO178 Human Physiology, BIO179 Human Physiology Lab

**\*MST801 Therapeutic Massage Practicum I 2.5**  
This practicum experience provides the student an opportunity to use massage techniques in a clinical setting. This practicum focuses on the use of basic assessment skills and massage techniques. Prerequisite: Concurrent with MST 171 Therapeutic Massage II

#### **TERM IV**

**MST172 Therapeutic Massage III 5**  
This course examines the role and responsibilities of a massage therapist when providing care to special populations. Wellness education is discussed. Case studies will be used to integrate therapeutic massage concepts to complete a comprehensive history, assessment, and care/treatment plan. Sports and exercise massage is introduced.  
Prerequisites: MST171 Therapeutic Massage II, MST119 Kinesiology for Massage

**\*MST806 Therapeutic Massage Practicum II 2.5**  
This clinical course prepares the student to enter the therapeutic massage profession. The student will gain experience in assessment techniques, care/treatment plan development, massage interventions, communication techniques, and record keeping. Professional and ethical behaviors will be stressed.  
Prerequisite: MST800 Therapeutic Massage Practicum I; Concurrent with MST172 Therapeutic Massage III.

**MST949 Topics in Therapeutic Massage 3**  
This course addresses complementary bodywork systems. A brief introduction to hydrotherapy, lymph drainage massage, circulatory massage, reflexology, deep transverse friction, myofascial approaches, trigger-point therapy, Asian bodywork methods, Ayurveda, and polarity therapy will be provided. The spa concept will be examined.  
Prerequisite: Concurrent with MST172 Therapeutic Massage III

\*Note that 100 clinical hours are required to complete the requirements for MST801 and another 100 clinical hours are required to complete the requirements for MST806. If 100 hours are not completed, for example, during MST801 which is held during Spring term, the student will receive an "incomplete" for the term and will receive their grade when they reach 100 hours.

## **THERAPEUTIC MASSAGE SCHEDULE**

Lecture and laboratory sessions will be held on the Indian Hills Community College Ottumwa campus. All classes are scheduled Monday through Thursday usually between the hours of 7:30 am and 5 pm. General education classes may be taken at the Centerville campus or IHCC Service Centers during the day or evening. Clinical experiences will be scheduled at IHCC and other specified locations. Long term care settings, private therapeutic massage practices, hospice, spas and hospitals may also be included.

### **SAFETY**

#### **On-campus**

At Indian Hills Community College the safety and security of our students, faculty and staff is always a priority. Safety and the prevention of accidents are the responsibility of faculty, staff and students. Everyone on campus is encouraged to use all available resources and information, as well as common sense decisions, to help foster a safe environment. Refer to the college catalog, student handbook, and appropriate signage posted throughout the campus for policies and procedures regarding safety on campus. If an accident or injury occurs while on the Indian Hills campus it must be reported immediately to a member of the staff or faculty. Emergency care will be provided on campus until emergency medical services arrive. Potential safety hazards will also be reported to the staff or faculty.

#### **Off-campus**

While attending clinical and off-campus laboratory activities health and safety policies and procedures of the facility will be observed. If an accident or injury occurs during a clinical experience the procedure described in the TM Student Handbook under the heading Clinical Experience Incidents will be followed. If an accident or injury occurs during an off-campus laboratory experience it must immediately be reported to the instructor and the staff at the facility so the appropriate procedures can be followed.

### **PRACTICUM EXPERIENCE**

The purpose of practicum experience is to allow the student to apply the knowledge and skills acquired in the classroom to a hands-on client situation. The practicum is designed to provide students learning experiences with patients/clients. Each student will be supervised by a licensed massage therapist. Students are expected to abide by the hours and policies of the assigned clinical facility.

Clinical experiences are scheduled as follows:

PRACTICUM	WEEKS	HOURS
MST791: Orientation to Therapeutic Massage Practicum	Dates throughout Term II	45 Hours
MST801: Therapeutic Massage Practicum I	Two days each week for 12 weeks	100 Hours
MST806: Therapeutic Massage Practicum II	Two days a week for 12 weeks	100 Hours
<b>TOTAL:</b>		<b>245 Hours</b>

### **Liability**

Indian Hills Community College maintains professional liability coverage for students in the Health Sciences Division. This coverage includes the therapeutic massage students.

### **Stipends**

Students are not to be paid a stipend for massage therapy during any practicum assignments.

### **Health Insurance**

Students are encouraged to maintain their own personal health care coverage, at their own costs. While emergency medical care will be made available to students, the student is responsible for the costs.

### **Incidents**

All incidents that are inconsistent with routine provision of therapeutic massage must be reported to the Therapeutic Massage Clinical Instructor immediately. If a medical emergency occurs the policies of the facility will be followed. The condition of the involved person(s) will be evaluated and the necessary emergency care will be provided. A written report describing the incident will be completed.

### **CRIMINAL BACKGROUND CHECKS**

Students are required to have a background check prior to beginning the Therapeutic Massage Program. Students are responsible for assuming responsibility for the fee. Results may affect the student's ability to participate in practicum experiences. Students also have the responsibility to inform the Program Director if they have an arrest and conviction after entering the program.

### **Dependent Adult Abuse/ Child Abuse Checks**

Students in the Health Sciences Division are required to complete a dependent adult and child abuse course with information on the following content areas: Iowa law, probable reasons, recognition, and reporting process.

Students will be required to have a Dependent Adult/Child Abuse background check. The findings of that report may make a student ineligible for a practicum experience. Students will assume responsibility for the cost of the background check.

**Criminal And Abuse Background Checks**

National and State criminal and dependent adult/child abuse checks are required of every student preparing to enroll in an Indian Hills Community College Health Sciences program. The cost of the required checks is the responsibility of the student/applicant.

The Criminal and Dependent Adult/Child abuse background check procedure is established to meet the requirements for the partnerships between the College and the clinical facilities and/or sites. Students who have a criminal history, and are cleared to participate in an IHCC Health Sciences academic program, are still responsible to work with their professional licensing or certification board for determination if they are eligible to sit for that profession’s licensure or certification.

**Timeline for completion of background check policy: (Non- CNA students)**

- Check must be run PRIOR to the Last day to Drop of the first term of the program, or the student will not be allowed to participate in core class or labs.
- Students who change from 1 IHCC Health Sciences program to another *without* a term between may use the first program’s check ONLY if it is no more than 12 months since the initial check was run.
  - \*Students entering the ECE program must undergo that specific process to enter, regardless of previous checks.
- Students who complete a Health Sciences program and have more than one term before the next program start will need to have the check repeated, no matter how long ago the first check was completed.

