



THE VISION OF THE UNIVERSITY OF JORDAN

A university excelling in pedagogy, research, and innovation and advancing in global standing

THE MISSION OF THE UNIVERSITY OF JORDAN

Providing students with fulfilling learning experiences, conducting knowledge-producing research, and building firm societal ties, within an environment conducive to creativity, innovation, and entrepreneurship: making efficient use of resources and forging fruitful partnerships.

THE VISION OF THE SCHOOL OF REHABILITATION SCIENCES

Leadership in the creation and development of knowledge, and in the preparation of human resources aspiring for excellence regionally and internationally

THE MISSION OF THE SCHOOL OF REHABILITATION SCIENCES

To excel in the preparation and training of model rehabilitation personnel, who participate in the health and community sector, and provide the local and regional community with appropriate rehabilitation services based on needs. Through educational curricula that facilitates the implementation of up to date rehabilitation services based on the best available evidence.

THE VISION OF THE DEPARTMENT OF PHYSIOTHERAPY

To be recognized as an outstanding educational program with high quality faculty members, staff and students

THE MISSION OF THE DEPARTMENT OF PHYSIOTHERAPY

To graduate professionals in the field of physical therapy who are to contribute to the health needs of society through education, scholarly activities, research, service and professional practice.



Course Syllabus

1	Course title	Cardiopulmonary Physiotherapy 2	
2	Course number	1801325	
3	Credit hours	(2,2)	
	Contact hours (theory, practical)	(2,8)	
4	Prerequisites/corequisites	Cardiopulmonary Physiotherapy 1	
5	Program title	B.Sc. in Physiotherapy	
6	Program code	1801	
7	Awarding institution	The University of Jordan	
8	School	School of Rehabilitation Sciences	
9	Department	Department of Physiotherapy	
10	Course level	Undergraduate/ Third year	
11	Year of study and semester (s)	2025/ 2026 First semester	
12	Other department (s) involved in teaching the course	None	
13	Main teaching language	English	
14	Delivery method	<input checked="" type="checkbox"/> Face to face learning <input type="checkbox"/> Blended <input type="checkbox"/> Fully online	
15	Online platforms(s)	<input checked="" type="checkbox"/> Moodle <input checked="" type="checkbox"/> Microsoft Teams <input type="checkbox"/> Skype <input type="checkbox"/> Zoom <input type="checkbox"/> Others.....	
16	Issuing/Revision Date	5/10/2025	

17 Course Coordinator:

Name: Dr Mohammad Z. Darabseh
15:30

Contact hours: Monday, Wednesday 14:30 –

Office number: 426

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18 Other instructors:

Name: Afnan Atallah

Email:

Name: Nadine Ramahi

Email:

Name: Lamees

Email:

19 Course Description:

This course provides the principles of the design and delivery of the management of cardiorespiratory patients. This includes the physiological basis of the various cardiorespiratory techniques and their application. The module also provides an in-depth study of the physiological responses to exercise in patients with cardiorespiratory disease. Exercise testing and training.

20 Course aims and outcomes:

- To introduce the physiological mechanisms of Cardiorespiratory signs and symptoms
- To explore the underlying theory and the physiological effects of various cardio-respiratory therapeutic interventions
- To practice safe and effective application of various respiratory therapeutic interventions
- To practice the development of physiotherapy management plan for patients with Cardiorespiratory problems
- To implement evidence-based interventions in the design and delivery of Cardiorespiratory physiotherapy management



A- Aims:

B- Students Learning Outcomes (SLOs):

Upon successful completion of this course, students will be able to:

SLOs SLOs of the course	SLO (1)	SLO (2)	SLO (3)	SLO (4)	SLO (5)	SLO (6)	SLO (7)	SLO (8)	SLO (9)	SLO (10)	SLO (11)
1 Use the international classification of functioning, disability and health to analyze clinical cases and plan assessment	√										
2 Design clinical intervention and management using a patient centered approach that implements mutual goal setting	√										
3 Explain the physiological mechanisms supporting the use of the various therapeutic respiratory interventions.		√									
4 Demonstrate understanding of the physiological, structural, behavioral and functional changes that can result from physiotherapy intervention and disease progression		√									
5 Demonstrate professional behavior and adherence to the codes of ethics during clinical placement				√							
6 Demonstrate awareness of the various types of scientific evidence and guidelines underpinning the cardiorespiratory Interventions					√						
7 Discuss the role of cardiorespiratory physiotherapy in enhancing individuals' functional ability, using scientific evidence.					√						



