President’s Welcome

Welcome to the 37th Conference and Annual Meeting of the Texas Society of Allied Health Professions (TSAHP). TSAHP is one of the primary organizations in the state of Texas that serves the educators in allied health professions. The title of this year’s conference is “Translational Processes in Allied Health: From Education to Practice”. We believe that is essential that our various allied health programs remain relevant and responsive to the dynamic healthcare industry in which we operate. We are especially honored to have Todd Pickard, Director of The University of Texas MD Anderson Physician Assistant Administrative Programs and President of the Texas Academy of Physician Assistants, as our keynote speaker.

Special thanks go to Dr. Shirley Richmond and The University of Texas MD Anderson School of Health Professions for hosting this year’s conference. As always, thank you for your continued support of our Texas Society of Allied Health Professions. We hope you will enjoy the conference and discover more information about the translation of our educational processes into more effective clinical practice.

Sincerely,

Robin Satterwhite
Robin Satterwhite, Ed.D.
TSAHP President
Keynote Speaker

Todd Pickard, MMSc, PA-C. is a graduate of the Emory University School of Medicine Physician Assistant Program. He has been in clinical practice at The University of Texas MD Anderson Cancer Center for 16 years providing care to patients with head and neck, thoracic, breast, GI, and GU cancers. In addition to his clinical role, he serves as the PA Program Director with administrative oversight of physician assistant policy, scope of practice, evaluation and professional development. Todd is currently president of the Texas Academy of Physician Assistants. He has been active in the leadership of the American Academy of Physician Assistants (AAPA) and the Association of Physician Assistants in Oncology (APAO). He is currently the medical liaison to the American Society of Clinical Oncology (ASCO) representing AAPA and APAO. Todd has worked with ASCO to develop an education curriculum for Advanced Practice Providers in Oncology and serves on the ASCO Workforce Advisory Group. He is a member of the Committee on Cancer and Committee on Physician Distribution and Health Care access for the Texas Medical Association. He serves as an expert consultant and case reviewer for the Texas Medical Board and Texas Physician Assistant Board.

General Information

Location: The conference is hosted by The University of Texas MD Anderson School of Health Professions in Houston, Texas

Registration: Registration includes all events and sessions. The registration fee includes printed materials, admission to all sessions, refreshment breaks, reception and awards dinner (Thursday evening, September 25), and continental breakfast (Friday morning). All participants, presenters and attendees, must pay the conference registration fee. If attendees wish to bring a guest to the reception and dinner, cost is noted below

<table>
<thead>
<tr>
<th>Registration Fees</th>
<th>Before 9/1</th>
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<tr>
<td>Member</td>
<td>$ 85</td>
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<td>Non-Member</td>
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<td>Guest—Dinner</td>
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<th>Member Fees</th>
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<tr>
<td>Individual (annual)</td>
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<td>Student Membership (annual)</td>
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Location:

School of Health Professions
The University of Texas MD Anderson Cancer Center
1515 Holcombe Blvd
Houston, Texas  77030

What to Wear: Business casual attire is appropriate for conference sessions, as well as the reception and awards dinner.

Abstracts: Abstracts from this meeting’s poster and platform presentations will be posted on the TSAHP website, www.tsahp.org, after the conference.
Sponsoring Deans and Institutional Member

TSAHP thanks the following institutional and state association members for their continued support.

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- **Melba Trevino, M.Ed.**, Dean, Nursing and Allied Campus, South Texas College, McAllen

- **Ruth B. Welborn, Ph.D.**, Dean, College of Health Professions, Texas State University, San Marcos
Conference Program:  Thursday, September 25, 2014

11:00 a.m. Registration
11:30 a.m. – 1:00 p.m. Deans’ Meeting and Luncheon

Conference Opening Session

1:00 p.m. Welcome
1:15 p.m. Keynote Address
Todd Pickard

Presentation

2:15 – 2:45 p.m. Research Award Presentation:  The Relationships Between a Sleep-disordered Breathing Questionnaire, the Epworth Sleepiness Scale and Measurements of Respiratory Muscle Strength
C. Russian:  Texas State University

2:45 – 3:15 p.m. Improving Students’ Critical Thinking Skills:  A Multi-Faceted Approach
M. Dehghanpour;  J. Baker:  MD Anderson Cancer Center

3:15 – 3:30 p.m. Break

Concurrent Session A

3:30 – 4:00 p.m. Allied Health Pathways:  A Model to Preparing Minority Males for Allied Health Professions
M.J. Keller;  C. Holmes: University of North Texas

4:00 – 4:30 p.m. Apple iPad Integration in Allied Health Education:  Best Practices from an Apple Distinguished Program
E. Villarreal: University of Texas-Pan American

Concurrent Session B

3:30 – 4:00 p.m. BSN Student Satisfaction with the Introduction of High Fidelity Simulation into the Curriculum
J. Rodriguez;  S. Saladin: The University of Texas-Pan American

4:00 – 4:30 p.m. Clinical Decision-making Algorithms for Diagnostic Imaging Usage by Post Professional Physical Therapy Students
W. Herbert;  R Galloway: UTMB Galveston

4:30 – 4:45 p.m. Promoting and Assessing the Effectiveness of an Inter-professional Education Initiative
J. Ronnau: The University of Texas-Pan American

General Meeting
4:45 – 5:30 p.m. TSAHP Annual Meeting

Reception and Poster Presentation
5:30 – 6:30 p.m. Reception and Poster Presentations

Awards Dinner
6:30 p.m. Awards Dinner
**Conference Program: Friday, September 26, 2014**

**Continental Breakfast**
8:30 – 9:00 a.m.  Continental Breakfast

**Concurrent Session A**

<table>
<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>9:00 – 9:30 a.m.</td>
<td>Creating an Abdominal Compression Device for Medical Imaging</td>
<td>J. Johnston; Midwestern State University</td>
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<tr>
<td>9:30 – 10:00 a.m.</td>
<td>Cyberbullying in Higher Education</td>
<td>J. Wagner; Midwestern State University</td>
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<tr>
<td>10:00 – 10:30 a.m.</td>
<td>Governor's STEM Summer Camp</td>
<td>S. Hajjar; El Paso Community College</td>
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<tr>
<td>10:30 – 11:00 a.m.</td>
<td>Implementing a Paperless Curriculum with iPad Equipped Orthotic and Prosthetic Students</td>
<td>J. Howell; L. Merkely; Baylor College of Medicine</td>
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<tr>
<td>11:00 – 11:30 a.m.</td>
<td>Importance of an Interdisciplinary Team Approach in Achieving Improved Diagnosis of the Dizzy Patient</td>
<td>A. Rodriguez; S. Zupancic; T. Nguyen; J. Cordero; C. Seifert; B. Yadav; M. Song; Texas Tech University Health Sciences Center</td>
</tr>
<tr>
<td>11:30 – 12:00 noon</td>
<td>Interprofessional Simulation Exercise: A Pilot for Providing Collaborative Education for Health Professions and Nursing Students</td>
<td>H. Ashford; J. Rojas; V. Andrews; F. Loresto; P. Lea; T. Young; University of Texas Medical Branch</td>
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**Concurrent Session B**

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<tbody>
<tr>
<td>9:30 – 10:00 a.m.</td>
<td>Patients Who Speak Spanish: The Student Physical Therapists’ Perspective</td>
<td>S. Okere; Texas State University</td>
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<tr>
<td>10:00 – 10:30 a.m.</td>
<td>Student Success and Recruitment Balancing Act: Potential and Challenges of an Allied Health Vertical Alignment Program at UT Health Science Center San Antonio</td>
<td>D. Galvan; C. Ortega; D. Gardner; L. Smith; UT Health Science Center San Antonio</td>
</tr>
<tr>
<td>10:30 – 11:00 a.m.</td>
<td>Translational Research: An Interdisciplinary Approach</td>
<td>B. Veale; Midwestern State University</td>
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<tr>
<td>11:00 – 11:30 a.m.</td>
<td>Use of PRECEDE-PROCEED Model of Health Promotion Program Planning to Promote Heart Health Education and Blood Pressure Monitoring Among Community Dwelling Elders at a Senior Center in Houston, TX.</td>
<td>R. Patel; M. Ehrhart; R. Galvan; A. Hedges; A. Medina; K. O'Toole; M. Williams; A. Wooters; B. Zuckerman; Texas Woman's University</td>
</tr>
<tr>
<td>11:30 – 12:00 p.m.</td>
<td>Utilization of Hearing Voices Simulation to Bridge Theory to Practice with Undergraduate Nursing Students</td>
<td>M. Diaz; B. John; University of Texas-Pan American</td>
</tr>
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</table>
Poster Presentations

Posters may be set up during the registration Thursday, September 25, and will be presented during the Reception at 5:30 p.m. that evening.