Criteria used to determine whether a student is ineligible to participate in an Indian Hills Community College Health Sciences program:

<b>At Any Time</b>	<ul style="list-style-type: none"> <li>• Refusal to participate in the background check or evaluation process.</li> <li>• Iowa DHS record check evaluation determines the student is not eligible to participate in the clinical portion of the course and/or to work in a health care facility.</li> <li>• A felony conviction.</li> <li>• A felony, serious misdemeanor or aggravated misdemeanor charge with an outstanding disposition or warrant.</li> <li>• A serious misdemeanor or aggravated misdemeanor conviction in which the probationary period has not been completed.</li> <li>• A criminal conviction, of any kind, related to past employment, and/or a healthcare system or organization.</li> <li>• Inclusion on the child, dependent adult and/or sexual abuse registry.</li> </ul>
<b>The Past 5 Years</b>	<ul style="list-style-type: none"> <li>• A criminal conviction of any kind related to illegal distribution or theft of drugs.</li> </ul>
<b>The Past 2 Years</b>	<ul style="list-style-type: none"> <li>• A serious or aggravated misdemeanor conviction of theft or a pattern of theft convictions.</li> </ul>
<b>The Past 1 Year</b>	<ul style="list-style-type: none"> <li>• A criminal conviction related to the possession of drugs, paraphernalia, and/or illegal substances.</li> </ul>
<p><b>Any of the criteria listed below may disqualify you</b> from enrollment in IHCC’s Health Sciences programs based on factors such as job/program relatedness, patterns,</p>	

timeframes and/or completion of sentence.

- Recent criminal conviction(s) or charges of any type.
- A misdemeanor conviction involving domestic abuse with injury, violence, or sexual misconduct.
- A pattern of criminal convictions or charges.
- 2 or more OWI convictions.

***\*While enrolled in any Health Sciences program at IHCC, it is expected that students report all child abuse, dependent adult abuse, and/or criminal activity, in which they are involved, to IHCC within forty-eight (48) hours of the incident. Failure to do so could result in criminal charges per Iowa Code and removal from the program.***

### **Process for Criminal and Abuse Background Checks**

#### **National/State Background Check-(\$32.00)**

Students who enroll in a non-nursing Health Sciences program will be required to complete a National Background Check and the Iowa Adult and Child Protective Services check through One Source:

[www.indianhills.edu/HealthSciencesBackgroundCheck](http://www.indianhills.edu/HealthSciencesBackgroundCheck)

- Click or copy and paste the above quick link and then click on “Indian Hills Community College” to complete the background check.
- Please read the instructions prior to completing the form and submitting the online payment. Payment is required to complete the check.
- Next click on the Iowa Adult and Child Protective Services Release links at the bottom of the page and print both forms.
  - The release forms will need to be filled out by the student and then emailed, faxed, or mailed to One Source in order for the background check to be entirely implemented and complete.

**The student’s signature is required on both printed release forms.**

Email-[orders@onesourcebackground.com](mailto:orders@onesourcebackground.com)

Fax- 1-800-929-8117

Mail- One Source

P.O. Box 24148

Omaha, NE 68124

The background check must be completed prior to starting the program or as directed by the program director for special circumstances. Students who fail to complete the required checks may not be able to attend laboratory or clinical.

### **Process for Criminal and Abuse Background Checks** **CNA and NURSING MAJORS**

#### **National Background Check-(\$32.00)**

Students who enroll in the CNA or Nursing programs will be required to complete a National Background Check through One Source:

[www.indianhills.edu/HealthSciencesBackgroundCheck](http://www.indianhills.edu/HealthSciencesBackgroundCheck)

- Copy and paste the above quick link and then click on “Indian Hills Community College” to complete the background check.

- Please read the instructions prior to completing the form and submitting the online payment. Payment is required to complete the check.

**State Background Check-(\$20.00)**

The Iowa Department of Inspections and Appeals requires a State check and verification be done through Iowa Department of Human Services. Copy and paste the link to print the form.

[http://www.indianhills.edu/courses/docs/rhep\\_background\\_check\\_form.pdf](http://www.indianhills.edu/courses/docs/rhep_background_check_form.pdf)

- The student needs to print this form, complete it and return it to the Health Sciences Administrative Assistant.
- A cash or check payment is required at the time the form is submitted to the IHCC office.

**The student's signature is required on this form.**

**ALL background check materials will need to be completed and submitted to the appropriate entity no later than 2 weeks prior to course/program start date.**

Students who fail to complete the above steps prior to the course start will not be able to start the course. If the State Background check and verification is more than 30 days old, it is not valid for the CNA program and will need to be repeated at the \$20.00 fee.

## **ATTENDANCE POLICY**

Prospective employers consider attendance records a good indicator of future employee behavior and typically inquire about the attendance records of the student/graduate. The faculty/practicum instructor consider attendance important because learning rarely takes place if a student is absent, regardless of the reason. Therefore, to satisfactorily complete the performance expectations of the Therapeutic Massage program, the following policies must be adhered to:

### **Classroom**

- 1) Students are expected to be in attendance for all classes.
- 2) If a student is unable to attend, he/she is to report his/her absence each day to the instructor for **EACH** course he/she will miss--stating his/her name and the reason for missing that day. For Wade Schelker, the student can call: 641-683-5746 or email: wade.schelker@indianhills.edu. For Caroline Peyrone, the student can call: 641-683-5271 or email: caroline.peyrone@indianhills.edu. The student can also leave a message at the IHCC Health Sciences Office: 641-683-5164. Classroom attendance will be documented and maintained in the Health Sciences Division office.
- 3) The student must initiate the classroom assignment make-up process.
  - a) Students will NOT be allowed to make-up classroom work, including exams unless the instructor has been notified regarding the absence prior to the start of class.
  - b) The instructor and the student will arrange a schedule for completion of make-up work.
- 5) Children may not attend class with the parent.
- 6) Students must have a completed physical and immunization form to participate in any Therapeutic Massage laboratory activities. Failure to participate may result in loss of classroom participation points for the days missed due to incomplete forms.

### **Practicum**

In an effort to ensure students completion of required Therapeutic Massage practicum hours, the following policy will be adhered to:

- 1) Students will be assigned practicum dates and times prior to each practicum experience to meet the required hours for the course.
- 2) Students are expected to attend practicum on the days and times assigned.
- 3) If a student must miss an assigned practicum day, he/she is responsible for contacting the instructor prior to the assigned practicum time--stating his/her name and the reason for the absence. The student will notify the Therapeutic Massage instructor at (641) 683-5746 or 1-800-726-2585 ext. 5746. Voice messages regarding an absence may be left 24 hours a day. Notification of absence may also be left via e-mail at the web services web page.
- 4) A student will be allowed a total of 12 hours of assigned practicum absences during Orientation to Therapeutic Massage Practicum, Therapeutic Massage Practicum I and Therapeutic Massage Practicum II.
- 5) The student will have a conference with the Program Director after the allotted number of hours is missed (12). The student will be assigned hours to make up for the absence. The student will not be charged to make up missed practicum time up to 12 hours.
- 6) If the student is absent from practicum for more than 12 hours, the student will be required to make-up this time as assigned by the Program Director and/or Instructor. There will be a charge of \$10/hour for each make-up hour over the initial 12 hours of absence.

