

UNSW



THE UNIVERSITY OF NEW SOUTH WALES

Exercise Physiology Program

School of Medical Sciences

Faculty of Medicine

HESC3592

Neuromuscular Rehabilitation

Semester 2, 2010
Course Outline

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Course Staff

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Course Details

Credit Points: 6 UOC

Course Description:

This course provides the opportunity for students to understand the potential and limitations of exercise as a tool for clinical rehabilitation in humans with neurological disorders. Specific information about a range of neuromuscular disorders is provided, and students are encouraged to apply their knowledge to case studies and scenarios in order to develop the scientific and clinical attributes necessary to contribute effectively to a neuromuscular rehabilitation team. This course offers a mixture of traditional and interactive/case study approaches to learning and includes a practical component in the university's Lifestyle Clinic.

Course Pre-requisites:

ANAT3131 – Functional Anatomy 1
ANAT3141 – Functional Anatomy 2
SESC2451 – Biomechanics for Sports Science
NEUR3101 – Muscle and Motor Control

Course Aims:

1. An appreciation for the role of exercise physiologists in the treatment process of neurological patients, demonstrate benefits of physical activity for prevention and management of disease, injury and disability.
2. Knowledge and communication skills needed to communicate professionally with physicians, physiotherapists, and other allied health care professionals about the treatment of neurological patients.
3. Knowledge and practical skills relevant to specific neurological disorders to allow the design and management of appropriate exercise interventions
4. Access and evaluate the scientific and clinical evidence base for continued improvement of professional practice.
5. Perform comprehensive functional capacity evaluations, including physical fitness, posture and muscle balance, task-specific biomechanical analysis and motor control assessments.
6. Liaise with medical and other allied-health professionals for a multi-disciplinary approach to health care.

Student Learning Outcomes

This term is used to describe what it is that you should be able to do, explain or understand if you have learned effectively in the course. For each lecture, tutorial, practical and assessment item, the expected learning outcomes will be explicitly stated. The assessment in the course will be matched as closely as possible to the stated learning outcomes. That is, the assessment will test how well you have achieved the learning outcomes of the course. The general learning outcomes for the course as a whole are as follows:

- Be able to communicate a mature understanding of the pathophysiology of a range of neuromuscular disorders at a level sufficient for effective communication with health care professionals. An in-depth engagement with disciplinary knowledge in its interdisciplinary context
- Have an awareness of current and (potential) future neuromuscular rehabilitation approaches and an ability to perform independent RESEARCH to address questions related to the field that may arise in your future professional activities.
- Be competent in the administration and interpretation of basic functional, psychological and electrophysiological tests relevant for patients undergoing neuromuscular rehabilitation.
- Have the necessary skills and contextual knowledge to effectively interview and communicate with neurological patients.
- Be able to deliver safe and effective exercise programs for patients with neuromuscular disorders.

Graduate Attributes

- Understand the relationship between physical activity and health
- Deliver lifestyle change programs that use exercise for the primary prevention of disease and the management of chronic disease
- Apply clinical skills and knowledge relevant to cardiopulmonary, metabolic, musculoskeletal and neuromuscular rehabilitation
- Engage in independent and reflective learning for the betterment of professional clinical practice, following an evidence-based approach
- Communicate effectively with patients, colleagues and other health professionals
- Work as a member and a leader of a team
- Display a respect for diversity and a high standard of ethical practice

Rationale for the inclusion of content and teaching approach

How the course relates to the Exercise Physiology profession – This course aims to provide holistic preparation for the management of exercise rehabilitation programs for patients with neurological and neuromuscular disorders. It emphasises clinical assessments of motor function and the role of exercise physiologists in multidisciplinary teams working in neuromuscular rehabilitation.

How the course relates to other courses in the Exercise Physiology program – The course will build upon your understanding of the role of the nervous system in the control of movement developed in Muscle and Motor Control (NEUR3101). It also draws on your knowledge of biomechanics (SESC2451) and functional anatomy (ANAT3131 & 3141). The case method tutorial component of this course is runs in parallel with that of Movement Rehabilitation (HESC3232). The case-based focus of the course is designed as preparation for the 4th year clinical practicum, which includes placements working with neurological and neuromuscular disorders.