1. **Across the Ages: Investigating Physical Therapists Education, Knowledge and Attitudes Toward Evidenced-based Practice**
   B. Newman: University of Texas Medical Branch

2. **Effectiveness of Verbal and Written Education on Patient Recall of Information Regarding Surgical Site Infection**
   M. Stendahl; E. Locati; D. Gobert; K. Gibbs; T. Bachman: Texas State University

3. **The Effect of Senior Meal Assistance Programs on Malnutrition Risk in Free Living Elders in Texas**
   L. Mook; M. Akin; M. Chang; V. Browning-Keen: Sam Houston State University

4. **Examination of the Differences in Health-related Physical Fitness Among Community Dwelling People with Visual Impairments as Compared to Age and Gender Matched Norms**
   K. Chovanec; V. Martinez; K. O'Toole; R. Patel; A. Bhatt; K. Hughes; A. Johnson: Texas Woman's University

5. **How Do I Teach THAT Online? Techniques for Blending Online and Face-to-face Learning to Maximize Student Development**
   J. Didier; A. Glave: Sam Houston State University

6. **Interprofessional Pediatric Advocacy Program (IPAP)**
   N. Bachynsky; M. O'Keefe; C. Baker; D. Wild; C. Jansen: University of Texas Medical Branch

7. **Oral Health Protocols and Observations of Food Modification and Avoidance Behaviors in Dementia Patients as Described by Nursing Personnel**
   A. Gallagher; K. Smith; V. Keen: Sam Houston State University

8. **Physician Assistant Boot Camp**
   J. Dazey-Caudill; S. Hubbard; S. Nobel; E. Tran; B. Quillin; D. Henzi: University of Texas Health Science Center at San Antonio

9. **Student Success and Recruitment Balancing Act: Potential and Challenges of an Allied Health Vertical Alignment Program at UT Health Science Center San Antonio**
   D. Galvan; C. Ortega; D. Gardner; L. Smith: UT Health Science Center San Antonio

10. **Unique Role of Nutrition and Interior Design Professionals in Achieving Meal Time Satisfaction in Dementia Residents**
    V. Browning-Keen; K. Kabay; L. Boyd; A. Beck; L. Burleson: Sam Houston State University
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Title:  Allied Health Pathways: A Model to Preparing Minority Males for Allied Health Professions

Authors:  M. Jean Keller, Vice President for Community Engagement and Equity and Diversity: University of North Texas; Clayton Holmes, PT, Chair and Professor, Physical Therapy Program: University of North Texas Health Science Center

Format:  Platform Presentation

Abstract:

Allied Health Pathways (AHP) is part of the Texas Higher Education Coordinating Board’s Minority Health Research and Education Grant Program. AHP is in its second year of operation and funding. AHP is designed to increase African American and Hispanic males’ awareness of allied health professions; create a pipeline approach to the recruitment, retention, admission, completion, and employment of minority males in the allied health professions, especially, physical therapy (PT); increase the number of minority male students who matriculate from two-year to four-year institutions of higher education (IHE), and from four-year IHE to professional school; create an Early Academic Success Model that can be replicated and scaled; and design vertical alignment experiences with faculty at each level of higher education to promote access and success, in prerequisite courses such as anatomy, chemistry, mathematics, and physics.

After a comprehensive literature review of minority’s access and success in higher education, it was decided AHP would be grounded in experiential learning theory where minority male students would have early work experiences. AHP created learning communities with faculty, staff, peers, and business partners to help students reflect and make meaning from work experiences in order to foster motivation and perseverance. A data management plan (dashboard) was designed and monitored program outcomes and students’ progress, times when interventions were needed, and successes.

AHP student demographic data was collected along with grade point average (GPA), GPA in specific courses, attendance and participation records in peer and employer mentoring meetings, pre- and post-tests related to cultural competence, assessments by academic advisors prior to registration at all levels of education, and student satisfaction surveys were obtained each semester. Programmatic changes were made in accordance with formative evaluation findings. Faculty involved in vertical alignment also completed pre- and post-surveys.

Currently 71 minority males are progressing in the pipeline and two are employed as PTs. The early academic success model will be shared as it is showing promise. This approach is labor intensive with constant communication is needed. A redesign adding campus based liaisons and recruiters is being proposed. The vertical alignment has improved student readiness related to academic success to articulating course.
Title: Apple iPad Integration in Allied Health Education: Best Practices from an Apple Distinguished Program

Author: Elias Villarreal, Jr., MPAS, PA-C: University of Texas Pan American, Physician Assistant Department,

Format: Platform Presentation

Abstract:

iPad technology has had a profound impact in allied health education with important implications and developing changes in pedagogy. Students and faculty are very positive about the devices and the impact they have on their motivation, ability to research, communicate and collaborate, and create new ways of meaning and understanding. This presentation outlines the best practices for learning and teaching with Apple iPad devices in a physician assistant program. The UTPA Physician Assistant Department has been recognized by Apple Corp. as an Apple Distinguished Program award recipient for 2013 – 2015. Receipt of the award clearly demonstrates the value of the iPad as an educational tool at this institution.
Title: BSN Student Satisfaction with the Introduction of High Fidelity Simulation into the Curriculum

Author: Jesse Rodriguez, BSN; Shawn Saladin, PhD.: University of Texas Pan American

Format: Platform

Abstract:

Aim: Introduce High Fidelity Simulation to junior and senior level baccalaureate nursing students using various simulated clinical encounters and obtain student perceptions of the experience.

Method: Senior and junior baccalaureate nursing students (n=500) experienced a variety of adult, child and maternity clinical simulations with guided reflection. After the experience the students completed a survey which included a qualitative component regarding their experience. Data was collected for two consecutive years.

Results: Results demonstrated that students strongly agreed that the simulation experience was educational, scenarios were applicable to practice simulation, and guided reflection after the simulation was beneficial. They also stated that clinical simulation will improve their clinical competence and desired more experiences in simulation. The qualitative responses were favorable, stating that more was learned in the Simulation Lab than in a clinical setting.

Conclusions: The findings of the surveys demonstrate that students enjoy this learning modality. The majority of the students all desired more simulation experiences and stated that the educational experience was beneficial and improved knowledge, critical thinking, and confidence in the clinical setting.
Abstract:

Experienced therapists can benefit from alternative problem solving tools to assist with clinical decision-making. Algorithm-based clinical reasoning processes may help clinicians improve evaluation and treatment effectiveness. Diagnostic imaging utilization and interpretation through algorithm-based problem solving may enhance clinical outcomes.

Purpose. The purpose of this course activity was to assist licensed therapists in recognizing how diagnostic imaging enhances clinical decisions and current practice.

Methods. Each student in this online graduate course developed a clinical reasoning algorithm based on a frequently treated primary medical diagnosis for the practice setting. The algorithm addressed primary physical therapy diagnoses associated with the primary medical diagnosis. The relevance of diagnostic imaging was emphasized at each level of the decision tree. The final product was an algorithm incorporating clinical practice guidelines.

