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Document 1

Lattanzi, Jill Black; Pechak, Celia

A conceptual framework for international service-learning course planning: promoting a foundation for ethical practice in the physical therapy and occupational therapy professions.


Abstract: As physical therapy (PT) and occupational therapy (OT) educational programs endeavor to foster core values of social responsibility, justice, and altruism in an increasingly global community, the incorporation of local and international service-learning (ISL) into the curriculum is growing. Much of the research has focused on the measurement of student learning, with little written about the impact on the host community. Proponents of global health initiatives are calling for consideration of all stakeholders to ensure ethical practice. This paper explores the current literature related to PT and OT ISL and builds a conceptual framework for ISL course planning. The essential phases in the framework include: 1) pre-experience planning/preparation stage, 2) field immersion experience stage, and 3) postexperience stage. The essential elements are: 1) cultural competency training, 2) communication and coordination with community, 3) comprehensive assessment, and 4) strategic planning. The authors suggest this framework as a practical tool to structure ISL courses with an explicit emphasis on ethical concerns. Additionally, they seek to foster more dialogue and action related to the promotion of ethical practices in ISL in PT and OT education programs.

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Document 2

Benefits awarded employee who resigned for 'unsafe worksite'. Case on point: Shelton v. Board of Review, A-4534-0831 (10/14/2010)-NJ.

Nursing law's Regan report 2010 Dec; 51(7): 4

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Document 3

Swisher, Laura Lee


Physiotherapy research international : the journal for researchers and clinicians in physical therapy 2010 Jun; 15(2): 69-79

Abstract: Although there is extensive literature in other health care fields about the ability to make ethical judgements (moral reasoning), there is a paucity of research addressing the moral reasoning of practising physical therapists. The purposes of this research were to 1) identify the types of moral reasoning used by practising physical therapists as measured by the Defining Issues Test; 2) identify differences in moral reasoning among physical therapists based on educational background, demographic variables, clinical experience, practice setting or expertise in ethics; and 3) compare the moral reasoning of physical therapists with that of other professional groups.

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Beyond a code of ethics: phenomenological ethics for everyday practice.

Physical therapy, like all health-care professions, governs itself through a code of ethics that defines its obligations of professional behaviours. The code of ethics provides professions with a consistent and common moral language and principled guidelines for ethical actions. Yet, and as argued in this paper, professional codes of ethics have limits applied to ethical decision-making in the presence of ethical dilemmas. Part of the limitations of the codes of ethics is that there is no particular hierarchy of principles that govern in all situations. Instead, the exigencies of clinical practice, the particularities of individual patient's illness experiences and the transformative nature of chronic illnesses and disabilities often obscure the ethical concerns and issues embedded in concrete situations. Consistent with models of expert practice, and with contemporary models of patient-centred care, we advocate and describe in this paper a type of interpretative and narrative approach to moral practice and ethical decision-making based on phenomenology. The tools of phenomenology that are well defined in research are applied and examined in a case that illustrates their use in uncovering the values and ethical concerns of a patient. Based on the deconstruction of this case on a phenomenologist approach, we illustrate how such approaches for ethical understanding can help assist clinicians and educators in applying principles within the context and needs of each patient.

Does ethical practice in physiotherapy matter?

Evidence based practice is increasingly mandated by all stakeholders as an integral process of ensuring safe and quality health care. It is recognised that evidence based practice can contribute to minimising misuse, overuse and underuse of health care. Operationalising evidence based practice requires physiotherapists to access relevant evidence, appraise the evidence for its methodological quality, extract information relevant to their practice, and implement it as part of health care service delivery. The final step in this process is to evaluate evidence implementation and reflect what, if any, changes to health care processes and outcomes was achieved. From a theoretical perspective, these steps seem logical and readily achievable. However, practical application in clinical practice settings has encountered numerous barriers. One such barrier, which is commonly encountered and is a contentious area, is the issue of ethics in evidence implementation. Using two hypothetical case studies, we aim to highlight common frustrations encountered by physiotherapists when implementing evidence into practice, ethical ambiguity underpinning evidence implementation and discuss implications in terms of clinical practice and research.
Using live tissue laboratories to promote clinical reasoning in doctor of physical therapy students.
Advances in physiology education 2010 Jun; 34(2): 54-8

Abstract: Recently, the use of animal laboratories has decreased in medical and basic science programs due to lack of trained faculty members, student concerns about animal welfare, and the increased availability of inexpensive alternatives such as computer simulations and videos. Animal laboratories, however, have several advantages over alternative forms of instruction, including an increased sense of learner responsibility, long-term psychomotor competency, and improved ability to examine functional relationships. While the use of animal laboratories has been studied in medical programs, it has not been examined in physical therapy or other allied health programs. The purposes of this study were to examine the attitudes of student physical therapists toward clinically relevant animal laboratories and to determine if student physical therapists felt that the laboratory modules prepared them for future course work and clinical internships. Written surveys completed by the study participants indicated that most students enjoyed the labs and believed that they helped prepare them for course examinations. Additionally, the majority of students believed that the laboratory modules helped them prepare for future course work and clinical internships.