TEACHING STRATEGIES AND SUGGESTED APPROACHES TO LEARNING:

Lectures – This approach is used to present relatively large amounts of information at a time on specific topics throughout the course. PDF copies of the lecture notes will USUALLY (some guest lecturers may choose not to make their notes available) be available on [Blackboard](#) (see below in STUDENT RESOURCES section) prior to each lecture, so you should be able to think about and develop an understanding of the lecture concepts as they are presented, rather than

writing voluminous notes. However, there will be information and explanations presented in lectures in addition to those covered in the notes that you should take down if they help you to understand the material. The lecturer will also try to allow some time for interaction and activities in each lecture to provide you with an opportunity to clarify or reinforce the ideas that have been presented. You should take these opportunities to think about the information that has been presented and ask questions to enhance your understanding.

Case Study Tutorials (week 5, 7, 9, 11) - The case study tutorial (CST) is an active learning approach involving student centered activities of topics that demonstrate theoretical concepts in an applied setting. This approach is designed to not only enhance your learning experience but also to increase your enjoyment of the topic and hence, your desire to learn. Case study tutorials allow students to apply theoretical concepts, thus bridging the gap between theory and practice. **All** students will be required to come prepared for each of the 4 CST's and to contribute to the discussion by reading the case study and associated questions provided in the weeks prior to the tutorial. Some students will be designated 'warm callers' prior to the CST. Warm callers will/may be asked to initiate the discussion at various points – e.g.: provide a summary of Mrs X's symptoms; are there any contraindications to Mrs X increasing her activity levels?; please summarise Mrs X's previous treatment history, etc. All other students can receive a 'cold call' at any time during the tutorial and provide an answer to a question or issue being discussed and debated. The assessment of each CST will involve a practical component and hence unprepared students risk poor grading and worst still, a less than optimal learning experience. A CST learning format is highly relevant to professional development and competencies as it exposes students to issues relevant to Exercise Physiologists in clinical practice. Case studies also provide an opportunity for the development of key skills including communication, group work and problem solving and provide a motivating and enjoyable learning experience.

Independent study – There is insufficient time in the lectures, tutorials and practicals for you to develop a thorough understanding of the concepts covered in this course. In order for you to achieve the learning outcomes that will be assessed, material presented in the course must be revised regularly. Students are also required to cover the readings and resources accompanying each lecture to enhance their understanding of lecture material and as a requirement for case study participation.

Practicals – The purpose of the practical components of the course is to help you to develop technical skills that will be important when dealing with neuromuscular patients. It is important to obtain hands-on experience with basic neurological and functional testing. You will be expected to do total of **20** hours of practical experiences (8 hours from case method tutorial, 10 hours from **4** practicals and 2 hours from attending lectures/grand rounds at hospital, signed off by the appropriate supervisors).

Functional tests and scales - There are a vast number of tests, questionnaires, and indices to assess functional capacity, memory, mood and activities of daily living in neurological patients. As an EP, you will need to be capable of selecting appropriate measures for individual clients. This will require an ability to appreciate the sensitivity of tests for particular contexts, levels of patient functioning. In this course, you will learn different functional tests and scales that have been designed to provide clinical information of relevance to EP practice in neurological patients.

Independent study – There is insufficient time in the lectures, tutorials and practical for you to develop a deep understanding of the concepts covered in this course. In order for you to achieve the learning outcomes that will be assessed, you will need to revise the material presented in the course regularly. You will probably also need to do additional reading beyond the lecture materials in order to learn effectively. Relevant additional resources will be cited in each lecture.

Assessments – These tasks have been chosen as tools to enhance and guide your learning as well as a way of measuring performance, and are therefore central teaching strategy in this course.