6 Demonstrate critical thinking skills when relating physiotherapy problems to appropriate physiotherapy interventions						√					
7 Reflect on clinical practice and modify performance accordingly (based on tutors and peers feedback, and scientific evidence)						√					
8 Provide complete documentation related to the management of cardiorespiratory patients in clinical practice							√				
9 Demonstrate evidence of communicating health messages related to smoking cessation and promotion of physical activity during clinical placement								√			
10 Document the possible role of other health professional in the management of patients with cardiorespiratory problems										√	
11 Demonstrate effective oral and written communication with clients, careers and health professionals during clinical placement											√

Program SLOs:

1. Recognize, critically analyze and apply the conceptual frameworks and theoretical models underpinning physiotherapy practice
2. Demonstrate comprehension of background knowledge that informs sound physiotherapy practice
3. Demonstrate the ability to use online resources and technologies in professional development
4. Display a professional commitment to ethical practice by adhering to codes of conduct and moral frameworks that govern the practice of physiotherapy
5. Evaluate the importance of and critically appraise research findings to inform evidence-based practice such that these skills could be utilized in continuing self-development
6. Implement clinical reasoning, reflection, decision-making, and skilful application of physiotherapy techniques to deliver optimum physiotherapy management



7. Adhere to the professional standards of physiotherapy practice in terms of assessment, management, outcome measurement, and documentation
8. Display a willingness to promote healthy lifestyle and convey health messages to clients
9. Value the willingness to exercise autonomy while appreciating the challenges associated with delivering physiotherapy services
10. Display the ability to practice in a safe, effective, non-discriminatory, inter- and multi-disciplinary manner
11. Demonstrate effective oral and written communication with clients, carers, and health professionals



21. Topic Outline and Schedule:

Week	Lecture	Topic	Student Learning Outcome	Learning Methods (Face to Face/Blended/ Fully Online)	Platform	Evaluation Methods	Resources
1	1.1 6/10	Introduction	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams e-learning	Theory exam Project	1.1 Chapters 29,30,31,32
	1.2 8/10	Respiratory Failure management	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	1.1 1.2 2 Chapters 29,30,31,32
2	2.1 13/10	Interpretation and further management of respiratory failure	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	1.1 1.2 2 Chapters 29,30,31,32
	2.2 15/10	Management of sputum retention (ACBT, GAP, vibration and percussion)	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	1.1 1.2 2 Chapters 29,30,31,32
3	3.1 20/10	Management of dyspnea (acute) 1	SLO1, SLO2	Face to face	Microsoft teams	Theory exam	1.1 1.2



			SLO5 SLO6 SLO8			Project	2 Chapters 29,30,31,32
	3.2 22/10	Management of dyspnea 2 (oxygen therapy)	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	1.1 1.2 2 Chapters 29,30,31,32
4	4.1 27/10	Management of reduced lung volumes 1	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	1.1 1.2 2 Chapters 29,30,31,32
	4.2 29/10	Management of reduced lung volumes 2	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	1.1 1.2 2 Chapters 29,30,31,32
5	5.1 3/11	Pulmonary rehab 1	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	1.1 1.2 2 Chapters 29,30,31,32
	5.2 5/11	Pulmonary rehab 2	SLO1, SLO2 SLO5 SLO6	Face to face	Microsoft teams	Theory exam Project	1.1 1.2 2

			SLO8				Chapters 29,30,31,32
6	6.1 10/11	Atelectasis	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	
	6.2 12/11	Cystic fibrosis 1	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	
7	7.1 17/11	Cystic fibrosis 2	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	
	7.2 19/11	Revision		Face to face	Microsoft teams	Theory exam Project	
8	8.1 24/11	Cardiac diseases 1 (Bypass surgeries and atherosclerosis) Midterm exam (TBC)	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	
	8.2 26/11	Cardiac diseases 2 (MI)	SLO1, SLO2	In school exam			



		Midterm exam (TBC)	SLO5 SLO6 SLO8				
9	9.1 1/12	Cardiac rehab 1 Midterm exam (TBC)	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	Chapter 39
	9.2 3/12	Cardiac rehab 2 Midterm exam (TBC)	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	Chapter 39
10	10.1 8/12	Early mobilization for DVT, MI and PE	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	Chapter 34
	10.2 10/12	Early mobilization for DVT, MI and PE	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	Chapter 34
11	11.1 15/12	Mechanical ventilation 1	SLO1, SLO2 SLO5 SLO6	Face to face	Microsoft teams	Theory exam Project	Chapter 34