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* Document 8
Idziak, Janine M.
ETHICAL DILEMMAS IN ALLIED HEALTH
Call number: R724 .I525 2010

Document 9
Graham, O; Ankrett, S; Killick, S R
Viewing ultrasound scan images prior to termination of pregnancy: choice for women or conflict for ultrasonographers?
Abstract: Establishing pregnancy location is key to minimising the risks of abortion, and establishing gestational age optimises women's choice of procedure and timing. There is limited information in UK practice about the views of women having an ultrasound before an abortion with regards to whether they would wish to see the scan image of their fetus. We therefore surveyed the views of women having pre-abortion ultrasound scans and the views of ultrasonographers, using self-completed anonymous questionnaires. Responses were available for analysis from 191 women aged 16 to over 45. A total of 25 (13%) women had seen their scan. Of those who did not see their scan, 40 (24%) said they would have liked to see it, to aid their decision-making, as a right, or out of curiosity. Nine out of 17 ultrasonographers completed their questionnaires. Four ultrasonographers thought that women having scans before an abortion should see their scan images if they wished and another four thought they should not because of possible psychological effects. Their response also highlighted possible effects of such scans on those performing them. Given the choice, a larger number of women would like to see their scan images than actually ask. Women request to see their pre-abortion ultrasound images for their own individual reasons, which should be respected. Ultrasonographers may have conflict or ethical dilemmas when performing pre-abortion scans and they should be supported in identifying women for whom looking at their scan images would be of benefit.

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Document 10
When is therapy therapy? [editorial]
Lancet 2009 April 18; 373(9672): 1312

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http://www.thelancet.com/journals/lancet/issue/current (link may be outdated)
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Aiken, Tonia Dandry
LEGAL AND ETHICAL ISSUES IN HEALTH OCCUPATIONS
Call number: KF3821.L42 2008

Document 12
Sine, David M.; Northcutt, Norvell
A qualitative analysis of the central values of professional paramedics.
American Journal of Disaster Medicine 2008 November-December; 3(6): 335-343
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Weiss, Gregory L. and Lonnquist, Lynne E.
THE SOCIOLOGY OF HEALTH, HEALING, AND ILLNESS
Call number: RA418.3.U6 W45 2006

Document 14
Dieruf, Kathy
Ethical decision-making by students in physical and occupational therapy
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Homenko, Donna F.
Overview of Ethical Issues Perceived by Allied Health Professionals in the Workplace
Journal of Allied Health 1997 Summer; 26(3): 97-103
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Veatch, Robert M. and Flack, Harley E.
CASE STUDIES IN ALLIED HEALTH ETHICS
Call number: R724.V398 1997

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McElhinney, Thomas K.
Placing the Humanities Perspective in the Health Professional Curriculum
JOURNAL OF ALLIED HEALTH 12(3): 221-240, August 1983
*  Document 18
Purtilo, Ruth B.
**Ethics in Allied Health Education: State of the Art**
JOURNAL OF ALLIED HEALTH 12(3): 210-220, August 1983
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Levine, Ruth Ellen
**A Historical Perspective on Professional Values**
JOURNAL OF ALLIED HEALTH 12(3): 183-191, August 1983
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*  Document 20
Reiser, Stanley J.
**Technology, Specialization, and the Allied Health Professions**
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Document 21
Annas, George J.; Glantz, Leonard H.; and Katz, Barbara F.
**THE RIGHTS OF DOCTORS, NURSES AND ALLIED HEALTH PROFESSIONALS: A HEALTH LAW PRIMER**
Call number: **KF2905 .Z9 A56**

Document 22
Hamburg, Joseph, ed.
**REVIEW OF ALLIED HEALTH EDUCATION, NO. 3**
Call number: **R847 .A1 R48 no.3**

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Jacobson, Linbania, and Pellegrino, Edumund D., eds.
**Forum: the role of allied health professionals in prevention. Introduction: change agents in a changing system**
Preventive Medicine 1977 September; 6(3): 379-385
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Thomasma, David C.; Pisaneschi, Janet I.

Allied health professionals and ethical issues
Journal of Allied Health 1977 Summer; 6(3): 15-20

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