ASSESSMENT

Assessment of your learning in the course will be achieved through examinations, case study work and practical hours. The examination format tests your ability to apply and communicate knowledge to the management of neuromuscular disorders in a time-constrained context. These requirements are similar to those encountered when dealing with a client or patient in a face-to-face setting, communicating with a clinician or colleague, or during a job interview. The examinations will be designed to determine how well you have achieved the general learning outcomes that are outlined above, and the specific learning outcomes outlined in each lecture/practical/tutorial. The emphasis will be on the clinical application of theoretical knowledge, Clinical principles to hypothetical scenarios. The case studies will be concerned with developing your clinical developing skills with - detailed management plans for patients with specific neuromuscular disorders. This a fundamental skill required of an exercise physiologist practicing in neuromuscular rehabilitation. You will also be required to critique case study management plans designed by your peers. This will encourage sharing of ideas and knowledge as well as critical analysis and decision making concerning patient treatment plans.

Summary of Assessment	Weight	Due Date
ASSESSMENT TASK – Case Method Tutorials – 2 case x 20%	40%	Week5: Stroke Week7: Multiple Sclerosis Week9: Ageing Week11: Chronic Regional Pain Syndrome
ASSESSMENT TASK 2 – Case Studies	20%	End of Mid Session
ASSESSMENT TASK 3 - Practical Clinical assessment	10%	Weeks 10 and 12
ASSESSMENT TASK 4 – Final Examination	30%	End of Session

ASSESSMENT TASK 1 - CASE METHOD TUTORIALS – 2 case x 20%

There will be 4 case method tutorials

CST participation and summary report for 2 case studies; a practical assessment; and a final examination. For each case study the class will be halved into an active and passive group and all students will require a 12 cm x 6cm name tag. Students in the active group will contribute to the CST as part of group of 5-7 students. The CST groups will be organised at the week 2 laboratory. Students will not be made aware who is activate and who is passive until the day of the CST, which will require all students to be adequately prepared. Each group will be allocated a mark for their participation and contribution during the CST, which will apply to all members of the group. The contribution by each group, and the mark allocated for participation, will depend on your level of preparation before the case study. Each group will also be required to prepare a summary report addressing several key issues which were discussed in the case study.

Marking Criteria

Case Study Participation - Students will contribute to the case study tutorials as part of a group. Student participation will be assessed by their peers and academic staff, with the mark allocated to each group applying to each member of the group. Consequently, it is important that each member of the group is well prepared and a coordinated effort by each group will be required to ensure that each individual is adequately prepared. The group participation and marking criteria are:

Case Study Participation

Outstanding Contributor (10%)	Contributions in class reflect exceptional preparation. Ideas offered are always substantive; provide one or more major insights as well as direction for the class. Challenges are well substantiated and persuasively presented. If this group were not active, the quality of discussion would be diminished markedly.
Good Contributor (8%)	Contributions in class reflect thorough preparation. Ideas offered are usually substantive; provide good insights and sometimes direction for the class. Challenges are well substantiated and often persuasive. If this group were not active, the quality of discussion would be diminished.
Adequate Contributor (6%)	Contributions in class reflect satisfactory preparation. Ideas offered are sometimes substantive, provide generally useful insights but seldom offer a new direction for the discussion. Challenges are sometimes presented, fairly well substantiated, and are sometimes persuasive. If this group were not active, the quality of discussion would be diminished somewhat.
Unsatisfactory Contributor (4%)	Contributions in class reflect inadequate preparation. Ideas offered are seldom substantive; provide few if any insights and never a constructive direction for the class. Integrative comments and effective challenges are absent. If this group were not active, it would have little impact on the learning outcomes.
Non-Participant (2%)	This group has made minimal contribution during the case study. If this group was not in attendance, it would make no difference to the learning outcomes

Case Study Report

Components	Inadequate (≤2%)	Below average (≤ 5%)	Good (≤ 8%)	Excellent (≤ 10%)
Understanding/Conceptualisation	demonstrates little understanding of the key concepts highlighted during the CST	demonstrates poor understanding of the key concepts highlighted during the CST	demonstrates adequate understanding of the key concepts highlighted during the CST	demonstrates thorough understanding of the key concepts highlighted during the CST
Opinion	unclear, in concise, illogical and inadequately constructed opinion with little relevance to the CST	vague and poorly constructed opinion with poor logic and insufficient relevance to the CST	adequately constructed and logical opinion relevant to the CST	Very well constructed opinion and logic relevant to the CST
Terminology	little or no use of the terminology discussed in the CST	inadequate use of the terminology discussed in the CST	Adequate use of the terminology discussed in the CST	Well developed use of the terminology discussed in the CST
Quality of the writing and presentation	poorly written and organised; frequent spelling or grammatical errors; does not adhere to the required format.	inadequate clarity of writing and organisation; some errors in written expression; follows the prescribed format	clearly written and well organised; minimal errors in written expression; adheres to the required format	clear, fluent and concise and well organised writing; no errors in written expression; adheres to the prescribed format.