			SLO8				
	11.2 17/12	Mechanical ventilation 2	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	Chapter 34
12	12.1 22/12	ICU and surgical conditions 1	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face	Microsoft teams	Theory exam Project	Appendices A-D
	12.2 24/12	ICU and surgical conditions 2	SLO1, SLO2 SLO5 SLO6 SLO8	Face to face			
13	13.1 29/12	Digital health intervention in respiratory diseases – Pulmonary rehabilitation in COPD	SLO1- 11	Face to face	Theory exam Project	Appendices A-D	Face to face
	13.2 31/12		SLO1- 11	Face to face	Theory exam Project	Appendices A-D	Face to face
14	14.1 5/1	Clinical case study	SLO1- 11	Face to face	Theory exam Project	Appendices A-D	Face to face
	14.2 7/1		SLO1- 11	Face to face	Theory exam	Appendices A-D	Face to face



					Project		
15	15.1 12/1	Revision	SLO1-11	Face to face	Theory exam Project	Appendices A-D	Face to face
	15.2 14/1		SLO1-11	Face to face	Theory exam Project	Appendices A-D	Face to face

Practical and clinical schedule								
Week	Lecture	Topic	Student Learning Outcome	Learning Methods (Face to Face/Blended/ Fully Online)	Platform	Evaluation Methods	Synchronous / Asynchronous Lecturing	Resources
1	1	Module introduction	SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Microsoft teams	Theory exam Practical exam Project	Face to face	
			SLO3 SLO4 SLO7 SLO8 SLO9	Face to face	Microsoft teams	Theory exam Practical exam Project	Face to face	

			SLO10 SLO11					
2	2		SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	Infectio n control resourc es on e-learnin g and Micros oft teams
		Interpretatio n of Respiratory failure	SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	
Week	Lect ure	Topic	Student Learning Outcome	Learning Methods (Face to Face/Blend ed/ Fully Online)	Platfor m	Synchron ous / Asynchro nous Lecturing	Evaluat ion Method s	Resour ces
3	3	Active Cycle Breathing Technique, Gravity assisted positioning,	SLO3 SLO4 SLO7 SLO8 SLO9	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	Chapte r 39 Resour ces on e-learnin g

		vibration and percussion	SLO10 SLO11					
			SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	
4	4		SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	Chapte r 23
		Managemen t of acute dyspnoea	SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	
5	5	Managemen t of chronic dyspnoea	SLO3 SLO4	Face to face	Micros oft teams	Theory exam	Face to face	Chapte r 9,10

		(Oxygen Therapy)	SLO7 SLO8 SLO9 SLO10 SLO11			Practical exam Project		
			SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	
6	6	Positioning for increasing lung volume	SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	Chapte r 11
			SLO3 SLO4 SLO7 SLO8 SLO9 SLO10	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	

			SLO11					
7	7		SLO3	Face to face	Micros oft teams	Theory exam	Face to face	Chapte r 26
			SLO4					
			SLO7					
			SLO8					
			SLO9					
			SLO10					
			SLO11					
		Positioning for increasing lung volume	SLO3	Face to face	Micros oft teams	Theory exam	Face to face	
			SLO4					
			SLO7					
			SLO8					
			SLO9					
			SLO10					
			SLO11					
8	8		SLO3	Face to face	Micros oft teams	Theory exam	Face to face	
			SLO4					
			SLO7					
			SLO8					
			SLO9					
			SLO10					
			SLO11					
		Pulmonary rehab	SLO3	Face to face	Micros oft teams	Theory exam	Face to face	
			SLO4					
			SLO7					

			SLO8 SLO9 SLO10 SLO11			Project		
9	9	Management of Atelectasis and CF	SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	Chapte r 24,25 Resour ces on e- laernin g
			SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11					
10	10	Case scenario: Sepsis Early mobilizatio n for DVT, MI and PE	12-15/12					Chapte r 24,25 Rsourc es on e- learnin g

			SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	Chapte r 24,25
			SLO3 SLO4 SLO7 SLO8 SLO9 SLO10 SLO11	Face to face	Micros oft teams	Theory exam Practical exam Project	Face to face	
12	12	Digital health intervention in respiratory diseases – Pulmonary rehabilitation in COPD	SLO1-SLO11					
			SLO1-SLO11					
13	13	ICU practical applications						
14	14	Revision (TBC)						