Conclusions. Algorithm-based clinical reasoning was novel to most clinicians taking the course. The assignment provided students with a tangible clinical reasoning strategy that was directly applicable to their clinical practice setting. Student self-assessments reflected a positive shift in confidence ratings for incorporating imaging into clinical practice.
Title: Creating an Abdominal Compression Device for Medical Imaging

Author: James Johnston, Ph.D., R.T. (R)(CV), FASRT: Midwestern State University

Format: Platform Presentation

Abstract:

The purpose of this presentation is to discuss research and progress on a collaborative effort between the Robert D. and Carol Gunn College of Health Sciences and Human Services and the McCoy School of Engineering to create, test, and place into clinical use an abdominal compression device for medical imaging that would reduce radiation dose and improve image quality. The presentation will include the all phases of the project to date and findings. This presentation will begin with formation of the research team that includes two undergraduate students, a local hospital, and the services of a master machinist. Next it will cover an overview of the design and testing of the prototype and study results. It will then conclude with an overview of the creation of the clinical version, progress on the research, growth and synergy of the research team, and educational outcomes for the students.
Title: Cyberbullying in Higher Education

Author: Jessyca Wagner, MSRS, RT(R): Midwestern State University

Format: Platform Presentation

Abstract:

Bullying is a major problem in today’s society and occurs at many different ages and in many different forms. With the increase in the use of technology, cyberbullying has become one of the most prevalent types of bullying over the past several years. There have been many reports of cyberbullying amongst middle and high school students using social media, text messaging, picture messaging, and e-mail. Universities and colleges have implemented more online courses in the past 5 years, so it is of importance to investigate the frequency of cyberbullying in higher education as well. This presentation focuses on current research we are conducting in radiography, respiratory, nursing, criminal justice, social work, athletic training, and health administration programs in Texas, Oklahoma, New Mexico, Arkansas, and Louisiana. A survey was administered to program directors to be distributed to current students inquiring about the occurrence, methods, suspected reasoning, and the students’ reactions to cyberbullying. This research focuses on students in higher education to determine the prevalence, student awareness, and possible effects of cyberbullying.
El Paso Community College Health Career and Technical Education Division (EPCC) received a $100,000 grant to promote STEM majors and industries and incite interest in middle school and high school students, ages 14 to 19 year olds. To address this purpose, EPCC has conducted an academic summer camp of one month where sciences such as physics, anatomy and physiology, environmental health, computer technology, math and English were taught. In addition, STEM speaking engagements and presentations from different STEM industries in the county were offered every Friday of the summer STEM month. Students were also given the opportunity to visit Johnson’s Space Center the last week of the summer camp. It was a great experience for the students to learn about space exploration. Students presented two STEM projects at the end of the summer camp, one dealing with computer technology and one displaying space. Moreover, students were given pre-and post-assessment tests to measure STEM learning during this month’s summer camp.
Title: Implementing a Paperless Curriculum with iPad Equipped Orthotic and Prosthetic Students

Authors: Jared A. Howell, MS, CPO, LPO; Lorin C. Merkley, CP, LP: Baylor College of Medicine

Format: Platform Presentation

Abstract:

In 2012 Baylor College of Medicine founded the 5th Master of Science in Orthotics and Prosthetics program one of only 13 other orthotics and prosthetics programs nationwide. The program began with a mission to leverage changing technologies to implement the first paperless curriculum for orthotic and prosthetic students through program wide integration of the Apple iPad. Studies document iPad equipped medical students at UC Irvine scored on average 23% higher on national board exams than other previously non-equipped students graduating from the same institution. Baylor College of Medicine Orthotic and Prosthetic students were equipped with iPads for the 2013 school year, with all curriculum, student projects, and the delivery of content being specifically targeted to mobile development and consumption.

Aim 1: Assess student learning and engagement in a paperless environment including additional education opportunities available only through tablet computer equipped graduate students.

- Objective 1: Assess quality of student experience and adoption rate in the classroom.
- Objective 2: Discover and document the best course management platform for mobile use and dissemination.
- Objective 3: Understand barriers, challenges, and assets to adoption of paperless curriculum for learners.

Aim 2: Assess administrative cost/opportunity and faculty adoption of paperless learning curriculum.

- Objective 1: Discover and document faculty adoption of iPads for delivery of course content.
- Objective 2: Document changes in education style and learning experiences used by equipped faculty through use of the new format.

Methods: Equip students, faculty and staff with iPads, course management platforms, digital texts, and freedom to explore. Perform frequent temperature assessments and facilitated feedback sessions to garner feedback and examine adoption rate.

Results: Adoption rate of technology among students was 100%, with 100% of faculty using most features available for course instruction with very positive feedback. Faculty expanded learning experiences and laboratory coursework as technological capability increased and time to implement decreased. The program recognized a significant per student cost savings over previous budget allocations for printing and dissemination. After 2 weeks of adaptation students described their “relationship” with their iPad as “inseparable”. At completion of basic science year early signs point to increased understanding and retention of core material.

Conclusion: Paperless curriculum is attainable, uses less faculty resources, decreases educational material expenditures and is highly desirable to today’s learners. While integration went smoothly many lessons were learned.
Title: Importance of an Interdisciplinary Team Approach in Achieving Improved Diagnosis of the Dizzy Patient

Authors: Amanda I. Rodriguez, AuD; Steven Zupancic, AuD, PhD; Tam Q. Nguyen, MD; Joehassin Cordero, MD; Charles Seifert, PharmD; Barakha Yadav, PharmD; Michael M. Song, PharmD: Texas Tech University Health Sciences Center

Format: Platform Presentation

Abstract:

Importance: There is limited information describing the outcomes of a multidisciplinary team approach for diagnosis and management of the dizzy patient.

Objective: To evaluate the effectiveness an interdisciplinary healthcare management approach in achieving improved diagnosis of the dizzy patient.

Design: A 3-year retrospective chart review study of 134 participants.

Setting: A major medical center, speech, language and hearing sciences department with a multidisciplinary team including an otolaryngologist, neurologist, physical therapist, pharmacist, and audiologist

Participants: Patients referred by physicians to Texas Tech University Health Sciences Center, Speech-Language and Hearing Sciences Department for a full vestibular evaluation.

Interventions: Complete diagnostic evaluation, assessment of structural and non-structural cause(s), fall prevention planning, and care coordination between the interdisciplinary team and primary care providers. To observe potential advantages of a team approach, year 3 incorporated the interdisciplinary team approach of care while year 1-2 did not.

Main Outcomes and Measures: Key variables examined were: 1) Initial provider referring for vestibular testing, 2) Initial diagnosis compared to final diagnosis made following vestibular assessment, 3) Frequency of each vestibular diagnosis determined following vestibular assessment, 4) Frequency of subjects who have a multifactorial dizziness, and 5) Frequency of subjects referred back to each specialty (i.e., otolaryngology, primary care, neurology, psychiatry, and physical therapy).

Results: Prior to implementation of a team approach our results demonstrated that 1) physicians use unspecific dizziness diagnosis codes, 2) there is a low number of patients diagnosed with dizziness who were referred for further vestibular testing, 3) the initial diagnosis made by the initial provider was similar to the final diagnosis after the vestibular assessment, and 4) the most frequently occurring vestibular diagnoses were unilateral vestibular hypofunction and benign paroxysmal positional vertigo. Following the utilization of an interdisciplinary model of care for dizzy patients, it was determined that 1) overall number of patients referred for vestibular testing increased, 2) specific diagnoses made following the vestibular management increased, 3) dizziness was considered to be multifaced for a greater number of patients, and 4) a greater number of patients were referred to a secondary specialist other than the otolaryngologist, due to the increased number of referrals and multifaceted diagnoses made.