- a) Fees will be paid to the Health Sciences secretary in the Rural Health Education Center, office 104.
- 7) Practicum make-up days may not be available until after graduation. A maximum of 24 hours may be completed by make-up.
- 8) If a student misses more than 24 hours of assigned practicum hours due to absence, the student must withdraw from the Therapeutic Massage Practicum.
- 9) The student will not receive a passing grade for the Therapeutic Massage Practicum until all hours are completed and payment is received. Students will be given an incomplete grade until required hours are completed and practicum make-up fees have been paid.
- 10) Students needing to take a Leave of Absence (maternity, surgery, death in immediate family, hospitalized child) may submit a written request to the Program Director for review. If a leave of Absence is granted, the student may be scheduled to make up the practicum hours missed following graduation. There will be no charge for make-up hours due to an authorized Leave of Absence.
- 11) A release from a physician will be required to return to clinical following three (3) or more consecutive days of absence due to illness/injury or any hospitalization.
- 12) Children may not attend practicum with the parent.

### **LEAVE OF ABSENCE**

Students wishing to take a leave of absence from the TM Program must submit a written request to the Program Director. A leave of absence may be granted for emergencies including: hospitalization, birth of a child, or death in the student's immediate family. A leave of absence may be granted if:

- a) the student has demonstrated the ability to meet the performance expectations of the program
- b) the student and faculty are able to develop a curricular plan that assures the student's progression through the program.
- c) the student must be able to meet course requirements no later than six (6) weeks following the date the leave of absence is granted, following the Incomplete Grades policy, as described in the College Catalog.

### **DRESS CODE**

As the TM student represents the school and the therapeutic massage profession, it is imperative that certain standards be met and a dress code followed. During class periods, students may use their own judgment in attire, but it must conform to the codes of decency. During practicum, Therapeutic Massage students are to abide by the following dress code.

#### **Practicum Dress Code:**

- 1) All students will be required to wear the approved Therapeutic Massage uniform: khaki pants and a purple polo shirt with TM logo (available in the bookstore) or matching scrubs with the discretion of the clinical instructor.
- 2) Clothes will be clean, neatly pressed and free of odor.
- 4) Students will be clean, free of body odor, and have well-trimmed fingernails.
- 5) Hair color and makeup will be conservative in nature.
- 6) Long hair will be pulled back. Beards and mustaches will be neatly trimmed.
- 7) Jewelry will be kept to a minimum and consistent with the program's expectations.
- 8) Appropriate undergarments will be worn.
- 9) Name tags denoting Therapeutic Massage student status will be worn.



10) Shoes will be practical walking shoes that have non-slip soles and closed toes. Socks must be worn.

Any student who chooses to disregard the dress code will be verbally warned once and the second infraction will warrant a written warning. A third infraction will result in suspension from practicum on that same day until a conference is held with the TM faculty and Health Sciences Department Chair or Program Director.

### **PROFESSIONAL CONDUCT**

In a classroom and practicum situations, students must conduct themselves in a professional manner. Please review Appendix B in this handbook for examples of appropriate professional behavior. Inappropriate conduct will result in a conference with the TM Instructor, Program Director, and/or Department Chair. Behavior deemed unprofessional could lead to dismissal from the program.

### **PHYSICAL EXAMINATION**

It is required that each student have a physical examination prior to starting the Therapeutic Massage program to assure that the student is physically able to participate in the activities required of a therapeutic massage student. Each student will have a physical performed by licensed qualified personnel (physician, physician assistant, or nurse practitioner). In addition, documentation and/or results of the following immunizations and tests is required: MMR or Rubella Titer; 2-Step Mantoux Skin Test for Tuberculosis; Tetanus/Diphtheria Booster; Varicella (optional) and Hepatitis B (optional). The completed form will be kept in the student's permanent file. A copy of the physical form is included in Appendix A.

### **PREGNANCY POLICY**

When the student has confirmation of pregnancy, she will be required to submit a statement from a qualified licensed practitioner, indicating the student's continued ability and/or limitations related to participation in the required laboratory or practicum-based learning activities. Reasonable and appropriate actions will be implemented by the TM Program faculty.

## **BLOODBORNE PATHOGENS & HIV POLICY FOR HEALTH SCIENCES PROGRAMS**

Students may be participating in activities within the Health Sciences Programs, which have potential for exposure to infectious diseases including but not limited to Hepatitis B and HIV. Health occupation students must take all necessary precautions to minimize the risk of exposure. Students who fail to comply with the bloodborne pathogen and HIV policy may be asked to withdraw from the TM program.

In the event of a significant exposure (e.g. an occupational incident involving eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious material, including saliva), the student must report the incident **immediately** to the instructor or clinical supervisor. The Therapeutic Massage faculty will file a Safety/Loss Report Form describing the incident. The completed form will be submitted to the Dean of Health Sciences.

Follow-up evaluation will be required consistent with Federal regulations. This may involve going to their personal physician or the emergency room. Students are responsible for the cost of their own medical care.

### **Hepatitis B**

It is highly recommended that all students providing direct patient or child care in the Health Sciences Division receive immunization against Hepatitis B. Although this is not required, it is highly recommended and is considered to be an extremely good investment. Students are particularly vulnerable to contamination as their hand washing skills generally are not yet well developed. Although the incidence of the infection is relatively low, the outcome can be fatal. Since there is a vaccine available, all health care providers who are at risk are encouraged to become immunized.

### **The Disease**

Health care professionals are at increased risk of contracting Hepatitis B infection. Hepatitis B is usually spread by contact with infected blood or blood products and the risk of acquiring Hepatitis B increases with the frequency of blood contact. Hepatitis B virus may also be found in other body fluids, such as urine, tears, semen, vaginal secretions and breast milk. Hepatitis B infection can have severe consequences, including progressive liver damage and the possibility of developing hepatocellular carcinoma. Six to ten percent of the people who contract the virus become chronic carriers.

### **The Vaccine**

Vaccination is the only available means of protection against Hepatitis B. No currently available therapy has proven effective in eliminating the infection. This vaccine, prepared from recombinant yeast cultures, is free of association with human blood or blood products. Full immunization requires three doses of the vaccine over a six month period. Because of the long incubation period for Hepatitis B, it is possible for an unrecognized infection to be present at the time the vaccine is given, and in that case, the vaccine would not prevent development of clinical hepatitis.

### **Procedures**

You will need your physician's approval or order prior to being immunized. He or she will provide you with information regarding the contraindications and side effects of the vaccine. Contact your physician for additional information.

## **Education**

As part of the curriculum all students in Health Sciences programs will receive instruction regarding Hepatitis B and HIV prior to providing client care. This instruction shall include but not be limited to:

1. epidemiology
2. method of transmission
3. standard blood and body fluid precautions
4. types of protective clothing and equipment
5. work practices appropriate to the skills they will perform
6. location of appropriate clothing and equipment
7. how to properly use, handle, and dispose of contaminated articles
8. action to be taken in the event of spills or personal exposure
9. appropriate confidentiality and reporting requirements
10. review of program policy related to refusal to care for specific patients

## **BLOODBORNE PATHOGENS & HIV POLICY cont.**

### **Post Exposure Procedure for Health Occupation Students**

1. If a student has been exposed to a contaminant parenterally (needle stick or cut) or superficially through a mucous membrane (eye or mouth) they are to follow the following procedure:
  - a. immediately wash the affected area with the appropriate solution (soap and water, alcohol, water),
  - b. seek appropriate medical attention through their personal physician (students are responsible for their own medical care). This may include baseline testing for HIV antibody at this time, followed by recommended series of testing. (Physicians may also inquire about the students status in regard to tetanus and hepatitis immunization at this time.)
  - c. follow institutional (agency) policy regarding determining HIV and hepatitis status of patient, (students are responsible for the cost of any testing)
  - d. maintain confidentiality of patient,
  - e. seek appropriate counseling regarding risk of infection.

