|   |  | СНСО  |
|---|--|---|
| Goal  | Module #   | Assessment Information  |
|   |  |   |
| <b>Goal 1:</b> Demonstrate<br>knowledge in the<br>following areas in<br>pediatric hand<br>therapy: <b>Primary and</b>   | 1 Pediatric Hand Therapy<br>Fellowship Orientation   | Fellow will be oriented to the CHCO Pediatric<br>Hand Therapy Fellowship program, schedule,<br>program goals, primary and secondary<br>diagnoses, and expectations for the Fellowship<br>year   |
| secondary<br>conditions relevant<br>evidence to specific<br>evaluation and<br>intervention Practice   | 2 Normal and Abnormal<br>Development   | <b>Primary and Secondary Conditions:</b> Normal<br>Development – Birth to 6 months, 6-12 months,<br>12-24 months, 24-48 months, 4 years +   |
| care guidelines,  | 3 Anatomy Review   | This module applies to all primary and secondary conditions of the upper limb   |
| policies, procedures,<br>and laws This will be<br>accomplished through<br>clinical and academic<br>opportunities during<br>direct patient care,<br>clinic coverage, and<br>coordination/collabora<br>tion with other hand<br>and upper extremity<br>professionals | 4 Upper Extremity<br>Evaluation<br>5 Fabrication of Orthoses<br>and Casts<br>6 Orthopedic Trauma and<br>Musculoskeletal Injuries | <ul> <li>Primary and secondary conditions including but<br/>not limited to orthopedic injuries, congenital<br/>anomalies, and cerebral palsy</li> <li>Fellow will be independent in the evaluation and<br/>clinical reasoning to determine the appropriate<br/>orthosis or cast needed to address goals and plan<br/>of care for the patient with a variety of upper<br/>extremity primary and secondary diagnoses</li> <li>Primary and secondary conditions include, but<br/>not limited to upper extremity fractures, soft</li> </ul> |
|   | Part 1<br>7 Orthopedic Trauma and<br>Musculoskeletal Injuries<br>Part 2<br>8 Burn, Wounds, and Scars                             | tissue injuries and dislocations<br><b>Primary and secondary conditions</b> include but<br>not limited to tendon lacerations, nerve<br>lacerations, and complex trauma (including bone,<br>nerve, tendon, soft tissue, pain)<br><b>Primary and secondary conditions</b> include, but  |
|   | 9 Epidermylosis Bullosa  | not limited to pediatric burns, wounds, burn scar<br>contracture, status post full thickness skin<br>grafting, status post-split thickness skin grafting<br><b>Primary and secondary conditions</b> include, but  |
|   | 10 CP Neuro – UE Surgery   | not limited to functional and upper extremity<br>limitations secondary to Epidermylosis Bullosa<br><b>Primary and secondary conditions</b> include, but   |
|   | and Rehabilitation<br>Techniques   | are not limited to cerebral palsy, hemiplegia, and<br>other neurologically based conditions that<br>present with upper extremity tone   |

| 11 Congenital Anomalies      | Primary and secondary conditions include, but     |
|------------------------------|---|
|                              | not limited to arthrogryposis, syndactyly,        |
|                              | camptodactyly, Radial longitudinal deficiency,    |
|                              | Hypoplastic thumbs, trigger thumbs, and Apert     |
|                              | syndrome  |
| 12 NICU                      | Primary and secondary conditions include, but     |
|                              | not limited to joint contractures, radial         |
|                              | longitudinal deficiency, thumb differences,       |
|                              | congenital anomalies, tone management and         |
|                              | arthrogryposis in the NICU                        |
| 13 Brachial Plexus Injuries  | Primary and secondary conditions include but      |
|                              | not limited to Brachial plexus birth palsy,       |
|                              | traumatic brachial plexus injuries, Acute Flaccic |
|                              | Myelitis, Sprengel's Deformity, Polland           |
|                              | Syndrome, Parsonage Turner syndrome               |
| 14 Surgical Reconstruction   | Primary and secondary conditions include, but     |
| of Peripheral Nerve Injuries | are not limited to upper extremity tendon         |
|                              | transfers, nerve transfers, and nerve             |
| 15 Compression               | Primary and secondary conditions include, but     |
| Neuropathies, proximal       | not limited to upper extremity compression        |
| nerve conditions, and UE     | neuropathies, upper extremity peripheral nerve    |
| pain                         | conditions, and upper extremity pain              |
| 16 Vascular Anomalies        | Primary and secondary conditions include, but     |
|                              | are not limited to pediatric vascular anomaly     |
|                              | conditions of the pediatric upper extremity       |
| 17 Rheumatology              | Primary and secondary conditions include, but     |
|                              | not limited to autoimmune disorders, JIA,         |
|                              | Scleroderma, and Hurler's syndrome                |
| 18 Hypermobility             | Primary and secondary conditions include, but     |
|                              | not limited to Ehler's Danlos syndrome (EDS) ar   |
|                              | Postural Orthostatic Tachycardia Syndrome         |
|                              | (POTS)  |