Conclusion and Relevance: An interdisciplinary team approach for management of the dizzy patient can lead to more specific diagnoses and illustrate the importance of incorporating other health care professionals such as audiologists, physical therapists, and pharmacists into the balance care team. With the assistance of other providers, there is potential to reduce overflow in specialty clinics such as otolaryngology, decrease inappropriate referrals and patient wait time, and promote advocacy for a team approach in patient management. Future studies should address the efficacy of a team approach in resolving dizziness for patients with chronic dizziness and demonstrate improved fall prevention.
Title: Improving Students' Critical Thinking Skills: A Multi-Faceted Approach

Authors: Mahsa Dehghanpour, EdD, MS, CMD; Jamie Baker, MEd, CMD:
University of Texas MD Anderson School of Health Professions
Medical Dosimetry Program

Format: Platform Presentation

Abstract:

Allied health educators are accountable to improve learning outcomes and produce skillful practitioners functioning as informed citizens. Society needs individuals who can think critically and solve real world problems. The memorization of scientific facts and figures does not imply content mastery. In today's world, technology is an integral part of a student's life and information is instantly accessible. Therefore, the traditional classroom strategies with the teacher as the dispenser of knowledge and students as passive recipients are no longer sufficient. Making the transition from an authoritative lecturer to a classroom facilitator who collaborates with students during the learning process can be a difficult journey for some faculty. Research supports the effectiveness of active learning in improving student outcomes. Providing opportunities for students' engagement motivates them to learn, retain, and transfer knowledge. Technology rescues educators with creative techniques encouraging students to inquire, communicate, discover, and apply knowledge in a stimulating and participatory setting. Medical Dosimetry faculty at The University of Texas MD Anderson Cancer Center used numerous critical thinking instructional techniques and innovative technologies to create an active learning platform for allied health students. Teaching critical thinking to students is challenging because many faculty have not been trained on how to model or transmit these skills to their students in an effective and efficient manner. This presentation will share strategies that have been used successfully by faculty at the School of Health Professions at UT MD Anderson Cancer Center to improve students' critical thinking skills.
Title: Interprofessional Simulation Exercise: A Pilot for Providing Collaborative Education for Health Professions and Nursing Students

Authors: Heather C. Ashford, MPAS, PA-C; Jose D. Rojas, PhD, RRT; Valerie Andrews, MSN, RN, CNE, CHSE; Figaro L. Loresto, RN, BSN; Patricia A. Lea, RN, MSEd, CCRN; Tammy Young RN, MSN: University of Texas Medical Branch

Format: Platform Presentation

Abstract:

**Purpose:** The Institute of Medicine (IOM) has generated multiple reports concerning health care quality. One such report, “Health Professions Education a Bridge to Quality”, proposed core competencies that all clinicians should possess, including the ability to work in an interdisciplinary team. In Interprofessional education (IPE), students from two or more professions learn with, from and about each other, while improving collaboration, communication, and quality of care. Therefore, as a means of gauging students' attitudes and perceptions regarding IPE, an interprofessional group of expert faculty from the departments of nursing, physician assistant studies, and respiratory care collaborated to develop an interprofessional simulation. The aim of this exercise was to introduce IPE core competencies of teamwork and communication. The Readiness for Interprofessional Learning Scale Questionnaire (RIPLS), was used to evaluate student perceptions regarding IPE. Our hypothesis was that an improvement in RIPLS scores between pre- and post- simulation would be observed, but that there would be no difference between disciplines.

**Methodology:** The simulation involved 215 total students from nursing, PA studies, and respiratory care, separated into interprofessional teams of six to eight students. Each team engaged in two, two-hour immersive clinical simulation scenarios involving teamwork and collaboration. The first scenario involved a post-operative patient who decompensated, developed cardiac dysrhythmia, and required transfer to the SICU. The second scenario involved a post-operative patient on mechanical ventilation undergoing a spontaneous breathing trial that was “difficult-to-wean”. The students completed the RIPLS twice, once a week before the simulation and again immediately after the simulation. The research project was reviewed and approved by the University IRB.

**Results:** Of the 215 students who participated, 57% provided survey responses. Survey demographics revealed participants were predominantly female with an average age of 26.5 +/- 6.01 years. As hypothesized, mean total scores and teamwork scores rose significantly between pre- and post-simulation, and there was no difference observed between the disciplines.

**Conclusion:** Interprofessional training improved communication and reduced errors. We demonstrated that interprofessional teams of students without prior collaboration and minimal critical care experience can be taught early in their educational endeavors how to effectively work as a team, even in a stressful critical care setting.
Purpose: Student physical therapists in Texas often treat patients who only speak Spanish. Language barriers between patients and student physical therapists can pose challenges for both the patient and the student physical therapist. There were several purposes for this pilot study. This investigation documented how often student physical therapists treat patients who primarily speak Spanish. The impact of students’ Spanish language skills on the students’ learning experience and the quality of care delivered to patients was also documented. Finally, the need for Spanish language skills to be incorporated in the physical therapist curriculum was examined.

Methodology: This study was approved by the Texas State University Institutional Review Board. A survey was administered to 3rd year student physical therapists upon completion of their didactic coursework and clinical rotations. The survey included questions about students’ demographics and frequency of treating primarily Spanish speaking patients on their clinical rotations. In addition, the survey included questions addressing the students’ experiences when treating patients who primarily speak Spanish. Students were also asked if there is a need to include Spanish language skills in the physical therapist curriculum. Descriptive statistical analyses were performed.

Results: Thirty-eight 3rd year physical therapist students who completed all of their clinical rotations participated in this study. There were 13 males and 25 females. The average age was 27.9 y/o (SD: 3.9) and there were 8 minority participants. Fifty percent of participants stated they treated patients who primarily speak Spanish once a week or more often. Fifty percent of participants indicated their Spanish speaking skills diminished the quality of care they delivered to their patients and 16% of participants said their Spanish speaking skills diminished their own learning experience. Ninety-five percent of students surveyed indicated there is a need to incorporate Spanish language skills into the physical therapist curriculum.

Conclusions: This study documented that student physical therapists on their clinical rotations in the State of Texas often treat patients who only speak Spanish. In this pilot study, student physical therapists perceived that their own Spanish language skills diminished the quality of care they delivered to their patients. To a lesser extent, student physical therapists also perceived that their own learning experience was diminished due to their Spanish language skills. Students overwhelmingly indicated there is a need to include basic Spanish language skills in the physical therapist curriculum. Physical therapist educational programs in regions that include large populations of patients who only speak Spanish may consider including basic Spanish language skills in their curricula. Future studies are needed to investigate the effect of including Spanish language skills on student physical therapists' clinical experiences.
Title: Promoting and Assessing the Effectiveness of an Inter-professional Education Initiative

Author: John Ronnau, College of Health Sciences and Human Services, The University of Texas-Pan American, Edinburg, Texas

Format: Platform Presentation

Abstract:

College of Health Sciences and Human Services at the University of Texas-Pan American is engaging in an extensive effort to introduce the tenants of IPEP into its nine health science and human service disciplines. This presentation will present an overview of the model developed, preliminary evaluation results, and lessons learned. This session will be interactive with opportunity for questions, discussion and feedback from the participants. We look forward to sharing lessons-learned from this process.
Title: The Relationships Between a Sleep-disordered Breathing Questionnaire, the Epworth Sleepiness Scale, and Measurements of Respiratory Muscle Strength

Authors: Christopher J. Russian, PhD, RRT-NPS, RPSGRT, RST; S. Gregory Marshall, PhD, RRT; and Joshua Gonzales, MAEd, RRT-NPS, RRT-SDS: Texas State University

Format: Platform Presentation

Abstract:

Poor sleep quality is often reported by individuals with spinal cord injury. When the injury impacts the respiratory muscles, there is a compounding effect on the overall state of health. Currently the only options for objectively assessing sleep require overnight polysomnography thus presenting numerous inconveniences to the patient with spinal cord injury. Screening tools offer a fast and convenient way to assess sleep without the rigors of in-laboratory testing. The Sleep-Disordered Breathing in Neuromuscular Disease Questionnaire (SiNQ-5) is a screening tool for sleep-disordered breathing. The Epworth sleepiness scale is a validated sleep assessment for excessive daytime sleepiness. The American Thoracic Society and the European Respiratory Society consider respiratory muscle testing an important component to assessing muscle function following spinal cord injury or neuromuscular debilitation. Recruited focused on subjects with cervical or thoracic (T7 and above) spinal cord injury and subjects without any spinal cord injury. Subjects with complete or incomplete spinal cord injury were initially targeted for the project. However, recruitment of spinal cord injury subjects and inclusion in research projects has proven difficult in the past. As a result we test subjects without spinal cord as well. American Thoracic Society/European Respiratory Society (ATS/ERS) standards were followed for maximum inspiratory and expiratory testing. The MicroRPM device is a recognized device to provide reliable assessment of respiratory muscle strength. Inspiratory muscle testing involves 10 sniff maneuvers for inspiratory muscle assessment with a 30-second rest period between each maneuver. The highest sniff value is recorded. Expiratory muscle testing involves the use of a mouthpiece connected to the MicroRPM device. Three maneuvers are conducted. The highest value of the two closest maneuvers is recorded as long as both maneuvers are within 20% of each other. Following all respiratory muscle testing subjects completed the SiNQ-5 questionnaire and the ESS. The Spearman Correlation coefficient in SPSS was chosen to analyze the data. The primary goal of this project is to investigate the association between MIP, MEP, SiNQ-5 and ESS values. The grant funds were used to purchase the equipment and consumables necessary for respiratory muscle assessment. The bulk of the grant paid for the MicroRPM device. This piece of equipment and the consumables have been included in additional research projects involving respiratory muscle testing.
Title: Student Success and Recruitment Balancing Act: Potential and Challenges of an Allied Health Vertical Alignment Program at UT Health Science Center San Antonio

Program Abstract

Author: Diane Galvan, BCH, CHES; Catherine Ortega, EdD, PT, ATC, OCS; Donna Gardner, MSSHP, RRT, FAARC; Linda A. Smith, PhD, MLS: University of Texas Health Science Center at San Antonio, School of Health Professions

Format: Platform Presentation

Abstract:

Introduction and Purpose: Vertical Alignment between community colleges and bachelor’s degree or higher level programs is a collaborative endeavor involving various stakeholders. Five institutions now partner with UT Health Science Center SA in the retention and recruitment based on Student Tailored Educational Pathways (S.T.E.P.) This Program is a “creative pathways” for students to learn about Allied Health Professions and enter into these programs. This program emphases includes three major goals: Goal 1 is to increase student and advisor awareness and knowledge about allied health professions and transfer requirements for bachelor or higher degree level allied health programs. Goal 2 is to identify and address vertical alignment issues with educational partners in the area of transfer agreements. Lastly, Goal 3 to increase the number of participants who apply to and successfully complete a bachelor’s or higher degree in an Allied Health Profession.

Objectives: A measurable objective for Goal 1 is to identify and facilitate vertical alignment of the 2-year or associate degree coursework for transfer to the bachelor’s or higher degree program by tracking STEP program participants. An object for Goal 2 is to provide comprehensive retention services for students at partner institutions who have expressed interest in entering an allied health profession. Although a measurable objective for Goal 3 is program completion current data for this project includes, enrollment of STEP program participants.

Methods: Successful Initiatives that have been implemented with partner institutions include, 1) Peer Mentoring Program supported by students enrolled in the SHP programs; 2) Faculty Advisor Information meetings at partner campuses; 3) Curriculum Consortium among partner institutions for revision of articulation agreement based upon the new core requirements; 4) Tracking and advising of students enrolled in the STEP program; 5) Presentations (hands-on experiences) to students about professions of CLS, RC and PT.

Data: Demographic Profile of students in STEP pipeline, African American – 10, Asian – 2, Hispanic – 13, White – 10. Out of 467 students, 464 agree or strongly agree to understand the application procedures.

<table>
<thead>
<tr>
<th>Students advised at 2 or 4 year institutions</th>
<th>100:1,077</th>
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<tbody>
<tr>
<td>Veterans/associated degree workforce advised</td>
<td>25:31</td>
</tr>
<tr>
<td>Students in AH Leaning Community</td>
<td>90:160</td>
</tr>
<tr>
<td>Students in STEP mentor program</td>
<td>80:160</td>
</tr>
<tr>
<td>Students in other AH programs</td>
<td>5:20</td>
</tr>
<tr>
<td>Development of transfer agreements</td>
<td>In process</td>
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Evaluation: This STEP program is a pipeline and initial “STEP” to assist students to transfer to the allied health professions and promote diversity. Initiation of this program lagged behind proposed time-lime. The formation of alliances and conversations regarding vertical alignment has increased efficiency for students. Planned endeavors will enhance sustainability.

| Development of “early acceptance” agreements | In process |
| Number of applicants (30 applicants / 160 participants) | 25% STEP participants; 18.8% |
| Number of applicants accepted to program | 50% of applicants: 23.3% |
Abstract:

Research has long been a daunting term to faculty and students, especially in areas that are traditionally considered technical versus academic; it is the rare student who begs to do research and faculty often complain about time restraints. In the health sciences, the same courses are offered in each department rather than sharing resources, as was in the case of research. Each of the health sciences programs taught their own version of research. But what would happen if a common course were offered that addressed the outcomes desired by all of the programs? Can students work in interdisciplinary groups and meet the established goals? This presentation addresses the advantages and disadvantages of the development, revision, and delivery of an online, interdisciplinary, research course. Barriers and successes will be discussed as well as surprising results.
Title: Use of the PRECEDE-PROCEED Model of Health Promotion Program Planning to Promote Heart Health Education and Blood Pressure Monitoring Among Community Dwelling Elders at a Senior Center in Houston, Texas

Authors: Rupal M Patel, PT, MS; Megan. Ehrhart, DPT; Rosemary Galvan, DPT; Amanda Hedges, DPT; Amanda Medina, DPT; Kristin O’Toole, DPT; Meagen Williams, DPT; Andrew Wooters, DPT; Bianca Zuckerman, DPT: Texas Woman’s University, School of Physical Therapy

Format: Platform Presentation

Abstract:

Purpose: To utilize the PRECEDE-PROCEED Model of Health Promotion Program Planning as a mode of teaching community health in order to design, implement, and evaluate a feasible and sustainable community health intervention focused on the needs of a local senior center.

Procedures: A group of doctor of physical therapy students (n = 8) received faculty mentorship to apply the Model during a health promotion service learning course in the final year of the curriculum for a targeted population of elders at an inner city senior center. Phases 1-4 of the Model guided intervention development, and phases 5-8 guided implementation and evaluation. Phase 1: Community needs assessment was conducted via interviews and surveys with stakeholders to identify current health promotion programs, and quality of life (QOL) concerns. Phase 2: Relevant epidemiological factors were assessed through literature review to determine changeability of important issues identified in Phase 1. Phase 3: Identification and prioritization of predisposing, enabling, and reinforcing factors helped establish measurable program objectives such as: increasing knowledge about cardiac health; promoting independence with BP monitoring; promoting consistent participation and completion of program; and, improving overall awareness of aspects affecting heart health. Phase 4: Administrative and policy issues were evaluated to determine resources available to implement the community intervention.

Major Findings: Phase 5: Creation and implementation of programming targeted the most changeable needs of increasing knowledge/awareness of heart health and providing equipment for BP monitoring. Participants included Senior Center members (n = 26) and Center volunteers (n = 3). Prizes, competitions, and peer support were strong motivating factors that influenced activity selection and participation. Thus, intervention involved a series of activities over several sessions: skit; questionnaires; informational tri-fold with trivia competition; BP monitoring with log; “Heart Health Bingo”; salt demonstration; and trivia questions. Center volunteers were trained by students in monitoring blood pressure for the Senior Center members, thus establishing sustainability of the community health program.

Evaluation: Phase 6: Continuous process evaluation guided modifications to intervention as sessions progressed. Overall, 6/7 program objectives were met. Phase 7: Impact evaluation demonstrated that all stakeholders reported independence with each aspect of programming. Seniors and Volunteers also reported increased knowledge of heart health, improved frequency of BP monitoring, and increased motivation towards heart healthy behavior. Phase 8: Outcome evaluation will occur 12 months post-intervention to assess impact and sustainability of program on QOL issues identified in Phase 1.