15	15	Final practical exam (TBC)						

22 Evaluation Methods:

Opportunities to demonstrate achievement of the SLOs are provided through the following assessment methods and requirements:

Evaluation Activity	Mark	Topic(s)	SLOs	Period (Week)	Platform
Midterm theory	30	Week 1-8	SLO1-SLO11	Week 8/9	Onsite
Ongoing clinical assessment	10		SLO1-SLO11	Ongoing starting after week 3	Onsite
Assignment/presentation/project	10	Week 11-12	SLO1-SLO11	Week 8-10	Onsite
Final practical exam	20	Week 1-13	SLO1-SLO11	Week 12-14	Onsite
Final theory exam	30	Week 9-15	SLO1-SLO11	Week 15	Onsite

Assignment/presentation/project:	Digital health use in cardiorespiratory physiotherapy
Description:	The instructor will provide number of articles in the field of digital health use in cardiorespiratory physiotherapy. The articles

	<p>will already be published in an indexed well-known international journal.</p> <p>Students will be divided into groups based on their practical groups.</p> <p>Students will be asked to read, understand the provided articles and submit and present written essay according to the below structure:</p> <p>Title</p> <p>Abstract 200 word (Background, Purpose, Methods, Results, Conclusion)</p> <p>Background (200-300 word at least)</p> <p>Purpose- aim of the study (50 word at least)</p> <p>Methods: (50-100 word)</p> <p>Results: (150-250 word at least)</p> <p>Discussion (300 word at least)</p> <p>Conclusion: (50-100 word)</p> <p>Clinical implication: (100-200 word)</p> <p>Students should work in groups for the essay, and they will be asked individually about all the provided essay parts.</p> <p>Group representative should submit the essay by uploading a soft copy on the e-learning website</p> <p>A penalty of 3 marks reduction will be applied for each day delay including weekends.</p> <p>Marks will be divided as below:</p> <p>5 marks – essay (overall)</p> <p>5 marks – individual (individual performance)</p> <p>Students will be divided as groups. Articles are as below:</p> <ul style="list-style-type: none"> - Virtual Reality and Videogaming in Pulmonary Rehabilitation for Asthma: A Systematic Review of Clinical Outcomes and Engagement - The Application of Robotics in Cardiac Rehabilitation: A Systematic Review
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	<ul style="list-style-type: none"> - The Effects of Digital Health Interventions for Pulmonary Rehabilitation in People with COPD: A Systematic Review of Randomized Controlled Trials - The Effects of Virtual Reality Physiotherapy Interventions on Cardiopulmonary Function and Breathing Control in Cystic Fibrosis: A Systematic Review
<u>Assignment due date:</u>	Week 8-10
<u>Grade:</u>	10 marks
<u>Rubric:</u>	(please see attached appendix 3)

23 Course Requirements

(e.g: students should have a computer, internet connection, webcam, account on a specific software/platform...etc):

Access to computer/laptop

24 Course Policies:

A- Attendance policies:

- **Recording (audio or video) of face-to-face or online lectures is prohibited without prior permission and consent from the course instructor.**
- Students are expected to be on time.
- Repeated tardiness or leaving early will not be accepted.
- Students who miss class (or any portion of class) are responsible for the content. All classes will be recorded and uploaded on Microsoft Stream. It is the student's responsibility to review the material of classes they missed.
- Attendance will be taken on every class throughout the semester.
- Absence of more than 15% of all the number of classes (**which is equivalent to 5 theory classes, 2 practical, and 2 clinical**) requires that the student provides an official excuse to the instructor and the dean.
- If the excuse was accepted the student is required to withdraw from the module.
- If the excuse was rejected the student will fail the module and mark of zero will be assigned according to the regulations of The University of Jordan.



B- Absences from exams and submitting assignments on time:

- The instructor will not do any make-up exams.
- Exceptions for make-up exams and late submission of class assignments will be made on a case-by-case basis for true personal emergencies that are described as accepted by the regulations of UJ (e.g., documented medical, personal, or family emergency).
- It is the student's responsibility to contact the instructor within 24 hours of the original exam time to schedule a make-up exam
- **Late submission of homework will result in deduction of 3 points for each day of delay**
- Makeup for the final exam may be arranged according to the regulations of The University of Jordan.