| 19 Shoulder                  | Primary and secondary conditions include, but     |
|                              | not limited to tendinopathy, shoulder dyskines    |
|                              | and traumatic injury                              |
| 20 Upper Extremity           | Primary and secondary conditions include, but     |
| Athletes                     | not limited to overhead throwing/swinging,        |
|                              | swimming, contact sports, gymnasts, winter        |
|                              | athletes, rock climbing, and cycling              |
| 21 Special Topics            | Primary and secondary conditions include, but     |
|                              | not limited to Oncology, Acute Flaccid Myelitis,  |
|                              | Focal Hand Dystonia (Musicians)                   |

|                       |                                    | <b>F B B B B B B B B B B</b>                            |
|-----------------------|------------------------------------|---|
| Goal 2: Independently | 1 Pediatric Hand Therapy           | Fellow will be oriented to hospital, program, and       |
| administer evidenced  | Fellowship Orientation             | AOTA policies, procedures, guidelines and               |
| based occupational    |                                    | expectations via training courses and program           |
| •                     |                                    | handbook  |
| therapy assessments   |                                    |   |
| and interventions and | 2 Normal and Abnormal              | Assessments: Assisting Hand Assessment (AHA)            |
| develop plans of care | Development                        | Bayley Scales of Infant and Toddler                     |
| for patients with     |                                    | Hand Assessment for Infants (HAI)                       |
| various conditions    |                                    | Mini Assisting Hand Assessment (Mini AHA)               |
|                       |                                    | Shriner's Hospital Upper Extremity Evaluation           |
| treated in pediatric  |                                    | (SHUEE)   |
| hand therapy.         |                                    | · · · ·   |
|                       | 4 Upper Extremity                  | Assessments: Occupational Profile, Self-reported        |
|                       | Evaluation                         | outcome measures, ROM, Strength, Edema,                 |
|                       |                                    | Sensation, UE Neural Tension Testing, Special           |
|                       | F Fabrication of Outbaces          | Tests   |
|                       | 5 Fabrication of Orthoses          | Fellow will be independent in the evaluation and        |
|                       | and Casts                          | clinical reasoning to determine the appropriate         |
|                       |                                    | orthosis or cast needed to address goals and plan       |
|                       |                                    | of care for the patient                                 |
|                       | 6 Orthopedic Trauma and            | Assessments - Occupational Profile, Self-reported       |
|                       | Musculoskeletal Injuries<br>Part 1 | outcome measures, ROM, Strength, Edema,                 |
|                       |                                    | Sensation, UE Neural Tension Testing, Special           |
|                       |                                    | tests, etc. Interventions - Edema management,           |
|                       |                                    | soft tissue mobilizations, therapeutic exercise,<br>etc |
|                       |                                    |   |
|                       | 7 Orthopedic Trauma and            | Assessments - Occupational Profile, Self-reported       |
|                       | Musculoskeletal Injuries           | outcome measures, ROM, Strength, Edema,                 |
|                       | Part 2                             | Sensation, UE Neural Tension Testing, Special           |
|                       |                                    | tests, pain etc, Interventions - Edema                  |
|                       |                                    | management, soft tissue mobilizations,                  |
|                       |                                    | therapeutic exercise, wound care, manual                |
|                       |                                    | therapy, functional use, etc                            |
|                       | 8 Burn, Wounds, and Scars          | Assesment and Interventions for Burn depths,            |
|                       |                                    | principles of wound healing, positioning, edema         |
|                       |                                    | management, therapeutic exercises,                      |
|                       |                                    | debridement, application of dressings, adaptive         |
|                       |                                    | equipment training, return to school and                |
|                       |                                    | community/re-integration, scar management               |