ASSESSMENT TASK 2 - CASE STUDIES

The class will be subdivided into groups of 5 or less to carry out the assignments. You will be assigned a unique (i.e. different from other group members) case study based on hypothetical patient/real case). You are to develop a holistic management plan for your specific case, and submit a written description/report. It is essential that you justify why you have chosen any specific tests/exercises. See marking criteria for additional information. This will be due after the mid-session break, **Friday of week 7, 10th September, 5pm.**

ASSIGNMENT/CASE STUDY MARKING CRITERIA

	High Distinction	Distinction	Credit	Pass	Pass Conceded	Fail	Mark
Individual Assessment	Clearly written Concise Well justified and realistic outline of an appropriate assessment	Clearly written Concise Appropriate approach with good rationale	Acceptable written expression Reasonable approach with clear rationale	Some errors in written expression Reasonable approach with some rationale	Poorly written Reasonable approach with no rationale	Poorly written Questionable approach with no rationale	20
Response to Exercise and Functional Considerations	Clearly written Concise Comprehensive and individually relevant	Clearly written Concise Individually relevant coverage of most points	Acceptable written expression More general coverage of most points	Some errors in written expression General coverage of some points	Poorly written General coverage of few points Some errors	Poorly written Poor coverage of relevant points Some errors	10
Goals of Management Plan	Clearly written Concise Achievable and well justified goals for specific case	Clearly written Appropriate goals for specific case with good justification	Acceptable writing Reasonable goals for specific case with ok rationale	Acceptable writing Reasonable goals for specific case with weak rationale	Poorly written Reasonable goals for specific case with no rationale	Poorly written Questionable goals for specific case with no rationale	20
Management Plan Including Rationale	Clearly written Concise Detailed plan tailored well to individual case with evidence based rationale	Clearly written Concise Appropriate plan for individual case, good rationale	Acceptable writing Reasonable plan for individual case with ok rationale	Acceptable writing Reasonable plan for specific case with weak rationale	Poorly written Reasonable plan for specific case with no rationale	Poorly written Questionable plan for specific case with no rationale	40
Precautions and Indicators for Referral	Clearly written Concise Comprehensive and accurate consideration of risks/ complications	Clearly written Concise Accurate consideration of most risks/ complications	Acceptable writing Mostly accurate consideration of risks/ complications	Acceptable writing Consideration of some risks/ complications	Poorly written Cursory consideration of risks/ complications	Poorly written Errors in consideration of risks/ complications	10

ASSESSMENT TASK 3 – PRACTICAL CLINICAL ASSESSMENT

You will also be required to undertake a 30-min practical assessment involving an oral and clinical skills demonstration component based on the material presented in the CST's, laboratories, lectures and referred readings. The practical assessment is concerned with practical application of your knowledge and skills to daily clinical practice. The assessment will be undertaken in pairs and commence with a written brief detailing the relevant information and questions of the clinical aspect which will be assessed. Before commencing the oral assessment students will be given 20 min to study the written brief and organise their thoughts about the areas to be assessed. The oral assessment will involve verbal responses to questions posed by the examiner followed by a skills demonstration involving your partner involving a clinical assessment or treatment technique commonly used by an EP in musculoskeletal rehabilitation.