C- Health and safety procedures:

- You should observe the safety procedures recommended by the clinical settings

D- Honesty policy regarding cheating, plagiarism, misbehaviour:

- Students are expected to observe all University guidelines pertaining to academic misconduct.
- Any work submitted by a student for academic credit must be the student's own work. Submission of work taken directly from another source (e.g., book, journal, internet, or another student work) will be considered plagiarism and the student/group will get a zero grade on that homework. In addition, if copying occurred, both the student who copied the work and the student who gave material to be copied (if applicable) will receive a zero for the assignment.
- Students are expected to do work required for homework on their own. Asking other instructors at JU, staff, or other students to assist in or do any part of the assignment for them will negatively affect their grade on that assignment. The course instructor is the person the student needs to talk to if s/he has any difficulties pertaining to an assignment or project and is strongly encouraged to schedule an appointment with the instructor if such difficulties arise during the semester.
- Course materials prepared by the instructor, together with the content of all lectures and review sessions presented by the instructor are the property of the instructor. Video and audio recording of lectures and review sessions without the consent of the instructor is prohibited.
- Any forms of academic misconduct will be handled according to the University of Jordan guidelines.

E- Grading policy:



- Grading for this course will be determined based upon the accumulation of points for variety of assignments and exams.
- All work will be evaluated on completeness, organization, clarity of information, and the integration and application of the material.

F- Available university services that support achievement in the course:

- The University of Jordan provides many services to support social, health, and mental well-being of students in general and students with disabilities in specific. Students are advised to visit the Deanship of Students Affairs to learn more about those services.
- If you are a student with a disability for which you may request accommodations, please notify the instructor as soon as possible (email is acceptable) so the appropriate accommodations for this course can be made. Also, notify the staff of Services for Student with Disabilities (Deanship of Students Affairs) as soon as possible.
- The University of Jordan provides internet access for students who request such services. Please contact the Assistant Dean for Student Affairs for such requests.

25 References:

A- Required book(s), assigned reading and audio-visuals:

1. Text books
 - 1.1. Frownfelter D . & Dean E., 2012. Cardiovascular and Pulmonary Physical Therapy: Evidence to Practice, 5editon. Elsevier.
 - 1.2 Prayor and Prasad 2002. Physiotherapy for Respiratory and Cardiac problems: Adults and Pediatrics, Fourth edition. Elsevier.
 - 1.3 Guthrie 2009. Clinical case studies in physiotherapy. A guide for students and graduates, first edition. Elsevier.
2. Articles and teaching materials provided by lecturer through the e-learning website
3. Guidelines:
 - 3.1 British Thoracic Society guideline on pulmonary rehabilitation in adults: accredited by NICE
 - 3.2 An Official American Thoracic Society/European Respiratory Society Policy Statement: Enhancing Implementation, Use, and Delivery of Pulmonary Rehabilitation.
 - 3.3 An official American Thoracic Society/European Respiratory Society statement: key concepts and advances in pulmonary rehabilitation.
 - 3.4 BTS Guideline for oxygen use in healthcare and emergency settings
 - 3.5 BTS guidelines for home oxygen use in adults



3.6 World Health Organization Expert Committee. Rehabilitation after cardiovascular diseases, with special emphasis on developing countries. World Health Organ Tech Rep Ser 1993; 831: 1–122. Medline

3.7 Balady GJ, Williams MA, Ades PA, Core components of cardiac rehabilitation/secondary prevention programs: 2007 update: A scientific statement from the American Heart Association Exercise, Cardiac Rehabilitation, and Prevention Committee, the Council on Clinical Cardiology; the Councils on Cardiovascular Nursing, Epidemiology and Prevention, and Nutrition, Physical Activity, and Metabolism; and the American Association of Cardiovascular and Pulmonary Rehabilitation. Circulation 2007; 115: 2675–2682. Crossref, Medline

3.8 American Association of Cardiovascular and Pulmonary Rehabilitation. Guidelines for Cardiac Rehabilitation and Secondary Prevention Programs, 5th ed. Champaign, IL: Human Kinetics, 2013

B- Recommended books, materials, and media:

26 Additional information:

Students with disabilities:

- If you are a student with disability, please contact the course coordinator at the beginning of the term to inform them of any needs or adjustments you might have.
- According to University regulations, some students with disabilities can be allowed additional time during exams. This extra time is granted by an official letter from the University administration. Please discuss with the course coordinator your need for such extra time at the start of the term.
- All information you provide to the course coordinator will be dealt with confidentially.