### **Guidelines for HIV Positive Health Care Providers**

1. The Center for Disease Control has specific guidelines for health care workers which are revised periodically. They have been incorporated into these policies and are reviewed annually.
2. There shall be no routine serological testing or monitoring of students for Hepatitis B or HIV infection.
3. Barrier or standard blood and body fluid precautions are to be used routinely for all patients. These include:
  - a. The use of glove(s) when:
    - 1) cleaning rectal and genital areas;
    - 2) carrying soiled linen;
    - 3) bathing patients, if the student has a cut on the hand;
    - 4) suctioning or irrigating even if the orifice does not require sterile technique;
    - 5) there is, at any time, a possibility of spillage of blood or body fluid onto the student's hands, (i.e. accucheck, discontinuing an I.V., I.M.s) regardless of the presence of open

- lesions;
  - 6) emptying urine drainage bags, suction catheters, colostomy and ileostomy pouches;
- and
- 7) providing mouth care.
  - b. The use of masks, goggles or glasses and/or aprons when there is a possibility of fluids splashing onto the face or body and clothing.

### **Specific Guidelines for Known HIV - Infected Health Occupation Students**

1. HIV positive Health Sciences students who do not perform invasive procedures need not be restricted from work/clinical experience unless they have other illnesses or signs and symptoms for which such restrictions would be warranted.
2. HIV positive Health Sciences students should wear gloves for direct contact with mucous membrane or non-intact skin of patients.
3. HIV positive Health Sciences students who have exudative lesions or weeping dermatitis should refrain from direct patient care and from handling patient care equipment and utensils.
4. Reasonable accommodations will be made within the curriculum to assist the HIV positive student to meet course/program objectives.
5. The policy of agencies utilized for clinical experience will supersede college policy if they are more stringent.

Confidentiality will be maintained whenever possible, with only the appropriate individual(s) being informed of the HIV status of Health Sciences students.

### **Provision of Care**

1. Assignments are made in the clinical setting to enhance and/or reinforce student learning. It is the expectation that students will provide care for clients to whom they are assigned. In the event that a student refuses to care for an individual the following will occur:
  - a. In consultation with the student the faculty member will determine the reason for the refusal.
  - b. If the reason is determined to be valid the student will be reassigned.
  - c. If the reason is not valid the student will be counseled about unethical conduct and "discriminating against a client regarding but not limited to the following: Age, race, sex, economic status or illness of the patient or client."
  - d. If it is determined that the reason for refusal to care for specific individual is as noted above, the student will be counseled to consider his/her future in health care.
  - e. The Dean shall be notified of any such occurrence and may meet with the student along with the faculty member to discuss options, one of which may be withdrawal from the program.

## GRADES

In order to graduate, a student must receive a passing grade in all courses listed for that major and achieve a cumulative grade point average (GPA) of 2.00 or above. This is equivalent to a "C" average.

Minimum satisfactory scholastic achievement is represented by a 2.0 grade point average each term of enrollment. Students who fall below this level will be placed on academic probation for the following term. Students who fail to achieve a 2.0 GPA during their probationary term may then be dismissed from their current program or college. Students not dismissed must have permission from their Dean and from the Registrar to re-enroll for the next term. Very poor work in any term, however, may result in dismissal at the close of that term. Academic probation may affect financial aid. The student is encouraged to see a financial aid counselor for clarification of an individual situation.

Students who are unable to complete assigned work in a course may be given a grade of "I" (incomplete). Students must complete the assigned work as soon as possible (at the discretion of the instructor/ department chair), but no later than six weeks into the following term. Grades for courses left with an "I" past the six-week completion period will automatically convert to "F".

To progress through the TM Program a student must achieve a passing grade of 78% (C) in all core courses and a passing grade in prerequisite courses. Practicum courses (MST801 and MST806) are pass/fail only. If a student fails a prerequisite course he/she must consult with the TM instructor and/or Department Chair and receive permission of the Health Sciences Dean to continue in the program.

Students will first contact the course instructor regarding questions with individual course assignments and grades.

Health Sciences grading is based upon the following percentage scale:

Percentage Scale	Letter Grade	Numerical Grade
100 - 93	A	4
92 - 85	B	3
84 - 78	C	2
77 - 75	D	1
74 - 0	F	0

You may compute your GPA at any time by following this example:

Course	Credit Hours	Numerical Grade	Grade Points
Therapeutic Massage I	4	A(4)	16
Kinesiology for Massage	3	B(3)	9
Medical Terminology	2	C(2)	4
Human Physiology	3	C(2)	6
Human Physiology Lab	1	D(1)	1
<b>Credit Hours Attempted</b>	<b>13</b>	<b>Total Grade Points</b>	<b>36</b>

Total Grade Points divided by Credit Hours Attempted = Grade Point Average (GPA)  
(36 divided by 13 = 2.769 GPA).

### **TESTING**

1. Written examinations will be given in each core course and laboratory practical examinations will be given in selected core courses.
2. Each instructor will determine the test schedule and content of the tests.
3. Each student must notify the course instructor prior to examination time if he/she is going to be absent.
4. The classroom assignment make-up process must be initiated by the student.
  - a. Students will NOT be allowed to make-up classroom work, including exams unless the instructor has been notified regarding the absence.
  - b. The instructor and the student will arrange a schedule for completion of make-up work.
5. All make-up testing will be done at the IHCC Testing Center located in Trustee Hall. Make-up testing is to be done within one week of the actual exam except in the case of extenuating circumstances such as hospitalization.
  - a. The instructor may determine that an alternate format test be given if a student is absent on the scheduled exam day.
6. Final examinations will be scheduled for each course.
7. Students must pass each TM Program core course laboratory practical with a 75% or above to pass the course. A student may repeat any component of a laboratory skills practical only once. The instructor will determine which components of the practical are to be repeated. Failure to obtain a 75% on the second attempt will result in failure of the course.

### **ACADEMIC HONESTY**

Academic honesty is expected in all actions and activities in classes, laboratories or clinical experiences in the Therapeutic Massage Program. Academic dishonesty (cheating) is defined as the use of unauthorized resources by a student during a test and /or written assignment, which includes all written and electronic sources as well as the duplication of another person's work. Test questions are to be answered without prompts and all written work is expected to be original. This applies to student work in both the classroom and the clinical practice area.

A violation of this policy will result in a zero (0) for the test or a failure (F) for the written assignment or suspension from the program.

In the event that a student is suspected of violating this policy the instructor or administrator suspecting the violation will prepare a written statement notifying the student of the alleged violation.