Practical Clinical Assessment Marking Criteria

Oral Assessment	10%	Demonstration	10%
Marking Criteria		Marking Criteria	
<u>Verbal response</u>		<u>Clinical skills</u>	
Provided correct and complete response to the question	4%	Demonstrated the required techniques with competency and a strong application to clinical practice	4%
Partially answered the question	2%	Demonstrated the required techniques with confidence and moderate application to clinical practice	2%
Inadequate response to the question	0%	Demonstrated the required techniques poorly with little application to clinical practice	0%
<u>Clinical Reasoning</u>		<u>Clinical Reasoning</u>	
High level of clinical reasoning, knowledge and understanding demonstrated	4%	High level of clinical reasoning, knowledge and understanding demonstrated	4%
Medium level of clinical reasoning, knowledge and understanding demonstrated	2%	Medium level of clinical reasoning, knowledge and understanding demonstrated	2%
Low level of clinical reasoning, knowledge and understanding demonstrated	0%	Low level of clinical reasoning, knowledge and understanding demonstrated	0%
<u>Communication</u>		<u>Communication</u>	
High level of communication and interpersonal skills demonstrated	1%	High level of communication and interpersonal skills demonstrated	1%
Adequate communication and interpersonal skills demonstrated	0%	Adequate communication and interpersonal skills demonstrated	0%
Poor communication and interpersonal skills demonstrated		Poor communication and interpersonal skills demonstrated	

Learning Outcomes for the Assignment

- To develop and refine the ability to generate exercise based management plans in the neuromuscular rehabilitation field.
- To improve your ability to integrate information on a topic in neuromuscular rehabilitation from many sources
- To gain a detailed understanding of a specific scenario that could be encountered while practicing as an EP in the neuromuscular rehabilitation field
- To develop your ability to communicate effectively in the format of a clinical report

Tips for Preparing your Assignment

- Make sure you tailor the management plan to your specific case. You will need to read and think about issues that are not strictly “neural”.
- Make sure you present the evidence base and rationale for your management plan.
- Treat the assignment as an opportunity to develop knowledge and skills that will be required in your future career. It might help to write the report as if it were a document for peers in a rehabilitation clinic or sporting organisation.
- Ensure that you read and quote ORIGINAL sources (journal articles) in addition to textbooks and review articles.

- Address the marking criteria!
- Make sure your writing style is appropriate for a scientific report. The meaning of each sentence should be clear in isolation, and the language should be as simple as possible to make your point.
- **MAKE SURE YOU DO NOT PLAGARISE THE WORK OF OTHERS!!!**

ASSESSMENT TASK 4 - FINAL EXAMINATION

The purpose of this exam is to test your understanding of the concepts covered in the course during the ENTIRE COURSE. The format will be multiple choices, short answer, and long answer/essay questions. The exam will be held during the end of session exam period.

Submission of Assessment Tasks

Assignments are to be submitted electronically through Turnitin via Blackboard.

Penalties for late submission of assignments – In cases where an extension has NOT been granted, the following penalties will apply: For assignments submitted after **9:00am** on the due date, a penalty of 50% of the maximum marks available for that assignment will be incurred. A further 25% of the maximum possible allocated marks (i.e., a total of 75%) will be deducted from assignments which are two (2) days late. Assignments received more than two (2) days after the due date **will not be allocated a mark**, however, these assignments **must** still be submitted to pass the unit.

Academic honesty and plagiarism

Plagiarism is using the words or ideas of others and presenting them as your own. Plagiarism is a type of intellectual theft and is regarded by the university as academic misconduct. It can take many forms, from deliberate cheating to accidentally copying from a source without acknowledgement. The University has adopted an educative approach to plagiarism and has developed a range of resources to support students. **The Learning Centre can provide further information via <http://www.lc.unsw.edu/plagiarism>.**