|                       |                                    | including scar massage, passive stretching,             |
|                       |                                    | education on sun protection, activity adaptation        |
|                       |                                    |   |
|                       |                                    |   |

| 9 Epidermylosis Bullosa      | Assessments - Occupational Profile, Self-reported   |
|------------------------------|---|
|                              | outcome measures, ROM, Strength, Wounds             |
|                              | Interventions - provide adaptive                    |
|                              | strategies/devices/support to increase              |
|                              | independence and quality of living, and assist in   |
|                              | family navigation of services, school district      |
|                              | therapies as needed                                 |
|                              |   |
| 10 CP Neuro – UE Surgery     | Assesssment and Intervention for Upper              |
| and Rehabilitation           | extremity tone pre and post surgical procedure      |
| Techniques                   | (ie tendon transfer, tendon/muscle lengthening,     |
|                              | proximal row carpectomy, etc), Understanding        |
|                              | surgical protocols, casting and orthoses to gain    |
|                              | PROM, positioning, protection, and function,        |
|                              | pharmacological interventions and therapeutic       |
| 11 Congenital Anomalies      | Assessment: Upper Extremity Functional Scale, T-    |
|                              | Gap (Thumb, Grasp, and Pinch Assessment),           |
|                              | ROM, play based observations, Intervention:         |
|                              | Conservative management, pre-post-surgical          |
|                              | intervention and rehabilitation and orthosis        |
|                              | management  |
| 12 NICU                      | Assessment and Intervention: Infant Orthosis        |
|                              | Assessment, General NICU and/or outpatient          |
|                              | infant developmental assessment, ROM,               |
|                              | Developmental Assessment as appropriate             |
| 13 Brachial Plexus Injuries  | Assessments and Interventions: Active               |
|                              | Movement Scale (AMS), Assisting Hand                |
|                              | Assessment (AHA), Passive and active range of       |
|                              | motion, manual therapy, neuro re-education,         |
|                              | motor control, developmental, play based,           |
|                              | strengthening, therapeutic taping, and/or           |
|                              | bimanual coordination, Conservative treatment,      |
|                              | pre and post- surgical rehabilitation, use of motor |
| 14 Surgical Reconstruction   | Assessments – Occupational profile, self-reported   |
| of Peripheral Nerve Injuries | outcome measures, ROM, strength, edema,             |
|                              | Sensation (2-point discrimination, Semmes           |
|                              | Weinstein, sharp/dull, etc), special tests,         |
|                              | Interventions – ROM, edema management, scar         |
|                              | management, desensitization, soft tissue            |
|                              | mobilizations, manual therapy, therapeutic          |
|                              | exercises, occupational performance                 |

|                                | Assessment to include Assessment of the Upper   |  |
|--------------------------------|---|--|
| Neuropathies, proximal         | Quadrant and Upper limb neural tension testing  |  |
| nerve conditions, and UE       | in addition to assessments taught and practiced   |  |
| pain                           | in previous modules <b>Intervention</b> – Posture   |  |
|                                | awareness, ROM, soft tissue mobilizations,  |  |
|                                | manual therapy, nerve glides, strengthening,  |  |
|                                | desensitization, therapeutic exercise,  |  |
|                                | occupational performance  |  |
| 16 Vascular Anomalies          | Assessment of occupational profile, ROM,  |  |
|                                | strength, functional limitations, compression   |  |
|                                | garments  |  |
| 17 Rheumatology                | Assessments - Occupational Profile, Self-reported   |  |
|                                | outcome measures, ROM, Strength, Edema,   |  |
|                                | Sensation, Special tests, etc, Interventions –  |  |
|                                | ROM, Edema management, therapeutic exercise,  |  |
|                                | occupational performance, etc   |  |
| 18 Hypermobility               | Assessment for hypermobility, ROM, Beighton   |  |
|                                | Scale, etc, Treatment strategies for  |  |
|                                | hypermobility, including postural and core  |  |
|                                | strengthening, therapeutic exercises, therapeutic   |  |
