Doc. 300.1.2

Date: 3.11.2025

Higher Education Institution's Response

- **Higher Education Institution:**
  European University Cyprus, School of Medicine-Frankfurt Branch
- **Town:** Frankfurt, Germany
- **Programme of study**
  Name (Duration, ECTS, Cycle)

  In Greek:
  "Φυσικοθεραπεία (4 Έτη / 240 ECTS, Πτυχίο)"

  In English:
  "Physiotherapy (4-Years, 240 ECTS, B.Sc.)"
- **Language(s) of instruction:** English
- **Programme's status:** New
- **Concentrations (if any):**

  In Greek: Concentrations
  In English: Concentrations

The present document has been prepared within the framework of the authority and competencies of the Cyprus Agency of Quality Assurance and Accreditation in Higher Education, according to the provisions of the "Quality Assurance and Accreditation of Higher Education and the Establishment and Operation of an Agency on Related Matters Laws" of 2015 to 2021 [L.136(I)/2015 – L.132(I)/2021].

A. Guidelines on content and structure of the report

- *The Higher Education Institution (HEI) based on the External Evaluation Committee's (EEC's) evaluation report (Doc.300.1.1 or 300.1.1/1 or 300.1.1/2 or 300.1.1/3 or 300.1.1/4) must justify whether actions have been taken in improving the quality of the programme of study in each assessment area. The answers' documentation should be brief and accurate and supported by the relevant documentation. Referral to annexes should be made only when necessary.*

- *In particular, under each assessment area and by using the 2nd column of each table, the HEI must respond on the following:*

    - *the areas of improvement and recommendations of the EEC*
    - *the conclusions and final remarks noted by the EEC*

- *The institution should respond to the EEC comments, in the designated area next each comment. The comments of the EEC should be copied from the EEC report **without any interference** in the content.*

- *In case of annexes, those should be attached and sent on separate document(s). Each document should be in *.pdf format and named as annex1, annex2, etc.*

1. Study programme and study programme's design and development
(ESG 1.1, 1.2, 1.7, 1.8, 1.9)

Areas of improvement and recommendations **by EEC**	Actions Taken by the Institution	For Official Use ONLY
Recommendation 1: Development of a formal Advisory Board for the student committee. If this is in-place, this was not known by the student's interviewed in the on-site visit so making them aware of this would be advantageous for the Physiotherapy programme. The panel commended the 'open-10 door' policy which the team repeated acknowledge, but this more formal approach could be advantageous.	We appreciate the panel's recommendation regarding the establishment and communication of a formal Advisory Board for the student committee. While the program maintains an "Open Door Policy" that encourages students to engage freely with faculty and staff, we recognize the value of formalized structures to further support transparency and student representation. In addition to the "Open Door Policy," the School and the Physiotherapy Program have established formal mechanisms for students to voice their perspectives and concerns. Each academic year elects a student representative who serves as the spokesperson for their year cohort. Furthermore, an overall student representative is elected to represent all cohorts collectively. These representatives serve as official members of the Program's Advisory Board and participate actively in the Program Evaluation and Review (PER) process, contributing to continuous quality improvement. Beyond the program level, Physiotherapy students, as members of the School of Medicine-Frankfurt Branch, are also engaged in broader ad hoc School committees—such as the Structure and Function Committee and the Clinical Training Committee—providing them with meaningful opportunities to influence academic and operational matters. Each student is also assigned an Academic Advisor, a full-time faculty	Choose level of compliance:

	member who provides individualized guidance on academic performance, professional development, and overall well-being throughout the duration of the program. We thank the panel for highlighting the importance of clear communication regarding these structures. We fully agree that improved dissemination of information will ensure that all students are aware of their representation channels and participation opportunities. To this end, the students of the new Physiotherapy program will be informed, as all School of Medicine Students, through New Student Orientation sessions, and regular updates to ensure complete transparency and engagement.	
Recommendation 2: Interprofessional practice and learning – the panel recommend the team consider delivering teaching with medical and physiotherapy students (and other professionals when these are introduced to programmes in Frankfurt) together. Professionalism, communication and transferable skills could be delivered together, in addition to some foundation-level education on anatomy, physiology and psychology. The panel recommend the team consider how they implement this together. The team have the opportunity for this in Frankfurt, but the recommendation here is to make full use of this to enhance the student experience.	The Physiotherapy Program at the School of Medicine-Frankfurt Branch will be situated within the School of Medicine, which provides an excellent framework for fostering Interprofessional Education (IPE). This structure enables meaningful collaboration between Physiotherapy and Medical students, with further opportunities to engage other health-related disciplines as they are introduced on campus. Recognizing the importance of interprofessional collaboration in modern healthcare, we are committed to strengthening IPE within the Physiotherapy curriculum. Building on the foundation already established within the Medical Doctor (M.D.) program, Physiotherapy students will participate in shared learning experiences focused on professionalism, communication, and transferable skills.	Choose level of compliance:

	In alignment with the External Evaluation Committee's recommendation, we have revised the curriculum and are implementing a dedicated **course on Interprofessional Education "Inter-professional Practice in Healthcare"**, designed to promote collaborative competencies among future healthcare professionals. This new course, centered on interprofessional communication, complements the existing foundational modules in anatomy, physiology, and psychology. Please see **Appendix I Curriculum & Syllabi, p.75**. In addition to a dedicated IPE course, principles of interprofessional practice including topics, such as professionalism and teamwork are included in courses such as: PHY215 (Legal, bioethical & Ethical Issues in Physiotherapy (pg50), PHY350 Physiotherapy of Special Population Groups (pg111), (PHY345) Clinical Practice II (pg106) (PHY415) and Clinical Practice III (pg125). Areas of syllabi that include interprofessional practice are highlighted in yellow. Moreover, cased-based discussions and other collaborative exercises that take place toward the end of the semester in Cardiorespiratory and Pulmonary Physiotherapy, Neurological Physiotherapy, Musculoskeletal Physiotherapy**,** as well as Clinical Training. Include discussions of interprofessional principles such as accountability and understanding professional boundaries, while respecting team contributions are threaded throughout discussions. Through these initiatives, the Physiotherapy program will make full use of its interprofessional learning	

	environment to enhance both the student experience and the quality of clinical education, ensuring that graduates are well prepared for collaborative healthcare practice.	
Recommendation 3: The panel recommend that the team review the allocation for some elements of the programme. The team reported the aspiration to be research-led. The programme should reflect this, in addition to the internationalism for student future work-place opportunities. Accordingly, the panel recommend elements such as electrotherapy should be focused and reduced. Currently, in this area, this is taught across three modules. The panel recommend this is covered in one module (for example) with time used for other important elements within the curriculum. The re-allocation of time to cover, in greater depth, should include: (1) communication; (2) clinical reasoning; (3) exercise prescription.	We appreciate the panel's recommendation to review the allocation of certain elements within the Physiotherapy curriculum to ensure alignment with our aspiration to be an internationally oriented program. In response, we have undertaken a comprehensive review of course content and structure to optimize learning outcomes and reinforce key competencies in communication, clinical reasoning, and exercise prescription. Following the committee's recommendation, the Electrotherapy content has been streamlined and consolidated into a single module, now titled "**Physical Modalities & Electrotherapy"** (**Appendix I** p.54). This restructuring not only enhances curricular efficiency, but also provides the opportunity to introduce new and essential components, including a dedicated course on Interprofessional Education (IPE) (please see response above) and a separate course on **Communication Skills in Physiotherapy** (**Appendix I** p.70). We also replaced the Ergotherapy course with a course on "**Academic Skills for Physiotherapists"** as per the EEC's comments and recommendations (**Appendix I** p.13). This course not only introduces core academic skill and knowledge in the first semester but also acts as an introduction to the role of physiotherapists, interprofessional	Choose level of compliance:

	communication, and evidence-based practice. In addition to the standalone Communication Skills course, communication competencies are systematically embedded throughout the program. They are introduced in the first year through Health Psychology and are progressively reinforced in subsequent courses that address basic treatment skills, therapeutic techniques, advanced clinical subjects, and clinical practice placements. This spiral integration ensures consistent development and practical application of professional communication in various clinical contexts. Similarly, clinical reasoning is introduced early in the program through small case studies, modified problem-based learning, and critical analysis of research papers and projects. These foundational skills are further developed and refined in the Clinical Practice courses and in advanced modules during the third and fourth years, enabling students to make evidence-informed clinical decisions. The principles of exercise prescription are covered in three distinct but complementary courses—Kinesiotherapy, Ergophysiology and Neuromuscular Re-education. In accordance with the recommendations of the Advisory Board and the requirements of the Cyprus Physiotherapist and Physiotherapy Registry Law, these courses will remain separate. The practical application of exercise prescription is subsequently integrated across the curriculum, including in Physiotherapy of the Musculoskeletal System I–III, Cardiorespiratory Physiotherapy,	