Course Schedule

Time	Lecture Mon 10-11am Civil Engineering G1	Lecture Thursday 11-12pm Mathews Theatre C	Case Method Tutorial Tuesday 2-3.30pm BioMed C	Practical Wednesday 10-12, 1-3, 3-5pm 32 Botany Street
Week 1 19 th July	L1 – Introduction Neurorehabilitation (CL)	L2 – Role of EP in Neuromuscular disorders (CT)		
Week 2 26 th July	L3 – Paediatric muscular disorders (MF)	L4 – Peripheral neuropathy (AK)		Functional tests/ Scales (CL,HP)
Week 3 2 nd August	L5 – Physiotherapist perspective on EP (RB)	L6 – Traumatic Brain Injury (CL)		
Week 4 9 th August	L7 – Spinal cord injury (CL)	L8 – Rehabilitation for SCI (CL)		Myotomes/Dermatomes (AB, CL, HP)
Week 5 16 th August	L9 – Stroke (WH)	L10 – Rehabilitation in Stroke (CL)	Stroke (10%) (RA, WH, CL)	
Week 6 23 rd August	L11 – Parkinson’s Disease (ST)	L12 – Motor Neurone Disease (SV)		Falls & Balance (RA, CL)
Week 7 30 th August	L13 – Falls & Balance (JM)	L14 – Multiple Sclerosis (AK)	Multiple Sclerosis (10%) (CT, HP)	
Mid-session Break 6 th September Case study Due	Mid-session Break	Mid-session Break	Mid-session Break	Mid-session Break
Week 8 13 th September	L15 – Hydrotherapy (RM)	L16 – Neuropsychology (TL)		Hydro-pool (RM, HP)
Week 9 20 th September	L17 – Symptom-specific rehabilitation (CL)	L18 – Longitudinal Rehab (CL)	Aging (10%) (DS, BB, MB)	
Week 10 27 th September	L19 – Paediatric rehab (CL)	L20 – Therapeutic technology (CL)		Clinical assessment (CL)
Week 11 4 th Oct	Public holiday	L21 – Case studies (CL)	CRPS (10%) (JB, HP)	
Week 12 11 th Oct	L22 – Revision (CL)	L23 – Course summary (CL)		Clinical assessment (CL)

STUDENT RESOURCES

Blackboard

Information about the course and a number of electronic study resources can be accessed via the UNSW Blackboard system.

You can access the system from the following site:

<http://lms-blackboard.telt.unsw.edu.au/webapps/portal/frameset.jsp>

Lectures are recorded and available at:

<http://telt.unsw.edu.au/lectopia/%5Fdiy/>

You can use Blackboard to download lecture notes, access your grades, find reference material in the course (such as this document), and communicate with the lecturer and your peers. Please see the lecturer if you would like more information to help you to make the most of this resource.

Lectopia

The Lectopia system (iLecture) provides digital audio recordings of lectures that can be accessed via streaming media over the web or as a podcast (if permitted by the lecturer).

Lecture slides may be embedded in these presentations.

<http://telt.unsw.edu.au/lectopia/content/default.cfm?ss=1>

UNSW Library

The University Library provides a range of services to assist students in understanding how to identify what information is required for assignments and projects; how to find the right information to support academic activities; and how to use the right information most effectively.

Homepage: <http://info.library.unsw.edu.au>

Reserve (MyCourse)

Many items (books and journal articles) set as recommended reading for courses will be located in **Reserve**, which is on Level 2 of the Main Library. Some of the journal articles will be available in electronic format via **MyCourse**, for Medical students there will be direct links to many of these from within the Medicine program WebCT course sites or eMed Map. To search for these items, go to <http://info.library.unsw.edu.au/Welcome.html> and click on **MyCourse**.

PRESCRIBED TEXT

Neurorehabilitation for the physical therapist assistant/ edited by Darcy Umphred, Connie Carlson. Thorofare, NJ: SLACK, c2006

SUGGESTED REFERENCE BOOKS (more will be listed in the lectures)

ACSM's resources for clinical exercise physiology: musculoskeletal, neuromuscular, neoplastic, immunologic, and hematologic conditions / American College of Sports Medicine ; [editors, Jonathan N. Myers, William Herbert, Reed Humphrey]. Philadelphia : Lippincott Williams & Wilkins, c2002.

Textbook of neural repair and rehabilitation: Volume 2, Medical Neurorehabilitation / edited by Michael E. Selzer ... [et al.]. Cambridge : Cambridge University Press, 2006.

Case studies in rehabilitation / Patricia A. Ghikas, Michele Clopper. Thorofare, NJ: Slack, c2001.

Movement disorders in neurology and neuropsychiatry / edited by Anthony B. Joseph and Robert R. Young. Boston: Blackwell Scientific Publications, 1992.

Handbook of neurorehabilitation / edited by David C. Good, James R. Couch, Jr. New York: Marcel Dekker, c1994.