|                                | activities, and home program development, Joint   |  |
|                                | Protection and Energy Conservation  |  |
| 19 Shoulder                    | Assessments - Occupational Profile, Self-reported   |  |
|                                | outcome measures, ROM, Strength, Edema,   |  |
|                                | Concation LIE Noural Tancian Testing Special  |  |
|                                | Sensation, UE Neural Tension Testing, Special   |  |
|                                | tests, etc, <b>Interventions</b> – ROM, Edema   |  |
|                                |   |  |
|                                | tests, etc, Interventions – ROM, Edema  |  |
|                                | tests, etc, <b>Interventions</b> – ROM, Edema<br>management, soft tissue mobilizations, manual  |  |
| 20 Upper Extremity             | tests, etc, <b>Interventions</b> – ROM, Edema<br>management, soft tissue mobilizations, manual<br>therapy, therapeutic exercise, occupational   |  |
| 20 Upper Extremity<br>Athletes | tests, etc, <b>Interventions</b> – ROM, Edema<br>management, soft tissue mobilizations, manual<br>therapy, therapeutic exercise, occupational<br>performance, etc   |  |
| ••                             | tests, etc, Interventions – ROM, Edema<br>management, soft tissue mobilizations, manual<br>therapy, therapeutic exercise, occupational<br>performance, etc<br>Assessments - Occupational Profile, Self-reported   |  |
| ••                             | tests, etc, Interventions – ROM, Edema<br>management, soft tissue mobilizations, manual<br>therapy, therapeutic exercise, occupational<br>performance, etc<br>Assessments - Occupational Profile, Self-reported<br>outcome measures, ROM, Strength, Edema,  |  |
| ••                             | tests, etc, Interventions – ROM, Edema<br>management, soft tissue mobilizations, manual<br>therapy, therapeutic exercise, occupational<br>performance, etc<br>Assessments - Occupational Profile, Self-reported<br>outcome measures, ROM, Strength, Edema,<br>Sensation, UE Neural Tension Testing, Special   |  |
| ••                             | <ul> <li>tests, etc, Interventions – ROM, Edema<br/>management, soft tissue mobilizations, manual<br/>therapy, therapeutic exercise, occupational<br/>performance, etc</li> <li>Assessments - Occupational Profile, Self-reported<br/>outcome measures, ROM, Strength, Edema,<br/>Sensation, UE Neural Tension Testing, Special<br/>tests, etc, Return to sport assessments as<br/>appropriate, Interventions to decrease pain,</li> </ul>  |  |
| ••                             | <ul> <li>tests, etc, Interventions – ROM, Edema<br/>management, soft tissue mobilizations, manual<br/>therapy, therapeutic exercise, occupational<br/>performance, etc</li> <li>Assessments - Occupational Profile, Self-reported<br/>outcome measures, ROM, Strength, Edema,<br/>Sensation, UE Neural Tension Testing, Special<br/>tests, etc, Return to sport assessments as<br/>appropriate, Interventions to decrease pain,<br/>facilitate healing and ultimately return the athleter</li> </ul>  |  |
| ••                             | <ul> <li>tests, etc, Interventions – ROM, Edema<br/>management, soft tissue mobilizations, manual<br/>therapy, therapeutic exercise, occupational<br/>performance, etc</li> <li>Assessments - Occupational Profile, Self-reported<br/>outcome measures, ROM, Strength, Edema,<br/>Sensation, UE Neural Tension Testing, Special<br/>tests, etc, Return to sport assessments as<br/>appropriate, Interventions to decrease pain,<br/>facilitate healing and ultimately return the athleter</li> </ul>  |  |
| ••                             | <ul> <li>tests, etc, Interventions – ROM, Edema<br/>management, soft tissue mobilizations, manual<br/>therapy, therapeutic exercise, occupational<br/>performance, etc</li> <li>Assessments - Occupational Profile, Self-reported<br/>outcome measures, ROM, Strength, Edema,<br/>Sensation, UE Neural Tension Testing, Special<br/>tests, etc, Return to sport assessments as<br/>appropriate, Interventions to decrease pain,<br/>facilitate healing and ultimately return the athleter<br/>to full participation in their support. Intervention</li> </ul>   |  |
| ••                             | <ul> <li>tests, etc, Interventions – ROM, Edema<br/>management, soft tissue mobilizations, manual<br/>therapy, therapeutic exercise, occupational<br/>performance, etc</li> <li>Assessments - Occupational Profile, Self-reported<br/>outcome measures, ROM, Strength, Edema,<br/>Sensation, UE Neural Tension Testing, Special<br/>tests, etc, Return to sport assessments as<br/>appropriate, Interventions to decrease pain,<br/>facilitate healing and ultimately return the athlete<br/>to full participation in their support. Interventions<br/>may include therapeutic exercise, therapeutic</li> </ul>   |  |
| ••                             | <ul> <li>tests, etc, Interventions – ROM, Edema<br/>management, soft tissue mobilizations, manual<br/>therapy, therapeutic exercise, occupational<br/>performance, etc</li> <li>Assessments - Occupational Profile, Self-reported<br/>outcome measures, ROM, Strength, Edema,<br/>Sensation, UE Neural Tension Testing, Special<br/>tests, etc, Return to sport assessments as<br/>appropriate, Interventions to decrease pain,<br/>facilitate healing and ultimately return the athlete<br/>to full participation in their support. Interventions<br/>may include therapeutic exercise, therapeutic<br/>activities, manual therapy, therapeutic taping,</li> </ul> |  |

