



Survival Tips for a Clinical Rotation in Hand and Upper Extremity Rehabilitation

This document was developed for occupational and physical therapy students who are interested in completing a clinical rotation in hand and upper extremity rehabilitation. Included are resources and tips to keep in mind as you begin your clinical rotation and to ensure a successful experience.

Below are a few common questions students ask prior to their clinical rotation:

- How will I learn the hand and upper extremity complex anatomy?
- Do others feel as intimidated as I do entering this specialty?
- Can I apply the clinical skills I will learn?
- Will I be good at orthotic fabrication and fitting?
- What if I do not know the answers to the questions my clinical educator might ask?
- Should I be an expert in goniometry and manual muscle testing?
- If I speak up about feeling overwhelmed, will this affect my final evaluation?

Things to consider BEFORE your clinical rotation:

1. Utilize ASHT resources. The following links are excellent resources available to help prepare for fieldwork.
 - a. Student Center:
<https://asht.org/education/student-center>
 - b. Student Self-Assessment:
<https://education.asht.org/education/virtual/student-self-assessment>
 - c. Upper Extremity Institute:
<https://education.asht.org/education/virtual/ue-institute-online-study-group>
 - d. Webinar Anatomy Packages A & B: (under Anatomy Review section)
<https://education.asht.org/>

2. Be prepared to complete an interview.
 - a. Clinics that offer a placement in the specialty of hand and upper extremity rehabilitation may often require an interview prior to officially accepting a student. Here are sample questions you may encounter:
 - i. What interested you in hand and upper extremity rehabilitation?
 - ii. Where do you see yourself in 5 years?
3. Remember, it is OKAY not to know everything! In fact, this is expected.
 - a. Part of the learning process is using a variety of resources to independently search for answers to your questions. Some common examples are listed below. Check out your school library for book or electronic access to these titles.
 - i. Rehabilitation of the Hand and Upper Extremity
 - ii. Hand and Upper Extremity: A Practical Guide
 - iii. The Journal of Hand Therapy
 - iv. Cooper's Fundamentals of Hand Therapy
4. Study upper extremity anatomy.
 - a. The more familiar you are with anatomy before starting this clinical rotation, the more comfortable you will be in this practice setting.
 - i. Examples of topics to review include: bones, bony prominences, muscles (origins, insertions, & functions), neuroanatomy (brachial plexus), extensor compartments, and the flexor tendon and pulley system.
5. Be familiar with wound healing and wound care.
 - a. Many clinicians treat wounds. Review basic principles of wound healing, wound care, and universal precautions.
 - b. <https://www.osha.gov/SLTC/etools/hospital/hazards/univprec/univ.html>
6. Remember cultural competence.
 - a. You will see patients from all different backgrounds, race, religion, age, and gender, all of which deserve the same equity of care. For more information, including access to self-assessments, use the following link:
 - b. <https://nccc.georgetown.edu/index.php>
7. Reach out to the facility if you have any questions prior to your first day.
 - a. Many clinics will send a welcome email with detailed site specific info to help guide your preparation in the weeks leading up to the start date. Important information to know prior to your first day is clinic hours, where to park, and required documentation needed prior to starting.

Things to enhance clinical learning DURING the experience:

1. Take a tour of the clinic. Not only is it important to see the space you will be working in, but make sure to browse through cabinets to know where to find evaluation tools and equipment to use for treatments. Be creative and think outside the box!
 - a. As you observe what is available, visualize how you can utilize each tool to improve function, increase range of motion and improve strength.
 - b. You may even think of modifying a tool or activity which can give your clinical educator a new idea.
2. Keep a positive attitude and always let your professional behaviors shine. Be punctual, be respectful of the staff, and be a team player. Offer to help clean surfaces or assist with processes during your rotation.
3. Showing compassion, empathy, and using professional conversational skills will make patients more comfortable working with a student.
 - a. Remember to establish rapport and empower your patients. This is just as important as the treatment itself.
 - b. Gain the patient's trust by being client centered. Ask them THEIR goals and priorities.
 - c. Be an active listener remember details such as employment, personal interests, social system, and life experiences.
 - d. Make your patients laugh!
4. Keep a binder to organize your materials.
 - a. Throughout your clinical rotation, you might have paperwork for classwork or want to keep helpful resources close by. Below are examples of what to include in the binder:
 - i. Relevant coursework from your didactic classes for easy reference
 - ii. Normative values for standardized assessments (goniometry, dynamometer, Semmes Weinstein, etc.)
 - iii. Basic vocabulary including terms used for wound care, orthoses, sites of injury
 - iv. A running list of treatments you administer – a “treatment library”

5. Practice, practice, practice!
 - a. Ask to use scraps of thermoplastic material to practice cutting various shapes and rounding edges. As you become more comfortable, practice fabricating orthoses on colleagues in the clinic. Reuse the material as much as possible to make different types of orthoses.
 - b. Practice goniometry, manual muscle testing, and other standardized tests on family members, friends, and colleagues.
 - c. Tell your support system what you are learning – this will help with retention of the material.

6. Perform patient chart reviews and keep notes of each patient on your own copy of the daily patient schedule.
 - a. Remember to comply with HIPAA regulations when making notes. Appropriate disposal of this information prior to leaving the clinic is expected.

7. Create an orthosis “book”.
 - a. Keep a list of the common orthoses you or your clinical instructor fabricate, along with the appropriate billing codes (L-codes).
 - b. Include patterns of the orthoses with important landmarks, the purpose of the orthosis, and the typical wearing schedule.

Things to communicate with your clinical instructor:

1. Show your passion!
 - a. Clinical educators will help guide you clinically, however your willingness to learn and your genuine interest in hand and upper extremity rehabilitation will elevate your experience. Some ways to show your passion can include:
 - i. Come to the clinic ready with a pen and paper to take notes.
 - ii. Ask questions at the appropriate time and in an appropriate way
 1. Check with your clinical educator regarding the best time to ask questions.
 2. A question phrased “Can you explain your clinical reasoning for this?” is preferred over the statement, “I thought my professor said we should do it this way instead.”
 - b. Let your instructor know of any special interests you may have.
 - i. Special interests related to upper extremity rehabilitation may be pediatrics, lymphedema, sports, wounds, burns, or persistent pain. You may have an opportunity to spend a day with other specialists if you explore these options early in your experience.

2. Ask your clinical instructor for a list of common diagnoses seen in the clinic.
 - a. Familiarize yourself with these diagnoses and inquire about treatment progressions.
 - b. Seek out resources for diagnoses that you are less familiar with.
3. Communicate effectively.
 - a. Discuss your learning style and ask your clinical educator to meet with you weekly in order to provide feedback.

Things to work on at home:

1. Independent study is a must!
 - a. Be prepared to put extra time and effort into reading and researching when you are not in the clinic.
2. Review any notes you took during the day and look up any diagnoses or treatments you are less familiar with.
3. Stay curious and eager to learn, and know that you have a bright future ahead!

Personal accounts from therapists as to why they enjoy working with students:

- "I enjoy taking students because it keeps me on my A-game. My patients enjoy the extra bit of education they get during the session. They hear my thought processes and gain even more trust in the process."
- "Agreeing to be a clinical instructor is a way for me to give back, helping to mold the future of our profession. Students challenge me as much as we challenge them, keeping my clinical knowledge sharp. Another benefit is bringing new eyes into the clinic that can spark a new perspective."
- "Shaping the next generation of hand therapists is invigorating."