	Physiotherapy for Special Populations, Neurological Physiotherapy I & II, Sports Physical Therapy**,** and during Clinical Practice I-III**.** [please refer to **Appendix I**; areas of syllabi that introduce clinical reasoning activities are highlighted in green (pages 39-41, 45-48, 58-59, 61-63, 65-65, 78-79, 81-83 ,84-85, 88-90, 95-97, 106-109, 112-116, 117-119, 122-123,126-128), and areas of syllabi that underscore the principles exercise are highlighted in blue (pages 39-41, 45-48, 58-59, 61-63, 65-65, 78-79, 81-83 ,84-85, 88-90, 95-97, 106-109, 112-116, 117-119, 122-123,126-128).	

2. Student – centred learning, teaching and assessment
(ESG 1.3)

Areas of improvement and recommendations **by EEC**	Actions Taken by the Institution	For Official Use ONLY
Recommendation 1: There is a suggestion on moving the evidence-based practice and reflective practice earlier in the programme within Year 1.	We appreciate the panel's recommendation regarding the early introduction of evidence-based and reflective practice within the Physiotherapy program. We fully agree that developing these competencies from the outset is fundamental for fostering critical thinking, professional reasoning, and lifelong learning among students. Evidence-based practice is already a core principle embedded throughout the Physiotherapy curriculum and is developed progressively across all four years of study. The foundation is established in the first year through courses addressing ethics, legal aspects, and fundamental research concepts, which help students understand the importance of scientific inquiry in clinical decision-making. This foundation is further strengthened in subsequent years through the analysis of research literature, case-based learning, and small-scale research projects that encourage the integration of evidence into clinical reasoning. In the advanced stages of the program, evidence-based practice is applied extensively within the clinical training modules, where students are required to critically appraise current research and apply it to patient management. This approach ensures that graduates are able to make informed, research-supported clinical decisions consistent with modern physiotherapy standards. Reflective practice is similarly embedded throughout the curriculum. It is introduced early during laboratory sessions and foundational clinical application courses,	Choose level of compliance:

	encouraging students to evaluate their performance and identify areas for improvement. As students progress into clinical placements, reflective practice becomes an integral component of their professional development, supporting continuous self-assessment and growth in competence and confidence. Through this structured and progressive approach, the program ensures that both evidence-based and reflective practices are not confined to isolated modules but are integrated throughout the entire learning journey, reinforcing their importance as essential elements of contemporary physiotherapy education and practice.	
Recommendation 2: Consideration on the allocation of an 'independent' named person who is a point of contact for students to make complaints or concerns regarding academic performance and assessment evaluation. If this is in-place currently, this should be more clearly presented.	We appreciate the EEC's recommendation regarding the establishment and clarification of a designated point of contact for students to raise concerns or complaints related to academic performance and assessment. The program already has in place a structured system of academic and clinical advising that provides continuous guidance, support, and oversight throughout the students' studies. Each student is assigned an **Academic Advisor** from the first semester and beginning of the program through the pre-clinical years. Academic Advisors are full-time faculty members who are responsible for assisting students in setting realistic educational and professional goals consistent with their abilities and career aspirations. They also ensure that students are informed about all relevant university policies, academic regulations, and available support services. During the clinical phase of the program, students are assigned a **Clinical**	Choose level of compliance:

	Training Advisor. These advisors, also full-time faculty members, monitor each student's progress during clinical training, ensuring that all academic and administrative requirements are met. Their responsibilities include reviewing evaluations and grades, confirming completion of graduation prerequisites, and supporting students in organizing and updating clinical rotation schedules. Students are required to maintain regular contact with their Clinical Training Advisor throughout their clinical placements until graduation. In addition to these formal advising roles, students have direct access to course instructors during scheduled office hours, as well as to the Program Coordinator, Department Chairperson, and Dean. This **open-door policy** ensures that students can seek guidance or express concerns freely at any stage of their academic journey. Through this multi-tiered advising structure, the program ensures that every student has clear and accessible channels for academic support and for raising concerns related to performance or assessment. The roles and responsibilities of these advisors are clearly defined and communicated to students at the beginning of their studies, ensuring transparency and accessibility within the support system.	
Recommendation 3: The panel recommend the student consider adopting a formal Problem-Based Learning model for Year 3 and 4.	We would like to clarify that while a fully traditional Problem-Based Learning (PBL) model may not be entirely suitable for an international physiotherapy program such as ours—primarily due to international transfer policies, regulatory, and cohort-related considerations—we have deliberately embedded a **Modified Problem-Based Learning (M-**	

	PBL) approach throughout our curriculum. Our M-PBL approach is integrated within the courses themselves rather than delivered as a standalone component. It operates in a case-based learning format, allowing students to engage with realistic clinical scenarios that encourage a multidisciplinary and integrative approach to learning**.** Through this model, students are required to synthesize knowledge from different subject areas, apply clinical reasoning, and develop critical thinking and problem-solving skills that are essential for professional physiotherapy practice. However, given the international composition of our student cohort that we anticipate at our Frankfurt Campus and the potential for student transfers, we have found that a more structured and guided program design is pedagogically more elastic, and hence effective. This framework ensures consistency in meeting the national educational standards and regulatory requirements in several countries, including Germany, which emphasize clearly defined competencies, structured learning objectives, and prescribed practical training hours. Additionally, it aligns with the expectations of our clinical partners, who value a coherent, instructor-supported approach that ensures readiness for professional clinical practice. Nevertheless, our commitment to the educational principles underpinning PBL remains strong. We continue to apply M-PBL as a core pedagogical strategy within this structured framework, ensuring that students benefit from the active learning, analytical thinking, and self-directed inquiry that characterize the PBL philosophy. As noted during the onsite	

	visit, this approach is supported by dedicated learning spaces designed to facilitate small-group discussions and interactive, problem-oriented sessions. In summary, while our program retains a structured framework aligned with national and international standards, Modified Problem-Based Learning remains a central, embedded feature of our teaching methodology—ensuring that our graduates develop both the disciplinary competence and the critical, reflective mindset essential for modern physiotherapy practice.	
Recommendation 4: The panel recommend that the team provide a clearer documentation of the practical (hands-on) time and theory time within the module descriptors.	Documentation of both theoretical and practical (hands-on) contact hours per week is is indicated in each course syllabus. These are freely accessible on the university website, https://euc.ac.cy/en/ and provided to students at the start of each course where they are uploaded to the Blackboard learning platform of each course. Each syllabus, in accordance with CY.Q.A.A. regulations, clearly indicates the contact hours allocated to lectures and practical training, as well as the corresponding learning outcomes and assessment methods. In addition, a detailed Course Outline is provided to students on the first week at the beginning of each semester. The Course Outline specifies the laboratory activities of each week, and the integration of theoretical and practical components. The course outline clearly specifies the number of hours in theory and laboratory time points for assessments (these have been highlighted in yellow in the sample Course Outline provided in **Appendix II.)** A summary of the distribution of theoretical and practical hours across all semesters is included in **Appendix III**.	