|  | 21 Special Topics   | Assessments - Occupational Profile, Self-reported<br>outcome measures, posture awareness, ROM,<br>Strength, Edema, Sensation, UE Neural Tension<br>Testing, Special tests, etc, Interventions – ROM,<br>Edema management, soft tissue mobilizations,<br>manual therapy, therapeutic exercise,<br>occupational performance, etc |
|--|---|--|
| Goal 3: Demonstrate<br>the highest quality of<br>orthosis fabrication<br>that will lead to | 1 Pediatric Hand Therapy<br>Fellowship Orientation            | Fellow will be oriented to the CHCO Pediatric<br>Hand Therapy Fellowship program, schedule,<br>program goals, primary and secondary diagnoses,<br>and expectations for the Fellowship year   |
| meaningful<br>engagement in<br>occupation and  | 5 Fabrication of Orthoses<br>and Casts                        | Fellow will demonstrate independence in fabrication of a variety of orthoses and casts to address the goals and plan of care for the patient   |
| increased quality of<br>life.  | 6 Orthopedic Trauma and<br>Musculoskeletal Injuries<br>Part 1 | Including but not limited to orthotic<br>design/selection/fitting/fabrication of Finger<br>based orthoses, Hand based orthoses, Forearm<br>based orthoses, Long arm orthoses   |
|  | 7 Orthopedic Trauma and<br>Musculoskeletal Injuries<br>Part 2 | Including but not limited to orthotic<br>design/selection/fitting/fabrication of Dorsal<br>blocking orthosis, Static progressive orthosis,<br>Dynamic orthosis, nerve palsy orthosis   |
|  | 8 Burn, Wounds, and Scars                                     | Fabrication of hand and upper extremity<br>orthoses, and measurement and fitting of interim<br>and custom compression garments   |
|  | 9 Epidermylosis Bullosa                                       | Adaptations activity for nighttime splinting, post-<br>operative dressing changes, compression<br>garments, adaptive tools, techniques (as needed)<br>within specific needs and parameters of EB<br>patients   |
|  | 10 CP Neuro – UE Surgery<br>and Rehabilitation<br>Techniques  | Use serial casting and orthoses (custom and<br>prefabricated Benik and McKee's) for tone<br>management including assessment, clinical<br>reasoning, measurement and or fabrication as<br>appropriate.  |
|  | 11 Congenital Anomalies                                       | Pre-fabricated orthoses such as Benik and McKie,<br>Custom fabricated such as radial gutter thumb<br>spica, syndactyly orthosis, radial gutter orthosis,<br>Plaster and soft cast, Delta cast, thermoplastic as<br>appropriate   |

|                          | 12 NICU                      | Identify indications and contra indications for use |
|--------------------------|------------------------------|---|
|                          |                              | Identify indications and contra-indications for use |
|                          |                              | of orthoses for the neonate or medically complex    |
|                          |                              | infant, Fabricate an orthosis on a neonate or       |
|                          |                              | medically complex infant                            |
|                          | 13 Brachial Plexus Injuries  | High-Five orthosis, SupER Splint, Kinesiotaping     |
|                          |                              | techniques, In addition to UE orthoses utilized in  |
|                          |                              | previous modules                                    |
|                          | 14 Surgical Reconstruction   | Orthoses for High and low Median Nerve injuries,    |
|                          | of Peripheral Nerve Injuries | High and low Radial nerve injuries, and High and    |
|                          |                              | low Ulnar Nerve injuries                            |
|                          | 15 Compression               | Including but not limited to orthotic               |
|                          | Neuropathies, proximal       | design/selection/fitting/fabrication of Finger      |
|                          | nerve conditions, and UE     | based orthoses, Hand based orthoses, Forearm        |
|                          | pain                         | based orthoses, Long arm orthoses                   |
|                          | 16 Vascular Anomalies        |   |
|                          | To vascular Alluillalles     | Measure and fit compression garments and other      |
|                          | 17 Dhoumatals                | upper extremity orthoses as indicated               |
|                          | 17 Rheumatology              | Upper extremity orthoses for the elbow, wrist,      |
|                          |                              | fingers, thumbs, Silver Ring orthoses,              |
|                          |                              | Compression garments                                |
|                          | 18 Hypermobility             | measurement/fitting of orthoses, ie beniks, silver  |
|                          |                              | Ring, UE orthoses for support and function,         |
|                          |                              | compression garments                                |
|                          | 20 Upper Extremity           | Upper extremity orthoses to facilitate return to    |
|                          | Athletes                     | sport   |