The student has a right to appeal. All appeals are to follow the Student Appeal Process outlined in the IHCC Catalog.

### **APPEAL OF FINAL GRADE**

If a student wishes to appeal a final course grade, the appeal process must be initiated within

two (2) weeks following the end of the term in which the course was taught. The student must first contact the course instructor with questions concerning the final grade. If the student is not satisfied with the outcome of the meeting with the course instructor, the Student Appeals Process outlined in the Indian Hills Community College Student Handbook and Planner must be followed.

### **WITHDRAWAL/ RE-ENTRY**

Therapeutic Massage students are strongly encouraged to speak with the TM instructor, Program Director or Department Chair in the event that they are considering withdrawing from a TM course, as this will have implications regarding completion of the TM Program. Therapeutic Massage courses are only offered once each year and must be taken in sequence.

Students re-admitted to the TM Program have only one opportunity to reinstate and complete the program. Any subsequent core TM course failures will result in dismissal from the program, and the student will not be accepted for re-entry into the Therapeutic Massage Program. For students who have been re-admitted to the program, subsequent re-admissions for any personal/medical leaves will be considered on an individual basis.

If a student fails two or more core TM courses that are held concurrently in the same Term, the student may be re-admitted following the re-entry policy, and repeat the courses failed within that term (the following year).

#### **Re-Entry Procedure:**

1. To be considered for re-entry, a student must submit a written request to the TM Program Director within six (6) months of withdrawal or suspension, stating the Term and Year in which he/she wishes to return.
  - a. Following withdrawal or suspension, a student who plans to continue general education coursework at Indian Hills will need to complete a change of major form for re-entry with the Program Director.
2. Student must meet current TM Program entrance criteria.
3. Student must meet program curriculum requirements for the academic year in which they are re-instated.
4. Student will follow the TM Program policies and procedures in place the year of reinstatement.
5. Continuing students will be given priority over re-entering students to ensure adequate space in the class.

### **COUNSELING**

Instructors, Program Director, the Department Chair and the Dean are available for academic counseling. Further counseling is available to students through assigned counselors or by student choice. Students are welcome to contact the Health Sciences Division for assistance at anytime. Counseling will always be held confidential and conducted in a professional manner.

## **SEXUAL HARASSMENT**

Sexual harassment is a form of sexual discrimination in violation of Title VII of the Civil Rights Act of 1964.

Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitute sexual harassment when such conduct has the purpose or effect of unreasonably interfering with an individual's school performance or creating an intimidating, hostile or offensive classroom or clinical environment. Behaviors that may constitute sexual harassment include (but are not limited to):

- sexual innuendo or comments about a person's body
- sexual jokes or stories
- whistling at someone or making "cat calls"
- looking a person up and down
- making sexually suggestive gestures, facial expressions or body movements
- displaying sexually suggestive visuals
- patting or pinching
- any touch of a sexual nature
- standing close or brushing up against another person

If you believe you are being sexually harassed, report the situation to the classroom or clinical instructor, Department Chair or Dean of Health Sciences. Reported cases of sexual harassment will be investigated by the Dean of Health Sciences and the Dean of Student Services at IHCC. The Dean of Health Sciences can be reached at (641) 683-5165. Sexual harassment will not be tolerated and is cause for dismissal from the PTA program.

## **MESSAGES/STUDENT COMMUNICATION**

It is not the responsibility of the Health Sciences Division to take personal messages or telephone calls. If a call for a student is received, the office will search for the student only if the call concerns an emergency.



## **STAFF DIRECTORY**

Indian Hills Community College staff directory is located online at [www.indianhills.edu](http://www.indianhills.edu). There you can find contact information for faculty and staff at IHCC.

IHCC also has a Watts Line, 1-800-726-2585. The extension you desire would be the last four numbers on the regular telephone number.

IHCC is on a Monday-Thursday class schedule with Therapeutic Massage practicum experiences scheduled throughout the week. Practicum experiences may be scheduled on Friday or Saturday as necessary.

**Please refer to your IHCC Student Handbook and IHCC College Catalog for a full listing of college-wide policies and procedures, and available services.**

# APPENDIX A



## **PROGRAM POLICY AGREEMENT**

### **1. Receipt of Indian Hills Community College Therapeutic Massage Program Policy Manual**

I understand I am responsible to read the Therapeutic Massage Program Policy Manual completely and will be held accountable for complying with all policies and procedures of the therapeutic massage program. It is my responsibility to ask for clarification from the TM faculty regarding any policy or procedure I do not understand. I will read new policies or procedures that are issued by the program. I understand that I am also responsible to read and comply with the general student policies of IHCC.

### **2. Responsibility for Conduct and Actions as a Therapeutic Massage Student**

I understand that having been admitted to the IHCC Therapeutic Massage program, I am held responsible for my conduct and actions as a therapeutic massage student. I understand that breach of IHCC or the Therapeutic Massage program policies or the massage therapy code of ethics may result in consultation, and perhaps probation, suspension or dismissal depending on the nature of my actions. I understand that client safety, privacy and dignity are of the highest priority in therapeutic massage.

### **3. Titles VI and XII of the Civil Rights Act of 1964 and Title IX of the Education Amendments of 1972**

I understand that IHCC complies with Titles VI and XII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, and other federal laws and regulations; and does not discriminate on the basis of race, color, national origin, sex, age, religion, handicap, or status as a veteran in any of its policies, practices, or procedures. This includes, but is not limited to admissions, employment, financial aid and educational services. I understand I may follow the grievance procedure guidelines described in this handbook if I wish to file a complaint.

### **4. Medical Treatment**

I understand I am responsible for payment for any medical treatment that may be necessary and is not covered under the provisions of the Iowa Code.

### **5. Computer User Agreement**

As a condition of using the IHCC computer equipment, I agree not to use the equipment to duplicate copyrighted software in violation of its end user's license agreement, whether it is my personal copy or is owned by IHCC. I assume liability for any copyright infringements caused by me.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**INDIAN HILLS COMMUNITY COLLEGE**  
**Therapeutic Massage Program**

**CONFIDENTIALITY STATEMENT**

Throughout the Therapeutic Massage Program at Indian Hills Community College, I \_\_\_\_\_  
\_\_\_\_\_, will have access to client information. All patient information that I have access to is personal and private; therefore, I understand that confidentiality is crucial. I, \_\_\_\_\_ understand the following:

Any violation of this “patient right” is a HIPAA violation and would be possible cause for dismissal. Violation would include, but not be limited to: a) discussing information about a patient in an inappropriate setting, or with someone not related to the care of the patient; b) taking pictures of the patient for personal keeping; c) exposing a patient unnecessarily; d) inappropriate handling of personal possessions of the patient, such as going through a patient’s purse/wallet without authorization by the patient; e) posting patient or facility information with any patient related content into social media outlets. All students will adhere to the HIPAA (Health Insurance Portability and Accountability Act) regulations of the facility they are attending. Use of cell phones in the clinical care area is prohibited. **Posting any information relating to patient care or clinical experiences on computer social networking sites is a HIPAA violation and is strictly prohibited.** This includes, but is not limited to pictures or text that include the name of a facility; dates relating to experiences; type of treatment or experience that the student was involved with; patient name or personal information (ie: Age range, diagnosis, personal circumstances); facility staff names or conversations; or specifics of any treatment or interaction with patients, family or staff. I realize that this information is private and should be kept confidential.