Course material and copy rights:

- All material prepared by the course coordinator for the purposes of this course are the intellectual property of the course coordinator. It is only intended for the personal use of students for their individual learning.



- Sharing of course content with other people or via different platforms other than those used by the course coordinator is prohibited. The permission of the course coordinator must be sought before sharing of content.

This course builds upon knowledge students obtained in the following courses:

Therapeutic 1 and 2, exercise physiology, and cardiopulmonary physiotherapy 1

Name of Course Coordinator: Mohammad Darabseh---Signature: MZD--- Date: 5/10/2025

Head of Curriculum Committee/Department: Dr. Mayis Aldughmi Signature: MD

Head of Department: Dr. Mayis Aldughmi Signature: MD

Head of Curriculum Committee/Faculty: ---Lara Khlaifat---- Signature: -----LK

Dean: ---Lara Khlaifat---- Signature: -----LK

Reviewed by

Discussion of clinical case and ongoing clinical evaluation criteria (will be converted to 10)

Presentation skills						
Use of voice and visual effect	5	4	3	2	1	0
Language and flow of speech	5	4	3	2	1	0
Response to questions and comments	5	4	3	2	1	0
Clinical reasoning						
History	5	4	3	2	1	0
Examination	5	4	3	2	1	0
Setting goals	5	4	3	2	1	0
Treatment choice	5	4	3	2	1	0
Explanation of outcomes and progression	5	4	3	2	1	0
Application						
History	5	4	3	2	1	0
Physical examination	5	4	3	2	1	0
Treatment	5	4	3	2	1	0
Patient education	5	4	3	2	1	0
Documentation	5	4	3	2	1	0

Presentation skills (5 marks)

0: the student lacks appropriate presentation skills with evidence of hesitancy, reluctance and lack of confidence. 1: poor presentation skills with some evidence of hesitancy, reluctance and lack of confidence.

2: fair presentation skills with some attempts to overcome hesitation and reluctance and demonstrate some confidence.

3: Average presentation skills rarely hesitant or reluctant, demonstrate self-confidence.

4: very good presentation skills, no hesitation or reluctance and demonstrate self-confidence. Appropriate use of voice and visual effects

5: excellent presentation skills, with outstanding use of voice and visual effects, take the lead and interacts with the discussion.

Clinical reasoning (5 marks)



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- 0: Only description, inability of discussion and analysis
 1: very superficial analysis of the case presentation, and inability to critique of patient management
 2: adequate analysis of the case presentation, superficial critique of patient management
 3: good analysis of the case presentation, superficial critique of patient management
 4: strong analysis of the case presentation, good critique of patient management
 5: outstanding analysis of the case presentation, in depth critique of patient management using sound evidence

Application (10 marks)

- 0: I don't know
 1: Perform the task hesitantly after receiving guidance/ support
 2: Performs the task with considerable mistakes and/or hazards
 3: Performs the task with minor mistakes
 4: Performs the task with hesitation but without mistakes
 5: Performs the task flawlessly and efficiently

Cardiorespiratory Physiotherapy clinical skills checklist

[illegible]



Below is a description of the indicators of each criterion upon which students will be evaluated (adapted from: WCPT guideline for physical therapist professional entry level education, 2016): for Clinical and practical:

Dress code:

Clean ironed scrubs.

Your bags should be secured in the lockers when going to clinical sessions. No large bags are allowed at the hospital.

Hands should be clear of any jewels or restricting bands or metals.

Hands should be clean, and nails trimmed.

For ladies ☺ :

You may wear a lab coat over the scrubs.

Your scarf should allow easy placement of the stethoscope.

No high heels are allowed in the labs or at the clinical sessions.

For each clinical session you should have:

- A stethoscope (each student should have one). I recommend a Littman master classic II.
- A tape measure (each student should have one).
- A goniometer (each student should have one).
- A note taking pad, pen, highlighter and a marker (each student should have one).
- A small sanitizer, lots of tissues and surgical gloves (each student should have one).
- A sphygmomanometer (each group should have one).

Professionalism:

1. Accountability

- Adhere to legal practice standards, including all statutory authorities (eg federal, state, local, regional, provincial and institutional regulations) related to patient/client care.



- Practise in a manner consistent with ethical principles established by WCPT10,22 or by the Member Organisation.