|                          | 21 Special Topics            | Including but not limited to orthotic               |
|                          |                              | design/selection/fitting/fabrication of Finger      |
|                          |                              | based orthoses, Hand based orthoses, Forearm        |
|                          |                              | based orthoses, Long arm orthoses                   |
|                          |                              |   |
| Goal 4: Identify ethical | 1 Pediatric Hand Therapy     | Fellow will identify ethical and psychosocial       |
|                          | Fellowship Orientation       | implications associated with the delivery of        |
| implications and         |                              | services and articulate a process for navigating    |
| articulate a process for |                              | throughout the fellowship                           |
| navigating through       |                              |   |
|                          | 2 Normal and Abnormal        | Fellow will identify ethical and psychosocial       |
| client-centered service, | Development                  | implications associated with the delivery of        |
| fiscal and regulatory    |                              | services and articulate a process for navigating    |
| opportunities, scope of  |                              | throughout the fellowship                           |
| practice, and best       | 4 Upper Extremity            | Ethical billing for evaluations, Evaluations within |
| •                        | Evaluation                   | scope of practice, te be carried out through all    |
| model of care to         |                              | patient facing modules                              |
| promote health           |                              |   |
| equity                   |                              |   |
| cquity                   | 6 Orthopedic Trauma and      | Fellow will identify ethical and psychosocial       |
|                          | •                            |   |
|                          | Musculoskeletal Injuries     | implications associated with the delivery of        |
|                          | Part 1                       | services through the use of weekly reflective logs, |
|                          |                              | journaling template and discussion with mentors     |

| 7 Orthopedic Trauma and      | Fellow will identify ethical and psychosocial      |
|------------------------------|--|
| Musculoskeletal Injuries     | implications associated with the delivery of       |
| Part 2                       | services through the use of weekly reflective logs |
|                              | journaling template and discussion with mentors    |
| 8 Burn, Wounds, and Scars    | Fellow will identify ethical and psychosocial      |
| o burn, wounus, and scars    | implications associated with the delivery of       |
|                              | services through the use of weekly reflective log  |
|                              |  |
|                              | journaling template and discussion with mentors    |
| 9 Epidermylosis bullosa      | Fellow will identify ethical and psychosocial      |
|                              | implications associated with the delivery of       |
|                              | services through the use of weekly reflective log  |
|                              | journaling template and discussion with mentors    |
| 10 CP Neuro – UE Surgery     | Fellow will identify ethical and psychosocial      |
| and Rehabilitation           | implications associated with the delivery of       |
| Techniques                   | services through the use of weekly reflective log  |
|                              | journaling template and discussion with mentors    |
| 11 Congenital Anomalies      | Fellow will identify ethical and psychosocial      |
|                              | implications associated with the delivery of       |
|                              | services through the use of weekly reflective log  |
|                              | journaling template and discussion with mentors    |
| 12 NICU                      | Fellow will identify ethical and psychosocial      |
|                              | implications associated with the delivery of       |
|                              | services through the use of weekly reflective log  |
|                              | journaling template and discussion with mentors    |
| 13 Brachial Plexus Injuries  | Fellow will identify ethical and psychosocial      |
|                              | implications associated with the delivery of       |
|                              | services through the use of weekly reflective log  |
|                              | journaling template and discussion with mentors    |
| 14 Surgical Reconstruction   | Fellow will identify ethical and psychosocial      |
| of Peripheral Nerve Injuries | implications associated with the delivery of       |
|                              | services through the use of weekly reflective log  |
|                              | journaling template and discussion with mentors    |
| 15 Compression               | Fellow will identify ethical and psychosocial      |
| Neuropathies, proximal       | implications associated with the delivery of       |