I realize that any unauthorized release of information is punishable by fine and/or imprisonment. Throughout my education in the Therapeutic Massage Program at Indian Hills Community College, I will at no time inappropriately release confidential information and I will adhere to the professional Code of Ethics.

I understand that release of unauthorized patient information will result in **IMMEDIATE** termination from the Indian Hills Community College Therapeutic Massage Program.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INDIAN HILLS COMMUNITY COLLEGE**

Therapeutic Massage Program

CONVICTION AFTER ENTRY INTO THE TM PROGRAM

***While enrolled in any Health Sciences program at IHCC, it is expected that students report all child abuse, dependent adult abuse, and/or criminal activity, in which they are involved, to the IHCC Program Director within forty-eight (48) hours of the incident. Failure to do so could result in criminal charges per Iowa Code and removal from the program.***

I \_\_\_\_\_, understand this policy and agree to notify the Program Director within 48 hours if involved in child abuse, dependent adult abuse and/or criminal activity after my admission into the TM Program and before graduation from the TM Program.

\_\_\_\_\_  
Student's Name and Date



**INDIAN HILLS COMMUNITY COLLEGE**

**CONSENT FORM**

**For good and valuable consideration, I hereby consent and authorize Indian Hills Community College to reproduce, publish, circulate, and otherwise use for advertising purposes, my name and/or signature and/or portrait and/or photograph and/or name of employer and the attached voluntary statement or statements or any part thereof, in black or white or in colors in magazines, newspapers, rotogravure sections of publications, booklets, circulars, posters, billboards, radio and/or television scripts, radio broadcast transcriptions, and/or telecasts and all other forms of publication or circulation, or any of them in advertising or any other publicity; and I hereby release said Indian Hills Community College of and from any and all rights, claims, demands, actions, or suits which I may or can have against it or them on account of the use or publication of said material.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INDIAN HILLS COMMUNITY COLLEGE**

**THERAPEUTIC MASSAGE PROGRAM**

**STUDENT LABORATORY PARTICIPATION AGREEMENT**

I, (name) \_\_\_\_\_, agree to participate in Indian Hills Community College Therapeutic Massage program laboratory activities. I will be expected to attend laboratory activities scheduled at on and off campus locations. During the laboratory experiences I will role-play as a massage therapist and client. I will be expected to have physical contact with other students while learning various massage skills and techniques. Examples of such laboratory experiences include palpation of exposed anatomical landmarks and application of various massage techniques. During the laboratory experiences I agree to follow theories and principles of safe, legal and ethical practice

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INDIAN HILLS COMMUNITY COLLEGE  
Therapeutic Massage Program**

**CONSENT FOR RELEASE OF INFORMATION**

I, \_\_\_\_\_, authorize Indian Hills Community College to  
(print name)  
release the following to health care facilities for potential employment evaluation purposes:

- attendance record
- grade point average
- instructor evaluations of skills and abilities

Yes       No

I consent that Indian Hills Community College may release my name, home address, telephone number and e-mail address to employment recruiters.

Yes       No

I consent that Indian Hills Community College may request performance information in regards to my academic preparation from employers and consumers.

Yes       No

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INDIAN HILLS COMMUNITY COLLEGE**  
**Therapeutic Massage Practicum**

**STUDENT PRACTICUM AFFILIATION RESPONSIBILITIES**

1. The student shall conduct him/herself in accordance with the rules, regulations and procedures governing students at IHCC.
2. The student will complete designated practicum hours as directed by the Therapeutic Massage instructor.
3. The student shall complete assigned practicum activities with the understanding that he/she does not receive a stipend.
4. The student shall be responsible for his/her own health insurance coverage.
5. The student shall be responsible for his/her own transportation to and from the practicum site.
6. The student shall perform therapeutic massage assessment and interventions within the scope of his/her education.
7. The student shall observe the daily schedule set forth by his/her Therapeutic Massage instructor.
8. The student shall read and follow the practicum attendance policies outlined in the student handbook.
9. The student is required to obtain a criminal background check.
10. The student shall be responsible for obtaining a physical examination with proof of immunizations/vaccinations prior to beginning of the practicum experience.

---

I have read and understand the above list of student practicum responsibilities. I agree to abide by the above responsibilities in a positive manner.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_



### **Purposes and Objectives**

Special attention is given to health occupations students whose curriculum includes patient or patient specimen contact. A physical examination, immunization record, and health history is required to detect and prevent communicable diseases which may put the student, other students, colleagues, and/or patients at risk.

### **Process**

- The examination must be completed by a physician, physician's assistant, or nurse practitioner of the student's choice. Any incurred expenses are the student's responsibility.
- Completed forms must be submitted to the Health Occupations Office. Records will be retained, and treated confidentially. No information will be released without written consent of the student.
- Forms must be completed by the first week of classes, or earlier as required by the program.
- Students must ensure that **ALL** required information is provided. You will be contacted if your information is incomplete.
- Students will not be permitted to enter a clinical facility until their forms are approved.

### **Immunizations**

- Students must have proof of all immunizations and test listed on the Examination form.
- All immunizations must have a date of administration and be current per the guidelines.

### **Clinical and Laboratory Practice**

- Students are required to inform clinical and laboratory instructors of any condition/disease that may require safety precautions to safeguard the student and others (e.g. diabetes, seizures, etc).
- Changes in your health status (e.g. pregnancy, back injury, infectious disease) occurring after the completion of your health physical should be reported to your Program Director.

### **Recommended Vaccinations**

#### **Hepatitis B**

*Information.* OSHA and the Iowa Occupation Safety and Health Division have rules and regulations governing who should receive Hepatitis B vaccine. Since persons with Hepatitis B may become critically ill or die, it is recommended that all Health Occupations students involved in direct patient care receive the vaccine series prior to clinical coursework. The Hepatitis vaccine is a synthetic vaccine, manufactured from the yeast *Saccharomyces cerevisiae*.

*Exposure.* Exposure to Hepatitis B includes any percutaneous and mucous membrane exposure to blood or other body fluids (e.g. vaginal secretions, spinal fluid). Generally, exposure occurs via needle sticks, cuts, blood onto broken/chapped skin, and infectious material splashed into eyes, nose, or mouth.

*Indications.* Anyone with potential for exposure to blood, body fluids, or tissue.

*Contraindications.* Anyone with an allergy to yeast, thimerisol, or any other component of the vaccine should not be vaccinated. Vaccination should be postponed during acute illness.

*Administration.* Hepatitis B vaccine requires three doses. The second dose occurs one month after initial dose. A third dose is due six months after initial dose. Booster recommended in ten years.

*Effectiveness.* Approximately 95% of vaccinated persons develop desired antibodies. A fourth dose may produce antibodies in persons unresponsive to the initial three doses.