	This overview demonstrates a balanced and progressive integration of theoretical instruction and hands-on experience**,** with the proportion of practical components increasing steadily as students advance through the program. Early semesters emphasize foundational theory and introductory clinical skills, while later semesters focus on advanced clinical practice, case-based learning, and supervised internships**,** reflecting the growing autonomy and professional readiness expected of students nearing graduation. In general, this overview reflects a structured and progressive approach to learning, where theoretical knowledge is gradually complemented by increasing levels of practical engagement. Early semesters emphasize foundational theory and introductory skills, while later semesters focus on advanced clinical practice, case-based learning, and supervised internships. This structured documentation ensures that students, faculty, and clinical partners have a clear understanding of the balance between theoretical instruction and hands-on training throughout the duration of the program.	
Recommendation 5: The panel suggest that the team consider formally including patients/people with lived experience of medical conditions within the early teaching programme so students have the opportunity to this early in their training.	The EUC School of Medicine–Frankfurt Branch currently utilizes standardized patients for teaching and assessment purposes, and this approach will apply to the Physiotherapy program, as well. Standardized patients will be incorporated into early and intermediate courses such as Neuromuscular Re-education, Cardiorespiratory and Pulmonary Rehabilitation, Musculoskeletal Physiotherapy, Sports Physiotherapy, Neurological Physiotherapy, and Physiotherapy for Special Populations. These sessions will	

	take place in the School's standardized patient rooms, which include dedicated observation and debriefing spaces that facilitate guided discussion and reflective learning, as observed during the site visit. This structured approach allows students to engage with realistic clinical scenarios from the early stages of their training, promoting the development of communication skills, empathy, and professional behaviour while reinforcing theoretical knowledge through practical, patient-centered experiences.	
Recommendation 6: The Cyprus accrediting regulation requires each student to spend out of the minimum 1000 hours in total, a minimum of 600 hours should be within a hospital-based setting. This should be clearly defined within the documentation.	This requirement is fully detailed in the Clinical Training Manual (**Appendix IV,** p. 15-16), which outlines the structure, objectives, and placement requirements of the practical training component. The program design ensures alignment with both Cyprus and German legislative frameworks. The duration of the clinical training is a minimum of 26 weeks, providing 1,040 hours of clinical training above that accumulated in the Clinical Practice I, II and III. Of this, at least 600 hours are spent in one or more hospitals. The remaining 440 hours are distributed between one or more hospitals, registered physiotherapy establishments, physiotherapy centers, hospitals, or rehabilitation centers. (**Appendix I,** pg 136) This is compliant with Cypriot regulations, as per - Ο περί Εγγραφής Φυσιοθεραπευτών (Τροποποιητικός) Νόμος του 2021 (Ν. 52(Ι)/2021) Ε.Ε., Παρ.Ι(Ι), Αρ.4829, 14/4/2021 (please see **Appendix V**). The number of weeks of clinical training are adjusted according to legislation requirements to be eligible to register.	

	Specifically, the duration of clinical training in Germany will be 28.5 weeks, providing 1,140 hours of clinical training. Of this, at least 600 hours are spent in one or more hospitals. The remaining 540 hours are distributed between one or more hospitals, registered physiotherapy establishments, physiotherapy centers, hospitals, or rehabilitation centers. Including the clinical training hours accumulated in the Clinical Practice I, II and III (462 hours), the total clinical training is 1,602 hours for Germany. The main fields of clinical training are cardio-respiratory, neurological and musculoskeletal physiotherapy, in various populations. Disciplines include: surgery, internal medicine, orthopaedics, neurology, paediatrics, psychiatry, gynaecology, among others. This is compliant with German regulations, as per – Ausbildungs - und Prüfungsverordnung für Physiotherapeuten vom 6. Dezember 1994 (BGBl. I S. 3786), die zuletzt durch Artikel 10 der Verordnung vom 7. Juni 2023 (BGBl. 2023 I Nr. 148) geändert worden ist. (please see **Appendix VI**). Clinical training coordinators have at least 5 years postgraduate experience and is a permanent member of the staff in the clinical setting. As through the policy of the School of Medicine-Frankfurt Branch, train-the-trainer sessions will be held to inform clinical trainers of the programs educational practices. Following these guidelines, all graduates of the program will meet the requirements to register with the Cyprus council of Physiotherapy.	
Recommendations 7: A clear documentation of the assessment timetable (formative and summative) for both students in the	A detailed description of the timetable of summative assessments is provided to students at the beginning of each semester on the Course Outline (see Appendix II, highlighted in yellow). The	