Physical medicine and rehabilitation: principles and practice / editor-in-chief, Joel A. DeLisa ; editor, Bruce M. Gans ; managing editor, Nicholas E. Walsh. Philadelphia : Lippincott Williams & Wilkins, c2005. v. 1.

Physical medicine -- v. 2. Rehabilitation medicine ACSM's exercise management for persons with chronic diseases and disabilities/ American College of Sports Medicine ; senior editors J. Larry Durstine , Geoffrey E. Moore. Champaign, Ill. : Human Kinetics, c2003.

Exercise in rehabilitation medicine / editor-in-chief, Walter R. Frontera ; associate editors, David M. Dawson, David M. Slovik. Champaign, Ill. : Human Kinetics, c1999.

SUGGESTED REFERENCE JOURNALS

Journal of Neurology, Neurosurgery and Psychiatry, Brain, Annals of Neurology, Progress in Neurobiology, Stroke, Physical Therapy Archives of Physical Medicine and Rehabilitation

Course Evaluation and Development

Student feedback is welcome and taken seriously. A Course and Teaching Evaluation and Improvement (CATEI) survey will be provided in the final weeks of the course to formally gather student feedback.

The inclusion of more clinically-oriented training in HESC3592 was partly prompted in response to feedback from previous students and has resulted in the introduction of the case method tutorials.

Occupational Health and Safety

Class activities must comply with the NSW Occupational Health & Safety Act 2000 and the Occupational Health & Safety (OHS) Regulations 2001. It is expected that students will conduct themselves in an appropriate and responsible manner in order not to breach OHS regulations. Further information on relevant OHS policies and expectations is outlined at: http://www.hr.unsw.edu.au/ohswc/ohs/ohs_policies.html

Examination procedures and attendance requirements

Attendance is expected at all lectures, practicals and tutorials for this course. Attendance at all practicals, tutorials and clinicals will be recorded. Students who do not participate in these sessions for any reason other than medical or misadventure, will be marked absent and will be awarded a grade of FAIL for the entire course. If absent for medical reasons, a medical certificate must be lodged with the lecturer within 7 days of the time period of the certificate's expiry. No consideration will be given after this time. Although lectures will be available on ilecture, student participation is encouraged in both the lectures and the tutorials and these are important to attend.

Deferred Exams

If you miss an exam for medical reasons you must supply adequate documentation (including a medical certificate). Your request for consideration will then be assessed and a deferred exam may be granted. You cannot assume you will be granted supplementary assessment. The deferred exam may include a significant oral element.

Special consideration in the event of illness or misadventure

Please note the following Statement regarding Special Consideration.

If you believe that your performance in a course, either during session or in an examination, has been adversely affected by sickness, misadventure, or other circumstances beyond your control, you should notify the Registrar and ask for special consideration in the determination of your results. Such requests should be made as soon as practicable after the problem occurs.

Applications made more than three working days after the relevant assessment will not be accepted except in TRULY exceptional circumstances.

When submitting a request for special consideration you should provide all possible supporting evidence (eg medical certificates) together with your student number and enrolment details. Consideration request forms are available from Student Central in the Chancellery or can be downloaded from the web page linked below.

Note that normally, if you miss an exam (without medical reasons) you will be given an absent fail. If you arrive late for an exam no time extension will be granted. It is your responsibility to check timetables and ensure that you arrive on time.

Students who apply for consideration to Student Central must also contact the Course Convenor immediately.

All applications for Special Consideration will be processed in accordance with UNSW policy (see: <http://my.unsw.edu.au/student/atoz/SpecialConsideration.html>). If you miss an assessment and have applied for Special Consideration, this will be taken into account when your final grade is determined. You should note that marks derived from completed assessment tasks may be used as the primary basis for determining an overall mark. Where appropriate, supplementary examination may be offered, but only when warranted by the circumstances.

Student equity and diversity issues

Students requiring assistance are encouraged to discuss their needs with the course convenor prior to, or at the commencement of the course, or with the Equity Officer (Disability) in the Equity and Diversity Unit (EADU) (9385 4734). Further information for students with disabilities is available at <http://www.studentequity.unsw.edu.au/disabil.html>