2. Altruism

- Place patient's/client's needs above the physical therapist's needs.

3. Compassion/caring

- Exhibit caring, compassion and empathy in providing services to patients/clients.
- Promote active involvement of the patient/client in his or her care/intervention/treatment.
- Respect the patient's/client's right to refuse physical therapy care/intervention/treatment.

4. Cultural competence

- Identify, respect and act with consideration for patients'/clients' differences, values, preferences, beliefs and expressed needs in all professional activities.
- Manage patients/clients and interact with colleagues in a manner that is non-discriminatory and non-oppressive.
- Understand the impact of health and social care policies on professional practice.

5. Ethical behaviour

- Understand the ethical issues that inform and shape physical therapy practice.
- Know the professional, statutory and regulatory codes of practice.
- Abide by the professional code of conduct, values and beliefs.
- Maintain the principles and practice of patient/client confidentiality.

6. Integrity

- Demonstrate integrity in all interactions with patients/clients, family members, caregivers, other health care providers, students.
- Adhere to codes of professional conduct.

7. Personal/professional development

- Manage uncertainty, change and stress.
- Implement effective time-management and workload planning.
- Identify individual learning needs.
- Construct and implement a personal development plan.
- Reflect and modify behaviour in the light of experience and advice.
- Set realistic goals related to personal development.



- Recognise the significance of continuing professional development.

8. Professional duty

- Demonstrate professional behaviour in all interactions with patients/clients, family members, caregivers, other providers, students, other consumers and payers.
- Participate in self-assessment to improve the effectiveness of care/intervention/treatment.
- Participate in peer assessment activities.
- Understanding of the roles of other professions pertinent to physical therapist practice.

9. Social responsibility and advocacy

- Advocate for the health and wellness needs of society.
- Advocate for the professional competence of physical therapists in a changing health delivery environment.

10. Teamwork

- Understand the roles of different health and social care professionals involved in the management of patients/clients.
- Work with other peers and organise roles to ensure patient/client-centred services

Communication:

- Expressively and receptively communicate in a culturally competent manner with patients/clients, family members, caregivers, practitioners, and interdisciplinary team members.
- Communicate with others using written, verbal and non-verbal modes.
- Recognise the barriers to effective communication and strategies for overcoming these.
- Communicate in a way that maintains the patient's/client's confidentiality.

Assessment/ Examination:

- Examine patients/clients by obtaining a history from them and from other relevant sources.
- Examine patients/clients by performing cardiorespiratory system review.
- Use hypothetico-deductive strategies to determine the specific selected tests and measures.



- Formulate a short list of potential diagnoses or actions from the earliest clues (history and systems review) about the patient/client.
- Utilise reliable and valid tests and measures whenever possible and available.

Plan of care / intervention:

- Deliver and manage a plan of care/intervention/treatment that is consistent with legal, ethical and professional obligations and administrative policies and procedures of the practice environment. This may include consent to plan of care/intervention/treatment.
- Determine specific interventions with measurable outcome goals associated with the plan of care/intervention/treatment.
- Establish a physical therapy plan of care/intervention/treatment that is safe, effective and patient/client-centred.
- Determine patient/client goals and outcomes within available resources and specify expected length of time to achieve the goals and outcomes.
- Monitor and adjust the plan of care/intervention/treatment in response to patient/client status.
- Provide, whenever possible, evidence based physical therapy interventions/treatments to achieve patient/client goals and outcomes.
- Provide physical therapy interventions/treatments aimed at prevention of impairments, activity limitations, participation restrictions and injury including the promotion and maintenance of health, quality of life and fitness in all ages and populations.
- Demonstrate skilful application of physical therapy interventions with awareness of precautions and contraindications.
- Respond effectively to patient/client and environmental emergencies in one's practice setting.

Clinical decision making:

- Evaluate findings from the assessment/examination (history, systems review and tests and measures) to make clinical judgments regarding patients/clients.
- Formulate a diagnosis utilising a process of clinical reasoning that results in the identification of existing or potential impairments, activity limitations, participation restrictions and environmental factors.
- Know that the diagnosis may be expressed in terms of movement dysfunction or may encompass categories of impairments, activity limitations, participation restrictions and environmental factors.
- Use clinical judgment and reflection to identify, monitor and enhance clinical reasoning to minimise errors and enhance patient/client outcomes.



- Consistently apply current knowledge, theory and professional judgment while considering the patient/client perspective in patient/client care/management.