Conclusion: The PRECEDE-PROCEED Model provides a systematic approach for developing community health promotion programming. It can be utilized by allied health students to bridge the gap between didactic education and community health promotion practice by using a service learning paradigm to promote heart health education and BP monitoring among community dwelling elders at local senior centers. Additionally, allied health educators can use the Model to mentor students in creating, implementing and evaluating effective health education and health promotion programs with targeted underserved populations in their community.
Title: Utilization of Hearing Voices Simulation to Bridge Theory to Practice with Undergraduate Nursing Students

Authors: Maria I. Diaz, EdD, RN; Betty John, RN, MSN: University of Texas Pan American

Format: Platform Presentation

Abstract:

The importance of empathy and the understanding of clients who experience mental illness is essential in the educational preparation of undergraduate nursing students. Understanding how to care for a client with schizophrenia or one who hears voices as part of their illness is essential for the development of a knowledgeable attitude in caring for clients with mental illness. The aim of the voice simulation exercise (VSE) was to provide nursing students with an experiential learning opportunity to simulate living with the challenge of hearing voices. The purpose was to assess an understanding and insights of nursing students who completed a VSE in “Hearing Voices that are distressing: A Training Experience and Simulation for Students,” (Deegan, 1996). Using a narrative research design and convenient sample of sixty-five students participants were debriefed immediately following their participation in the simulation. Data generated was analyzed to find meanings and insights identified from the respondent’s actual words.

The study affirmed the importance of this VSE as a teaching tool to assist the students to understand the adverse impact imposed by hearing voices on a daily basis by clients who are experiencing a mental disorder. The students verbalized their awareness of how clients are affected by hearing voices. They were able to empathize with feelings of low self-confidence, and lack of mastery of basic skills of daily living. The results was that the study would shape positive attitudes toward mental health and served to reinforce the use of VSE with undergraduate nursing students and other health care providers.
Title: Across the Ages: Investigating Physical Therapists Education, Knowledge and Attitudes Toward Evidenced-based Practice

Authors: Beverly Cumberland Newman, PT, PhD: University of Texas Medical Branch

Format: Poster Presentation

Abstract:
How, when, and where physical therapists learn research/data collection and evidence based practice could influence translating evidenced-based research into practice.

Research Questions:
1. How have physical therapists traditionally acquired knowledge regarding evidenced based practice (EBP)?
2. What are their attitudes and knowledge toward research and EBP?

Twenty-five interviews were conducted asking standardized open-end questions which allowed the participants to relate their real world experience to EBP. The interviews were asked of three licensed groups, BSPT, MSPT and DPT. The research design was based on a realist theoretical framework which allowed the participants to relate their real world experience to EBP. Results indicated a high level of support and commitment to research and EBP. Participants agreed that the profession of physical therapy will benefit from increased participation in research, and an increased use of evidence-based research in practice. Most participants felt knowledgeable about research and data collection in general, but they also indicated weaknesses in conducting research, and critically evaluating the research articles. The participants also agreed that practicing based on evidence was important for the physical therapy profession, but identified a need for more research supporting physical therapy. Barriers to research and practicing based on evidence were identified by all participants. Four main barriers were identified; time, administrative, patients, and external influences. The study revealed a strong commitment by the participants to research and EBP, but the identified barriers prevented most participants from participating in research and practicing based on evidence at the level they said they felt was necessary.
Title: Effectiveness of Verbal and Written Education on Patient Recall of Information Regarding Surgical Site Infection

Authors: Melissa Stendahl, PT, DPT; Erin Locati, PT, DPT; Teresa Bachman, PT, DPT, CEEAA; Denise Gobert, PT, PhD, NCS; Karen Gibbs, PT, PhD, DPT, CWS: Texas State University

Format: Poster Presentation

Abstract:

The most effective methods for educating patients regarding recognition of signs and symptoms of surgical site infection (SSI) are poorly documented in current literature. SSIs occur in approximately one million Americans annually and constitute 31% of nosocomial infections. The purpose of this student project was to assess the most effective way to educate post-operative patients on signs and symptoms of surgical site infection and the actions patients should take if infection is suspected. It was hypothesized that receiving both verbal and written education would be more effective than receiving only one type of education or none at all. Data was collected from 18 subjects surveyed in acute care and outpatient settings during physical therapy evaluation and treatment sessions. Variables of interest were method of education received pre and post-operative (none, written, verbal, or both), recall of signs and symptoms of infection, and action to take if SSI was suspected. Scores were assigned corresponding to which signs and symptoms they could recall and actions to take if SSI was suspected. Non-parametric statistical analysis was used with significance set at p level 0.01. Mann-Whitney U tests analyzed effect of gender on SSI education received, history of SSI, and outcome variables. Kurskal-Wallace ANOVA determined the effect of SSI education method on outcome variables. Bonferroni post-hoc analysis was used to compare groups at alpha level 0.05. Results demonstrated the combination of verbal and written education as most effective for patient recall of signs and symptoms of SSI as well as actions taken if SSI was suspected. Neither gender nor history of SSI had a significant effect. Method of SSI education received (none, written, verbal, or both) was found to have a significant effect on both the number of signs/symptoms of SSI a subject recalled and on ability to recall appropriate action taken if SSI was suspected. Method of education has a significant effect on a patient's ability to recall important information. Results indicated that utilizing both verbal and written education is more effective for a patient to be able to recall signs and symptoms of infection than using verbal or written education alone. This suggests that when educating patients regarding SSI both verbal and written education should be utilized for effectiveness. Proper education for post-surgical care is vital in working to minimize hospital readmission, delayed rehab time, patient morbidity and mortality, and higher healthcare costs associated with SSI. Clinicians engaging in patient education regarding SSI should use both verbal and written education to maximize effectiveness.
Title: The Effect of Senior Meal Assistance Programs on Malnutrition Risk in Free Living Elders in Texas

Authors: Lisa Mook, Graduate Student; Michelle Akin, Graduate Student; Melody Chang, Graduate Student; Valencia Browning Keen, PhD, RD, LD: Sam Houston State University

Format: Poster Presentation

Abstract:

Purpose: This study will empower other researchers in the field of gerontology to investigate the ongoing potential risk of malnutrition in the elder participants served by congregate and homebound meal programs.

Objectives: The aim of this research is to study the effect of the senior meal assistance program on malnutrition risk in elderly populations of free living elders in Texas.

Methodology: Upon IRB approval, surveys to the congregate and homebound participants of the Senior Center of Walker County were administered by the researchers. Participants signed an informed consent form before beginning the survey. The survey administered both to congregate participants as well as over the phone with verbal consent to homebound participants was an abbreviated form of the Nestle’ Mini-Nutrition Assessment short form or (Nestle’ MNA-SF). A short demographic survey was also voluntarily completed with this study. The scores of each MNA-SF survey were calculated at a later date and separate location. The scores and demographic information were analyzed using SPSS software.

Major Findings: The researchers collected 54 responses total: 5 malnourished, 23 at risk, 25 normal nutritional status and few choosing to not respond. Survey participants ranged in age from 63 to 102, and were 74% female. Twenty-six percent answered yes to chewing and or swallowing difficulties. The homebound group was at higher risk with 50% at risk for malnutrition versus 30% at risk for malnutrition of the congregate participants. Homebound participants also showed a higher rate of malnutrition at 11.8% currently malnourished versus 5% of congregate participants.

