

Name: _____

Date: _____



STAMBUSH
STAFFING

Physical Therapist Skills Checklist

Experience Level

A – No experience

B – Intermittent experience

C – One year consistent experience

D – Two year consistent experience

E – Able to teach and supervise

F – Last time you performed this function (e.g. last month, last year, daily, weekly, daily as needed, N/A)

Work Setting

	A	B	C	D	E	F
Rehabilitation Hospital						
General Acute Care						
Children’s Hospital						
School System						
Home Health Care						
Outpatient Clinic						
Sports Medicine						
Work Hardening						
Nursing Home						
Skilled Nursing Facility						
Comprehensive Outpatient Rehab Facility (CORF)						
Psychiatric Hospital						

Orthopedic

	A	B	C	D	E	F
Back Syndromes						
Hip Fractures						
Total Upper Joint Replacement						
Total Hip Replacement						
Hand Injury						
TMJ						
Arthritis Programs						
Mobilization Techniques						
Manual Therapy Techniques						
Taping/Strapping						

Neurological

	A	B	C	D	E	F
Stroke Rehabilitation						
Head Trauma						
Spinal Cord Injury						
Functional Splinting						

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Adaptive Equipment						
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Pediatrics

	A	B	C	D	E	F
Neurodevelopmental Testing						
Disability Sequence Test						
Orthotics						
Adaptive Equipment						
Activities of Daily Living						

Modalities

	A	B	C	D	E	F
CPM						
Whirlpool						
Hubbard Tank						
Therapeutic Pool						
Biofeedback						
TENS						
Muscle Stimulation						
Ultrasound						
Diathermy						
Cryotherapy						
Acupuncture						
Cervical Traction						
Massage						
Wound Dressing						

Prosthetics/Orthotics

	A	B	C	D	E	F
Above-knee Prosthetics						
Below-knee Prosthetics						
Orthoplast						
Upper Extremity Prosthetics						
Resting Splints						
Dynamic Splints						
Ankle-foot Orthosis						

Other

	A	B	C	D	E	F
Work Capacity Evaluation						
Functional Capacity Evaluation						
Feldenkrais						
Cardiac Rehabilitation						
Chest Physiotherapy						