*Pregnancy and nursing.* The effect of the vaccine on fetuses and nursing infants is unknown. Women who are pregnant, planning a pregnancy, or nursing should consult a physician.

*Adverse reactions.* Hepatitis B vaccine is generally well tolerated. Soreness at the injection site is the most common side effect. Other side effects include, but are not limited to: fatigue, fever, headache, dizziness, chills, influenza-like symptoms, nausea, diarrhea, constipation, asthma-like symptoms, abnormal liver function tests, Guillian-Barre syndrome, Bell's palsy, and tranverse myelitis.

#### **Hepatitis A**

*Information.* Hepatitis A vaccine is recommended for people with chronic liver disease, intravenous drug users, people practicing unsafe sex, people with clotting disorders, or people who work with Hepatitis A in experimental settings. If you have questions about your risk factor for Hepatitis A please consult your physician.

#### **Varicella (Chickenpox)**

*Information.* Adults who have not had chickenpox should be vaccinated. Adults with reliable histories of chickenpox are assumed to be immune. If you have questions about the Varicella vaccine, please consult your healthcare provide



Health Occupations  
Student Information Sheet  
Physical Examination and Immunizations

**TO BE COMPLETED BY THE STUDENT:** SSN \_\_\_ - \_\_\_ - \_\_\_\_\_ Birthdate (mm/dd/yy) \_\_\_ / \_\_\_ / \_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

How do you rate your general health? \_\_\_\_\_ Do you have any physical or emotional limitations that might hinder your ability to perform the duties and responsibilities of the program you have selected? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Student Signature/date \_\_\_\_\_ Health Occupations Program

**TO THE EXAMINER:** While enrolled in a health occupations program at Indian Hills Community College, this student may be involved in: a rigorous academic program; stressful situations in a one-on-one basis or in groups; activities requiring average manual dexterity, ability to lift, move, or turn person weighing at least as much as the student; activities requiring use of all sense organs, and activities which requires the student to be on her/his feet for up to eight consecutive hours. **Physicals must be completed by a physician (M.D. or D.O.), physician's assistant (PA) or nurse practitioner.**

I hereby certify that I have examined the person named above and determined that she/he is physically and emotionally fit to be enrolled as a student in her/his chosen program at Indian Hills Community College.

Comments: \_\_\_\_\_

Typed/Printed Name and Address of Healthcare Provider: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_ Authorized Signature \_\_\_\_\_ Date

**Immunizations and Tests:** Note recommendations on information sheet. This portion of the form must be filled out in its entirety. Blanks are not allowed. All immunization data must be on this form. **DO NOT** submit other documents as proof.

<p><b>MMR:</b> All persons born after 1/1/57 must have received 2 injections of MMR vaccine at least one month apart and after their first birthday <b>OR</b> have sufficient rubeola, mumps, and rubella titer <b>OR</b> Physician documentation of acquired disease.</p> <p>Date of first injection: _____        Date of second injection: _____</p> <p>Rubeola Titer Date _____ <input type="checkbox"/> Immune <input type="checkbox"/> Not immune        Mumps Titer Date _____ <input type="checkbox"/> Immune <input type="checkbox"/> Not immune        Rubella Titer Date _____ <input type="checkbox"/> Immune <input type="checkbox"/> Not immune</p>	<p><b>MMR OR Rubella Titer if born BEFORE 1/1/57</b></p> <p>MMR Date: _____  <b>OR</b>        Rubella Titer Date: _____</p> <p><input type="checkbox"/> Immune <input type="checkbox"/> Not immune</p> <p><i>If Not Immune, then Rubella Vaccine (proof of two vaccinations)</i></p> <p>Date: _____        Date: _____</p>
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<p>Tetanus/Diphtheria Booster or Tdap <i>(Must be within last 10 years)</i></p> <p>Date: _____</p>	<p><b>Hepatitis B: See information sheet.</b></p> <p>Hepatitis B: #1 Date: _____        #2 Date: _____ #3 Date: _____</p> <p>If you choose NOT to receive Hepatitis B vaccine, your signature declining vaccination is required.</p> <p>_____ Student Signature _____ Date</p>
<p>Flu Vaccine</p> <p>Date: _____  <b>(Must be done annually)</b></p>	







**INDIAN HILLS COMMUNITY COLLEGE  
THERAPEUTIC MASSAGE**

**THERAPEUTIC MASSAGE STUDENT  
PHYSICAL ABILITIES REQUIREMENTS**

R-Regularly Occasionally	O- Occasionally		
Abilities	R	O	Measurable Descriptor
Vision (Corrected/Normal)	X		Ability to read documentation and instructions
Color Vision	X		Assessment of skin
Hearing	X		Client communication
Sense of Touch	X		Assessment of tissue texture
Sense of Smell	X		Assessment of client, skin, and body odors
Finger Dexterity	X		Manipulation of equipment
Temperature Discrimination	X		Assessment of temperature
Intelligible Communication	X	Oral	Reports, collaboration with instructor, patient teaching
Pushing		X	50 lbs Equipment and supplies
Pulling		X	50 lbs Equipment and supplies
Lifting	X		50 lbs Equipment and supplies
Floor to waist		X	25 lbs Equipment and supplies
12" to waist		X	25 lbs Equipment and supplies
Waist to Shoulder		X	25 lbs Equipment and supplies
Shoulder to Overhead		X	10 lbs Equipment and supplies
Reaching overhead	X		Overhead supplies
Reaching forward	X		Use of equipment, massage activities
Carrying	X		Equipment and supplies
Standing	X		Massage activities
Sitting	X		Massage activities
Squatting	X		Massage activities
Stooping	X		Massage activities
Kneeling		X	Massage activities
Walking	X		Massage activities
Running		X	Emergency situations
Crawling		X	Massage activities
Climbing		X	Massage activities
Stairs (Ascending/Descending)		X	Massage activities
Turning (Head/Neck)	X		Massage activities
Repetitive Movement	X	Leg/Arm	Massage activities, use of equipment
Use of Foot or Hand Controls	X		Massage activities, use of equipment

I have read, understand and accept the above working conditions expected of a therapeutic massage student.

\_\_\_\_\_ I do not need accommodations to perform the physical duties.

\_\_\_\_\_ I feel the following accommodations are needed to perform the physical duties.

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Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Indian Hills Community College  
Therapeutic Massage Program**

**PRACTICUM ATTENDANCE RECORD**

Each graduate of IHCC Therapeutic Massage Program is to have completed a minimum of 235 hours of practicum experience; therefore, a record of practicum attendance is vital.

Please see the IHCC TM Student Handbook to review Practicum Attendance Policy.

**Instructions:**

1. The student is to record the number of hours they attended practicum each day.
2. The student's instructor is to sign the attendance record at the end of each week to verify the number of hours in attendance.