Conclusions: Based on previous health indicators researched of elders living in the community of Walker County Texas, 6% are malnourished and 32% are at risk of malnutrition. In our study, congregate meals seem to decrease the risk of malnutrition with 5% malnourished and 30% at risk of malnutrition. Homebound participants revealed higher than average levels of malnutrition and at risk for malnutrition than the previous research studies for community living elders. Research has shown an increase in malnutrition risk in the elderly with a decrease in quality of life particularly when eating in isolation. Our study confirms this research. Transportation recommendations in collaboration with various Walker County services were explored so that elders do not continue to be isolated in remote areas and that more socialization at the Senior Center may enhance intake unless debilitating chronic disease conditions do not permit travel. In this case, recommendations for shelf stable nutrient dense snacks between meals that require limited preparations should be provided or recommended to family, friends or care-givers of home bound participants. Recommendations for these items were also provided to the Senior Center of Walker County. Reducing malnutrition and risk of malnutrition can reduce hospital and long term care admissions and keep elders in their homes longer.
Title: Examination of the Differences in Health-related Physical Fitness Among Community Dwelling People with Visual Impairments as Compared to Age and Gender Matched Norms

Authors: Krysten Chovanec¹, DPT; Vanessa Martinez¹, DPT; Kristin O'Toole¹, DPT; Rupal Patel¹, PT, MS; Abhinit Bhatt², PT, DPT; Kate Hughes², PT, DPT, MS, OCS; Andrew Johnson³, PT, DPT. ¹Texas Woman's University, ²Harris Health System, ³Memorial Hermann Sports Medicine – Memorial City

Format: Poster Presentation

Abstract:

Introduction: One in 28 Americans over the age of 40 are affected by blindness or low vision. Individuals with visual impairment (VI) exhibit limited physical activity and higher prevalence of obesity. Five components of Health Related Physical Fitness (HRPF) strongly related with good health, disease prevention, and health promotion have been identified by the American College of Sports Medicine. However, published research quantifying HRPF of people with VI is limited. Due to this paucity of evidence, teaching allied health students about measuring HRPF in people with chronic conditions such as VI is a challenge. Thus, innovative approaches that bridge education with practice are needed.

Aim: to engage doctor of physical therapy students in community health practice by using the critical inquiry series of courses as a bridge to learn about an underrepresented and understudied population. Procedures: Under a faculty mentor, students initially conducted a literature review to identify (1) protocols of HRPF for use in a community setting, and (2) modifications to protocols for people with VI. A relationship was established with Houston Adaptive Recreation Center (HARC), Visual Impaired Advocates (VIA) group, and local physical therapists in order to conduct this community based study. After IRB approval, data collection took place at the HARC with consenting VIA group members and their affiliates. Results were disseminated among peers and clinicians during the annual research conference for the School of Physical Therapy. Methods of the actual study are as follows: Purpose to determine feasibility of using standard measures to test HRPF for adults with VI in a community setting; to compare HRPF scores of people with VI to age- and gender- matched norms. Study Design: descriptive study, cross sectional design. Sample: convenience sample of 13 females and 11 males (mean age=50.3 years) with visual acuity of <20/160. Measures of HRPF: Balance: Functional Reach Test or Modified Functional Reach, and Timed Up and Go Test. Muscular Fitness: Half Curl-Ups Test, Grip Strength Test, and 30 Seconds Chair Stand Test. Flexibility: Sit and Reach Test or Chair Sit and Reach, and Upper Extremity Back Scratch Test. Cardiorespiratory Fitness: Modified Bruce Treadmill Protocol, Astrand-Rhyming Protocol or Upper Extremity Cycle Ergometer Protocol. Body Composition: not assessed. Data Analysis: descriptive statistics using SPSS version19.0.

Major Findings: 23/24 completed most of modified test battery with verbal and/or tactile cueing, and close guarding demonstrating feasibility of using these measures to test HRPF for people with VI. Measures of Cardiorespiratory Fitness selected were not feasible in a community setting. Participant HRPF scores were: at or below average for balance, below average for flexibility and muscular fitness, when compared to age- and gender- matched norms.

Conclusion: Individuals with VI may be more deconditioned. Allied health professionals must first establish baseline fitness levels using appropriate HRPF measures, then, develop tailored exercise prescriptions, and evaluate progress.

Evaluation: Students were able to bridge the gap between education and community health practice using this mode of instruction/learning.
Title: How Do I Teach THAT Online? Techniques for Blending Online and Face-to-Face Learning to Maximize Student Development

Authors: Jennifer J. Didier; A. Page Glave: Sam Houston State University

Format: Poster Presentation

Abstract:

Purpose: Online learning strategies are gaining popularity in higher education as they allow for a larger geographical region of students to be reached and work well for those who work while attending school. Many of the courses in allied health require an in-person component, yet there is a desire to provide students with the flexibility and access provided by online learning. This has led to discussion about what classes can and cannot be taught online. This presentation will provide information about the usage of laboratory weekends, video and online training modules, with online learning to provide students the flexibility and hands-on experience necessary to become successful professionals.

Objectives:
1. Identify barriers to teaching allied health courses in the online environment.
2. Identify strategies to blend online and face-to-face components to maximize student development.
3. Discuss how the Sam Houston State University MA-Kinesiology, Sport and Human Performance track has implemented these strategies to better serve our students.

Methods: Courses are delivered online with most courses also including a lab day of 5-8 hours. Multiple methods of online delivery are utilized to best deliver the content. Use of video, live and recorded, along with training modules, students are able to become familiar with equipment before attending the ‘lab day.’ Assignments also include videos uploaded by students where they demonstrate their practice of the skills needed in the course curriculum. These videos also provide opportunities to refine skills and are a great opportunity for peer feedback.

Conclusions: Teaching allied health courses online requires some creativity in content delivery and may be best when a face-to-face element is also required. It is suggested that lab days are scheduled toward the end of the semester with multiple hands-on activities planned. This also allows enough time for the students to prepare for how to use the equipment, what it is used for, and learn the proper steps they will take on lab days. Extensive use of video throughout the semester for both demonstration of procedures/equipment and student demonstration of basic skills is recommended to help maximize the benefits of the lab experience. Students should also have access to the lab facility as desired throughout the semester to become familiar with the equipment, either in person, or through video as other students or faculty use the equipment.
Title: Interprofessional Pediatric Advocacy Program (IPAP)

Authors: Natalie Bachynsky; Mary O'Keefe; Christine Baker; Patricia Fingerhut; Dana Wild; Caroline Jansen: University of Texas Medical Branch, School of Nursing, and School of Health Professions

Format: Poster Presentation

Abstract:

Health professions educators, including nursing, occupational and physical therapy, have found approaches such as service-learning to be effective in student development of critical thinking skills (Atler & Gavin, 2010; Bazyk, Glorioso, Gordon, Haines, & Percaciante, 2010).

Purpose: The Interprofessional Pediatric Advocacy Program (IPAP) is an interdisciplinary service-learning project designed to deliver quality health care to medically fragile children (MFC) under the jurisdiction of Child Protective Services (CPS).

Methods: Novel training modules were created to train the students as CPS volunteers; these include content in CPS rules and procedures; assessment standards for nursing, occupational and physical therapy; team-building concepts, steps and practices; and legal and ethical considerations. A background check is conducted on each student volunteer, with his/her approval. Inter-professional teams of nursing, occupational therapy, and physical therapy students are assigned a family with a MFC. The students conduct an inter-professional evaluation in the family’s home, accompanied by a faculty member. The team develops a family-centered plan to provide learning opportunities and management strategies for the family and child. This plan is implemented in 2-5 subsequent visits. The students then provide a comprehensive evaluation report to the CPS social worker.

Major findings: Over the past six semesters, 260 students have collaborated to assess and educate 81 families with MFC. Self-assessment scores from participating students reveal improvements in their understanding of other’s professional roles and responsibilities. Students also verbalize an increased awareness of families’ challenges when there is a child with a disability in the home. Conclusions: IPAP has provided a valuable inter-professional learning opportunity for students as well as cost-effective services to families with MFC, an area where service providers and resources are limited. Since beginning on one university campus with three professions, the IPAP program has grown to include students from 6 professions (nursing, occupational therapy, physical therapy, physician assistant studies, nutrition/dietetics, and pharmacy) at 7 universities/colleges (Chamberlain University, Lone Star College, Prairie View A&M--Houston, Sam Houston State University, Texas Southern University, University of Houston--Victoria in Sugar Land, and UTMB).

Funding Source: The Health Resources and Services Administration (HRSA # UD7HP25066) from September 2012-June 2015.
Purpose: Poor oral health can make food consumption difficult. Avoidance of problematic foods is a common self-management strategy in response to oral health issues, resulting in inadequate intake and potential malnutrition, weight loss and poor nutritional status. Elders with dementia present additional concerns. Elders may be unable to perform adequate oral hygiene practices or communicate needs to caregivers.