| nerve conditions, and UE     | services through the use of weekly reflective log  |
| pain                         | journaling template and discussion with mentors    |
| 16 Vascular Anomalies        | Fellow will identify ethical and psychosocial      |
|                              | implications associated with the delivery of       |
|                              | services through the use of weekly reflective log  |
|                              | journaling template and discussion with mentors    |
| 17 Rheumatology              | Fellow will identify ethical and psychosocial      |
|                              | implications associated with the delivery of       |
|                              |  |
|                              | services through the use of weekly reflective log  |

|   | 18 Hypermobility<br>19 Shoulder<br>20 Upper Extremity<br>Athletes | Fellow will identify ethical and psychosocial<br>implications associated with the delivery of<br>services through the use of weekly reflective logs,<br>journaling template and discussion with mentors<br>Fellow will identify ethical and psychosocial<br>implications associated with the delivery of<br>services through the use of weekly reflective logs,<br>journaling template and discussion with mentors<br>Fellow will identify ethical and psychosocial<br>implications associated with the delivery of<br>services through the use of weekly reflective logs,<br>journaling template and discussion with mentors |
|---|---|---|
|   | 21 Special Topics   | journaling template and discussion with mentors<br>Fellow will identify ethical and psychosocial<br>implications associated with the delivery of<br>services through the use of weekly reflective logs,<br>journaling template and discussion with mentors  |
| <b>Goal 5:</b> Demonstrate<br>effective<br>communication skills           | 1 Pediatric Hand Therapy<br>Fellowship Orientation                | Fellow will complete quarterly Cornerstone modules through CHCO organization  |
| and ability to work well<br>in collaboration with<br>other professionals, | 4 Upper Extremity<br>Evaluation                                   | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care, and communicate with patient, family, and<br>appropriate providers  |
| patients, families, and<br>community providers<br>to coordinate care for  | 5 Fabrication of Orthoses<br>and Casts                            | Fellow will clearly communicate with<br>patient/family regarding purpose of orthosis,<br>wearing schedule, care and precautions for a<br>variety of upper extremity diagnoses   |
| patients with hand and upper extremity needs.                             | 6 Orthopedic Trauma and<br>Musculoskeletal Injuries<br>Part 1     | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervnetion, and communicate with<br>patient, family, and appropriate providers   |
|   | 7 Orthopedic Trauma and<br>Musculoskeletal Injuries<br>Part 2     | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers   |
|   | 8 Burn, Wounds, and Scars   | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers   |
|   | 9 Epidermylosis Bullosa   | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers   |

|  | Follow will successfully interpret subjective and   |
|--|---|
| 10 CP Neuro – UE Surgery<br>and Rehabilitation<br>Techniques                 | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervnetion, and communicate with<br>patient, family, and appropriate providers |
| 11 Congenital Anomalies  | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers |
| 12 NICU  | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers |
| 13 Brachial Plexus Injuries  | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervnetion, and communicate with<br>patient, family, and appropriate providers |
| 14 Surgical Reconstruction<br>of Peripheral Nerve Injuries                   | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervnetion, and communicate with<br>patient, family, and appropriate providers |
| 15 Compression<br>Neuropathies, proximal<br>nerve conditions, and UE<br>pain | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers |
| 16 Vascular Anomalies  | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers |
| 17 Rheumatology  | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers |
| 18 Hypermobility   | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers |
| 19 Shoulder  | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers |
| 20 Upper Extremity<br>Athletes   | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervention, and communicate with<br>patient, family, and appropriate providers |

| <b>Goal 6:</b> Serve as an ambassador to referral sources and community providers   | 21 Special Topics<br>1 Pediatric Hand Therapy<br>Fellowship Orientation  | Fellow will successfully interpret subjective and<br>objective data from evaluation to guide plan of<br>care and intervnention, and communicate with<br>patient, family, and appropriate providers<br>Fellow will be oriented to hospital, program, and<br>AOTA policies, procedures, guidelines and<br>expectations via training courses and program<br>handbook |
|---|--|---|
| by promotion of<br>occupational therapy<br>intervention and health<br>and wellness as it<br>pertains to<br>occupational therapy<br>and specifically to the<br>specialty of pediatric<br>hand therapy. | 22 Evidence Based Practice,<br>Scholary and Professional<br>Activities   | Fellow will attend monthly hand team meetings   |