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>Saturday</b>	<b>Total</b>	<b>Instructor Signature</b>
Week 1								
Week 2								
Week 3								
Week 4								
Week 5								
Week 6								
Week 7								
Week 8								
Week 9								
Week 10								
Week 11								
Week 12								
<b>Total</b>								
<b>Student's Name:</b>				<b>Practicum Experience</b>				
				<input type="checkbox"/> Intro to Therapeutic Massage Practicum <input type="checkbox"/> Therapeutic Massage Practicum I <input type="checkbox"/> Therapeutic Massage Practicum II				



# APPENDIX B



## INSTRUCTOR EVALUATION FORM FOR MASSAGE STUDENT

**Student** \_\_\_\_\_ **Date** \_\_\_\_\_

Is the student on time & ready for clients?	Yes	No
Is the student dressed appropriately?	Yes	No
Does the student have a good attitude?	Yes	No
Does the student accept constructive criticism?	Yes	No
Is the student acting in a professional manner to other students?		
Is the student professional & courteous to clients?		
Is the student doing their part in preparation and cleanup?	Yes	No
Is student filling out the proper paperwork?	Yes	No
Is the student keeping all information confidential?	Yes	No
Overall, is feedback from the clients positive?	Yes	No
Is student willing to ask questions when he/she needs help?	Yes	No
Is there any area of concern for the student? (If yes, see comments below)	Yes	No

Does the student have any questions or concerns?

Does the instructor have any questions or concerns about the student?

\_\_\_\_\_

I understand that this evaluation keeps me informed of my progress during practicum.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Faculty Signature \_\_\_\_\_ Date \_\_\_\_\_



## MESSAGE THERAPIST EVALUATION FORM

Please answer the following questions. Your honest answers are appreciated!  
Thank you in advance!!

Was the temperature comfortable?	Yes	No
Was the correct amount of oil used?	Yes	No
Was your body covered to your comfort level?	Yes	No
Was the amount of conversation acceptable?	Yes	No
Were all your questions answered in an informative professional manner?	Yes	No
Was the pressure satisfactory?	Yes	No
Was the bolster used under your legs?	Yes	No
Was the massage given at the right speed?	Yes	No
Did the therapist ask if you had any problem areas?	Yes	No
Were the therapist's transitions smooth?	Yes	No
Did you feel like your muscles were properly worked?	Yes	No
Did the therapist maintain touch with you?	Yes	No
How did the massage make you feel?		
Relaxed                      tense                      uncomfortable		

What was the overall impression of your therapist? (Did they listen to what you said? Was she/he professional at all times? etc.)

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I understand that this is a student practicum, and students give all treatments.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PROFESSIONAL DEVELOPMENT ASSESSMENT**

**Name:** \_\_\_\_\_ **Evaluator (other than self):** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Rating Scale:**

**0= unsatisfactory:** The student does not demonstrate the required level of professional skill.

**1= Needs improvement:** The student while beginning to demonstrate the required level of professional skill, needs improvement in either the extent to which the skill has developed or the consistency of its usage or both.

**2= satisfactory:** The student demonstrates the required level of professional skill.

<p><b>1 Dependability</b> as demonstrated by:</p> <p>a. Being on time for classes, work, meetings. ....</p> <p>b. Handing in assignments, papers, reports, and notes when due.</p> <p>c. Following through with commitments and responsibilities.</p> <p><b>Comments:</b></p>	<table> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> </table>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>									
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<p><b>2 Professional Presentation</b> as demonstrated by:</p> <p>a. Presenting oneself in a manner that is accepted by peers, clients and employers. ....</p> <p>b. Presenting oneself with appropriate grooming and hygiene for a health care setting. ....</p> <p>c. Using body posture and affect that communicates interest or engaged attention. ....</p> <p>d. Displaying a positive attitude towards becoming a professional. ....</p> <p>e. Managing personal emotions maturely. ....</p> <p>f. Displaying integrity in academic and professional matters.....</p> <p><b>Comments:</b></p>	<table> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> </table>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>
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<p><b>3 Initiative</b> as demonstrated by:</p> <p>a. Showing an energetic, positive, and motivated manner.....</p> <p>b. Self-starting projects, tasks, and programs, including satisfactorily making up missed assignments.....</p> <p>c. Taking initiative to direct own learning. ....</p>	<table> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> </table>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>									
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<b>Comments:</b>				
<b>4 Empathy</b> as demonstrated by:	a. Being sensitive and responding to the feeling and behaviors of others. ....	<b>0</b>	<b>1</b>	<b>2</b>
	b. Listening to and considering the ideas and opinions of others.....	<b>0</b>	<b>1</b>	<b>2</b>
	c. Rendering assistance to all individuals without bias or prejudice. ....	<b>0</b>	<b>1</b>	<b>2</b>
	<b>Comments:</b>			

<b>5 Cooperation</b> as demonstrated by:	a. Working effectively with other individuals.....	<b>0</b>	<b>1</b>	<b>2</b>
	b. Showing consideration for the needs of the group. ...	<b>0</b>	<b>1</b>	<b>2</b>
	c. Developing group cohesiveness by assisting in the development of the knowledge and awareness of others. ....	<b>0</b>	<b>1</b>	<b>2</b>
	<b>Comments:</b>			

<b>6 Organization</b> as demonstrated by:	a. Prioritizing tasks.....	<b>0</b>	<b>1</b>	<b>2</b>
	b. Managing time and materials to meet program requirements. ....	<b>0</b>	<b>1</b>	<b>2</b>
	c. Demonstrating ability to be flexible with unexpected situations.....	<b>0</b>	<b>1</b>	<b>2</b>
	<b>Comments:</b>			

<b>7 Clinical Reasoning</b> as demonstrated by:	a. Using an inquiring or questioning approach in class .....	<b>0</b>	<b>1</b>	<b>2</b>
	b. Analyzing, synthesizing, and interpreting information.....	<b>0</b>	<b>1</b>	<b>2</b>
	c. Giving alternative solutions to complex issued and situations. ....	<b>0</b>	<b>1</b>	<b>2</b>
	<b>Comments:</b>			

<b>8 Supervisory Process</b> as demonstrated by:	a. Giving and receiving constructive feedback.....	<b>0</b>	<b>1</b>	<b>2</b>
	b. Modifying performance in response to meaningful feedback.....	<b>0</b>	<b>1</b>	<b>2</b>
	c. Operating within the scope of one’s own skills and	<b>0</b>	<b>1</b>	<b>2</b>
	<b>Comments:</b>			

seeking guidance when needed. ....  <b>Comments:</b>										
<b>9 Verbal Communication</b> as demonstrated by: a. Interacting verbally in class. .... b. Sharing perceptions and opinions with clarity and quality of content..... c. Verbalizing opposing opinions with constructive results. ....  <b>Comments:</b>	<table style="width: 100%; text-align: center;"> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> </table>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>
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<b>10 Written Communication</b> as demonstrated by: a. Writing clear sentences. .... b. Communicating ideas and opinions clearly and concisely in written papers, notes and reports. .... c. Communicating complex subject matter clearly and concisely in writing, using correct punctuation and grammar. ....  <b>Comments:</b>	<table style="width: 100%; text-align: center;"> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> <tr> <td><b>0</b></td> <td><b>1</b></td> <td><b>2</b></td> </tr> </table>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>
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