Objectives and Methodology: After receiving IRB approval, memory care nursing personnel of two assisted living facilities participated in a two-part survey. Participants documented oral care procedures and diet modifications offered at facilities (part 1) and the oral health and eating behaviors of at least 15 individual residents at each facility (part 2) were assessed.

Major Findings: A total of 38 residents were included in the study, presenting issues of dry mouth or dry throat (32%), trouble swallowing (13%), chewing (26%), and performing eating with ease. Variables of “Who provides oral Care?” and “Food Modifications” were associated (Chi-square: V=18.6611 Sig. (2-sided) =0.005). All residents with food modifications and those documented as uncooperative received daily oral care from nursing personnel.

Conclusions: A multi-directional relationship exists among diet modifications, chewing and swallowing difficulties, weight status, and ability to provide oral care. However, the cause and effect relationship has not been established in all residents. Assisting with daily oral care and providing appropriate food modifications in response to individual needs prevents long term chronic disease management and is more cost effective and can lead to improved nutritional status and improved medical nutrition therapy. Caregivers must be attentive to eating behaviors and monitor changes in the oral health status of dementia residents. Best Practices protocols developed for and by Registered Dietitians are necessary for continuity of care and will be recommended for consideration of the health care team for improved oral health intervention.
Title: Physician Assistant Boot Camp

Authors: Jennifer Dazey-Caudill, PA-S; Julia Hubbard, PA-S; Stephen Nobel, PA-S; Emma Tran, PA-S; Barbara Quillin, MPAS, PA-C; David L. Henzi, EdD: University of Texas Health Science Center at San Antonio, School of Health Professions

Format: Poster Presentation

Abstract:

Summary of the Purpose: The Physician Assistant Studies program within the School of Health Professions at The University of Texas Health Science Center at San Antonio has a tradition of accepting students with a wide variety of experiences and educational backgrounds into the program. Knowing the demographic of the incoming Physician Assistant Studies class and the educational experiences of these students, a “Boot Camp” was developed by four current PA students to better prepare the incoming students for the rigors of the curriculum. The poster presentation will provide a general overview of the “Boot Camp” curriculum, student performance on exams, as well as comments from students who participated in the program.

Objectives: By developing a voluntary “Boot Camp,” incoming PA students will have an opportunity to learn a wide variety of skills to better prepare them for the first round of examinations which will place them in a better position academically as well as increasing levels of confidence.

Methodology/Procedures: Thirty-eight of the forty-five incoming PA students voluntarily registered for the first ever PA “Boot Camp.” The thirty-eight students participated in three days of, not only academic preparation, but a wide variety of social activities. The students’ first exam grades were compared to those who did not register for the “Boot Camp” as well as the class that began the PA program last year.

Conclusions: On the first examination, students who participated in the “Boot Camp” not only performed better than those seven students who did not register for the course – findings showed that the group who participated in the “Boot Camp” performed better than the students who completed the same exam last year (Class of 2016 vs. Class of 2015). Students enrolled in the Boot Camp stated they were more comfortable with the campus, other students as well as the faculty and staff in the program.
Title: Student Success and Recruitment Balancing Act: Potential and Challenges of an Allied Health Vertical Alignment Program at UT Health Science Center San Antonio

Program Abstract

Abstract:

**Introduction and Purpose:** Vertical Alignment between community colleges and bachelor’s degree or higher level programs is a collaborative endeavor involving various stakeholders. Five institutions now partner with UT Health Science Center SA in the retention and recruitment based on Student Tailored Educational Pathways (S.T.E.P.) This Program is a “creative pathways” for students to learn about Allied Health Professions and enter into these programs. This program emphases includes three major goals Goal 1 is to increase student and advisor awareness and knowledge about allied health professions and transfer requirements for bachelor or higher degree level allied health programs. Goal 2 is to identify and address vertical alignment issues with educational partners in the area of transfer agreements. Lastly, Goal 3 to increase the number of participants who apply to and successfully complete a bachelor’s or higher degree in an Allied Health Profession.

**Objectives:** A measurable objective for Goal 1 is to identify and facilitate vertical alignment of the 2-year or associate degree coursework for transfer to the bachelor’s or higher degree program by tracking STEP program participants. An object for Goal 2 is to provide comprehensive retention services for students at partner institutions who have expressed interest in entering an allied health profession. Although a measurable objective for Goal 3 is program completion current data for this project includes, enrollment of STEP program participants.

**Methods:** Successful Initiatives that have been implemented with partner institutions include, 1) Peer Mentoring Program supported by students enrolled in the SHP programs; 2) Faculty Advisor Information meetings at partner campuses; 3) Curriculum Consortium among partner institutions for revision of articulation agreement based upon the new core requirements; 4) Tracking and advising of students enrolled in the STEP program; 5) Presentations (hands-on experiences) to students about professions of OLS, RC and PT.

**Data:** Demographic Profile of students in STEP pipeline, African American – 10, Asian – 2, Hispanic – 13, White – 10. Out of 467 students, 464 agree or strongly agree to understand the application procedures.
Evaluation: This STEP program is a pipeline and initial "STEP" to assist students to transfer to the allied health professions and promote diversity. Initiation of this program lagged behind proposed time-lime. The formation of alliances and conversations regarding vertical alignment has increased efficiency for students. Planned endeavors will enhance sustainability.

<table>
<thead>
<tr>
<th>Development of &quot;early acceptance&quot; agreements</th>
<th>In process</th>
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</thead>
<tbody>
<tr>
<td>Number of applicants (30 applicants / 160 participants)</td>
<td>25% STEP participants; 18.8%</td>
</tr>
<tr>
<td>Number of applicants accepted to program</td>
<td>50% of applicants: 23.3%</td>
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</table>
Title: Unique Role of Nutrition and Interior Design Professionals in Achieving Meal Time Satisfaction in Dementia Residents

Authors: Valencia B. Keen, PhD, RD, LD; Kristin Kabay, MS, RD; Leslie Boyd; Allison, Beck, MS, RD; Laura Burleson, PhD: Sam Houston State University

Format: Poster Presentation

Abstract:

Purpose: The purpose of this study was to assess current practices used by facilities caring for dementia patients to determine their understanding of the benefits of appropriate core elements of foodservice style, foodservice environment and nutrition assessment to the meal satisfaction in the dementia patient. It was hypothesized that food selections made by personnel for dementia patients or residents were made to enhance appetite and nutrient dense foods to reduce unintentional weight loss.

Objectives: The objectives were to survey administrators’ knowledge of providing adequate menu and design of dining services that were appropriate for achieving meal time satisfaction in dementia patients and or residents upon IRB approval.

Methodology: Thirty-one facilities completed the survey, including elder residential communities, elder daycare support communities, an inpatient acute care hospital, an acute care/rehab unit and Meals on Wheels Senior Centers.

Major Findings: Fifty-Five percent of participants allow their dementia patients/residents an hour or longer to consume meals. Seventy-one percent of facilities use plated meal service and only 2 facilities use family meal service. Supplementation between meals (45%) and supplementation with meals (35.2%) were the most prevalent methods to manage unintentional weight loss of the dementia residents. Forty-one percent of facilities play background music during periods of eating. The chefs at the facilities add foods high in specific nutrients research shows to help resolve symptoms of dementia. Only 45.2% of the facilities report routinely performing subjective global assessment (SGA) on their dementia patients/residents. Limited knowledge was identified regarding design of areas where meals were to be consumed.

Conclusions: Policies and or activities that can be used to enhance food intake and mealtime satisfaction in dementia patients/residents are needed. It is apparent that many facilities need to be educated on the appropriate care to enhance mealtime satisfaction and ensure that dementia patients are receiving proper nutritional care. Recommendations were provided at the facilities. Dementia residents of facilities would benefit in both standardized menu design and design of areas where meals are consumed. The survey instrument could be improved to define various concepts and design principles of dining facilities prior to be used again.