| <b>Goal 7:</b> Be prepared to<br>advance the profession<br>of pediatric hand<br>therapy through<br>leadership, evidence-<br>based practice,<br>teaching, research, and<br>generous service.           | 1 Pediatric Hand Therapy<br>Fellowship Orientation<br>22 Evidence Based Practice,<br>Scholary and Professional<br>Activities | Fellow will be oriented to hospital, program, and<br>AOTA policies, procedures, guidelines and<br>expectations via training courses and program<br>handbook<br>Fellow will be able to define 5 sequential steps in<br>the process of Evidence Based Practice  |
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## Pediatric Hand Therapy Program Goals and Supported AOTA N

| Fellow will be oriented to hospital,<br>program, and AOTA policies,<br>procedures, guidelines and expectations<br>via training courses and program<br>handbook   | Fellow will be oriented to EPIC<br>for use of medical records |
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| Primary and Secondary Conditions:<br>Abnormal Development – to include,<br>but not limited to diagnoses such as<br>cerebral palsy, hemiplegia, brachial<br>plexus birth palsy, congenital limb<br>difference, etc. |   |
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| Fellow will be oriented to the CHCO                                    |  |
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| Pediatric Hand Therapy Fellowship                                      |  |
| program, schedule, program goals, primary and secondary diagnoses, and |  |
| expectations for the Fellowship year                                   |  |
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| Fellow will be oriented to site specific |  |
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| quality and safety procedures            |  |
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| Fellow will be oriented to site specific |  |
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| quality and safety procedures            |  |
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| Follow will successfully interact        |  |
| Fellow will successfully interpret       |  |
| subjective and objective data from       |  |
| evaluation to guide plan of care, and    |  |
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| communicate with patient, family, and    |  |
| appropriate providers                    |  |
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| Fellow will be oriented to the CHCO<br>Pediatric Hand Therapy Fellowship<br>program, schedule, program goals,   | Fellow will identify adult<br>learning style and review AOTA<br>Fellowship Program Learning   |
|---|---|
| primary and secondary diagnoses, and expectations for the Fellowship year   | Objectives  |
| Fellow will attend/present at a local,<br>regional, or national<br>meeting/conference   | Fellow will participate in 2<br>educational or advocacy<br>activities on diagnosis of their<br>choice to be administered in-<br>house or in the community |
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| Fellow will be oriented to the CHCO<br>Pediatric Hand Therapy Fellowship<br>program, schedule, program goals,<br>primary and secondary diagnoses, and<br>expectations for the Fellowship year | Fellow will identify adult<br>learning style and review AOTA<br>Fellowship Program Learning<br>Objectives   |
| Fellow will complete one AOTA article<br>appraisal form per quarter on article of<br>their choosing   | Fellow will lead the hand<br>therapy team in the review of<br>an article in one quarterly<br>journal club   |
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| Fellow will be oriented to site specific quality and safety procedures | Fellow will identify adult learning<br>style and review AOTA Fellowship<br>Program Learning Objectives | Fellow will identify ethical and<br>psychosocial implications<br>associated with the delivery of<br>services and articulate a process<br>for navigating throughout the<br>fellowshin |
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| Fellow will participate in at least 1 |                                 |                                     |
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| community service opportunity by the  |                                 |                                     |
| end of the program year               |                                 |                                     |
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| Fellow will attend monthly hand team  | Fellow will attend/present at a | Fellow will participate in at least |
| meetings                              | local, regional, or national    | 1 community service                 |
|                                       | meeting/conference              | opportunity by the end of the       |
|                                       |                                 | program year                        |
|                                       |                                 |                                     |
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| Fellow will complete<br>quarterly Cornerstone<br>modules through CHCO<br>organization (see examples | Acknowledgement of<br>training on<br>organizational<br>/programmatic |
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| below)  | policies, procedures<br>and expectations                             |
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