syllabus/manuals but also for reviewers of future accreditation so it is clearly documented how assessments feed-forwards.	course outline which is uploaded on blackboard for each course, clearly indicates the type, timing, and weighting of each assessment, including small tests, midterm examinations, final examinations, and project submissions. All major examinations (midterms and finals) are scheduled on the same dates across both the main campus and the Frankfurt branch to ensure consistency, fairness, and the prevention of academic misconduct. Final examination periods follow the official university examination calendar and are defined by the Office of the Vice Rector of Academic Affairs. Students are given the opportunity to review their graded projects, tests, and midterm examinations with instructors. Feedback is provided both in written form via the Blackboard platform and through individual or group discussions during scheduled office hours. This approach ensures that feedback serves a feed-forward function, supporting student reflection and performance improvement in subsequent assessments. Formative assessments are integrated throughout the courses to monitor ongoing learning and skill acquisition. While not fixed to a central timetable, their design, timing, and mode of feedback are determined by individual instructors to best suit the learning outcomes and instructional methods of each module. This flexible approach encourages continuous engagement, promotes self-directed learning, and reinforces the constructive use of feedback as an integral part of the learning process.	

3. Teaching staff
(ESG 1.5)

Areas of improvement and recommendations **by EEC**	Actions Taken by the Institution	For Official Use ONLY
Recommendation 1: The external stakeholders recommend the need to ensure that faculty members have specialist clinical skills to ensure student's are exposed to advance knowledge for example manual therapies taught by someone with musculoskeletal accredited manual therapy skills. The panel recommend that the team consider in their recruitment strategy, the employment of faculty which have musculoskeletal, cardiovascular and neurology clinical expertise either as faculty members and/or clinical faculty members. The panel recommend the consider recruitment of double-profile academic i.e. those who have an active clinical case-load, whilst also teaching on the programme. This would offer students with strong linkage to current practice-based teaching.	We fully agree with this recommendation, which is consistent with our ongoing recruitment strategy. Our goal is to ensure that faculty members possess specialized clinical expertise to provide students with exposure to advanced and evidence-based practice. This includes the recruitment of physiotherapists specialized in areas such as manual therapy, musculoskeletal rehabilitation, neurological physiotherapy, pediatric physiotherapy, and cardiopulmonary physiotherapy. This approach is already established at the main campus and represents a key priority for faculty appointments at the School of Medicine-Frankfurt Branch. In general, faculty members are encouraged to contribute across multiple modules where their expertise is relevant. For instance, a physiotherapist specializing in biomechanics may teach both the Biomechanics and Kinesiology courses, while a specialist in manual therapy may also deliver instruction in Musculoskeletal Physiotherapy. This approach ensures pedagogical coherence and deepens students' understanding through the integration of clinical and theoretical perspectives. We also actively support the recruitment of double-profile academics—faculty members who combine academic responsibilities with ongoing clinical practice. This model, already implemented at the main campus, enables instructors to bring current, real-world clinical experiences	Choose level of compliance:

	directly into the classroom. It fosters a dynamic learning environment that emphasizes practical relevance, contemporary clinical standards, and evidence-based reasoning. Our continued objective is to maintain a balanced team that includes both clinically active faculty and academically focused instructors, ensuring a comprehensive and practice-oriented education that aligns with the expectations of modern physiotherapy training.	

4. Student admission, progression, recognition and certification
(ESG 1.4)

Areas of improvement and recommendations **by EEC**	Actions Taken by the Institution	For Official Use ONLY
Recommendation 1: The team are encouraged to consider whether there could be additional scope for students to 'elect' to study topics of interest at the latter part of the course. This would provide students with more empowerment on their development, particularly near the end of the programme, in preparation for both clinical practice and post-graduate clinical working.	We agree with the EEC that providing an addition scope for students to elect study topics of interest would be beneficial. Students have the opportunity to select two free elective courses from other health science programs (with equivalent ECTS), including: BMS100 (Introduction to Human Biology), HLS100 (Academic Skills), BMS145 (Applied Biostatistics), BMS205 (Basic Epidemiology), BMS225 (Biotechnology), BMS250 (Bioethics and Scientific Integrity), HEA (Research Methodology in Health Sciences), BMS440 (Proactive Aging and Regenerative Medicine), from the Biomedical Sciences (B.Sc.) program and NUT100 (Introduction to Nutrition), HEA170 (Information Technology for Health Sciences), PSY105 (Health Psychology), and NUT345 (Sports Nutrition I) from the Nutrition and Dietetics B.Sc. program. In addition, during clinical practice, students are encouraged to express their fields of interest, and we strive to accommodate them in hospitals, clinics, or rehabilitation centers, allowing them to gain experience in their preferred areas, within the limits of existing legislation. Students also have the opportunity to participate in the ERASMUS+ program, completing internships—ideally during the summer—in areas aligned with their individual interests.	Choose level of compliance:

5. Learning resources and student support

(ESG 1.6)

Areas of improvement and recommendations **by EEC**	Actions Taken by the Institution	For Official Use ONLY
Recommendation 1: None. This was a very positive area.	N/A	Choose level of compliance:

B. Conclusions and final remarks

Conclusions and final remarks **by EEC**	Actions Taken by the Institution	For Official Use ONLY
The panel acknowledge this accreditation is based on the notion that the Frankfurt team are 'transporting' an already accredited programme from Nicosia into a German context. This duplication means the programme is accredited but there are strong recommendations to enhance and develop the programme. We recommend the team review these recommendations, particularly in light of the forthcoming Nicosia programme review. The recommendations are largely around curriculum content and re-design which we hope are helpful. The panel are reassured that whilst the team are taking expertise from the medical programme in Frankfurt, there is a need to ensure that diverse physiotherapy expertise is recruited to support students on this programme. Recruiting such an experienced faculty, particularly with German representation, is encouraged. We, as a panel, look forward to seeing these recommendations put into practice.	We thank the External Evaluation Committee for their constructive and insightful final remarks. We acknowledge and appreciate the recognition that the Frankfurt Physiotherapy Program is based on the accredited University of Nicosia curriculum, adapted to the German educational and professional framework. This alignment provides a strong foundation for academic quality, while also allowing the program to evolve in response to local regulatory and professional requirements. We value the Committee's recommendations for ongoing enhancement and curriculum development. Our goal is to ensure that the program maintains consistency in academic standards while also reflecting the evolving needs of the international physiotherapy profession. We also fully support the Committee's emphasis on the recruitment of diverse and highly qualified faculty. In particular, we are committed to strengthening our team with experts representing all major physiotherapy specializations and with active professional experience in the German healthcare system. This will ensure that students benefit from a learning environment that is both academically rigorous and clinically relevant.	Choose level of compliance:

	The program remains committed to excellence in physiotherapy education, to fostering international collaboration, and to ensuring that our graduates are fully prepared to contribute effectively to contemporary clinical practice across a range of settings. We thank the Committee once again for their valuable feedback and look forward to continued engagement as we implement these recommendations and further enhance the quality and impact of the program.	

Observations Regarding Legislation

Specific observations related to the legislation governing this profession	Actions Taken by the Institution	For Official Use ONLY
1. With regards to professional legislation in order to get registration a graduate needs to have 1000 hours of supervised clinical placement. At least 600 hours have to be done in a hospital setting and 400 hours either in a hospital or private practice. 2. The clinical placement has to cover three areas of Musculoskeletal Neurology and Cardiorespiratory Physiotherapy. 3. The clinical coordinator needs to have at least 5 years of postgraduate experience and in the clinical setting the clinical coordinator has to be a permanent member of the staff. 4. The university is aware of the regulations and made collaborations with a respectful number of clinics and clinical practises in Frankfurt in order to educate their students when they have to do their placement. Graduates of this course will be able to register with the Cyprus council of Physiotherapy.	1. The Clinical Training Manual (**Appendix IV,** p. 15-16), outlines the structure, objectives, and placement requirements of the practical training component. The program design ensures alignment with both Cyprus and German legislative frameworks. The duration of the clinical training is a minimum of 26 weeks, providing 1,040 hours of clinical training above that accumulated in the Clinical Practice I, II and III. Of this, at least 600 hours are spent in one or more hospitals. The remaining 440 hours are distributed between one or more hospitals, registered physiotherapy establishments, physiotherapy centers, hospitals, or rehabilitation centers. (**Appendix I,** page 118). This is compliant with Cypriot regulations, as per - Ο περί Εγγραφής Φυσιοθεραπευτών (Τροποποιητικός) Νόμος του 2021 (N. 52(I)/2021) Ε.Ε., Παρ.Ι(Ι), Αρ.4829, 14/4/2021 (please see **Appendix V**). The number of weeks of clinical training are adjusted according to legislation requirements to be eligible to register. Specifically, the duration of clinical training in Germany will be 28.5 weeks, providing 1,140 hours of clinical training. Of this, at least 600 hours are spent in one or more hospitals. The remaining 540 hours are distributed between one or more hospitals, registered physiotherapy	Choose level of compliance:

	establishments, physiotherapy centers, hospitals, or rehabilitation centers. Including the clinical training hours accumulated in the Clinical Practice I, II and III (462 hours), the total clinical training is 1,602 hours for Germany. 2. The main fields of clinical training are cardio-respiratory, neurological and musculoskeletal physiotherapy, in various populations. Disciplines include: surgery, internal medicine, orthopaedics, neurology, paediatrics, psychiatry, gynaecology, among others (**Appendix IV,** p. 16). This is compliant with German regulations, as per – Ausbildungs - und Prüfungsverordnung für Physiotherapeuten vom 6. Dezember 1994 (BGBl. I S. 3786), die zuletzt durch Artikel 10 der Verordnung vom 7. Juni 2023 (BGBl. 2023 I Nr. 148) geändert worden ist. (please see **Appendix VI**). 3. Clinical training coordinators have at least 5 years postgraduate experience and is a permanent member of the staff in the clinical setting (**Appendix IV,** p. 12). 4. As through the policy of the EUC School of Medicine-Frankfurt Branch, train-the-trainer sessions will be held to inform clinical trainers of the programs educational practices. Following these guidelines, all graduates of the program will meet the requirements to register with the Cyprus council of Physiotherapy.	

C. Higher Education Institution academic representatives

Name	*Position*	*Signature*
Prof. Elizabeth Johnson	Dean School of Medicine, EUC Main Campus & School of Medicine–Frankfurt Branch	
Dr. Irene Polycarpou	• Chairperson, Department of Health Sciences, EUC Main Campus • Interim Co-Chairperson of the Department of Life and Health Sciences, School of Medicine–Frankfurt Branch	
Dr. Maria Ioanna Chrystodoulou	• Chairperson, Department of Life Sciences, EUC Main Campus • Interim Co-Chairperson of the Department of Life and Health Sciences, School of Medicine–Frankfurt Branch	
Dr. Antonis G. Constantinou	Programme Coordinator, EUC Main Campus & School of Medicine–Frankfurt Branch	
Dr. Anna Freund	Programme Co-Coordinator, School of Medicine–Frankfurt Branch	

Date: 3/11/2025

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European University Cyprus

Appendix I – Curriculum & Syllabi

INDEX

Course Title	Health Psychology				
Course Code	PSY105				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	1st Year/ 1st semester				
Teacher's name	Styliani Voulgaropoulou				
ECTS	6	Lectures / week	3 hours / 14 weeks	Laboratories / week	None
Course Purpose and Objectives	The course aims to help students understand key theoretical and research-based issues in health psychology. It encourages awareness of how healthy behaviours and scientifically supported coping strategies can improve well-being and manage everyday stress. Additionally, it introduces students to the role of health psychologists in clinical and therapeutic settings, such as hospitals and rehabilitation centers.				
Learning Outcomes	**Upon successful completion of the course, students will be able to:** • Recognize key theories related to the biopsychosocial model and distinguish between acceptable and problematic behaviors. • Apply established therapeutic strategies for individuals experiencing psychological or psychosomatic issues. • Analyze and compare traditional and modern models of health-related behaviors. • Identify and evaluate health standards using behavior assessment tools discussed in class. • Develop personalized action plans aimed at recognizing health habits and managing unhealthy behaviors. • Propose realistic behavior changes to enhance quality of life. • Explain how interpersonal relationships influence the development of functional or dysfunctional personality traits. • Understand fundamental concepts of sexual health and related aspects of human functioning.				
Prerequisites	None	Co-requisites	None		
Course Content	This course is designed to deepen students' understanding of health psychology by combining theoretical insight with applied knowledge. Through lectures, discussions, and practical experiences, students will learn to evaluate the effectiveness of psychotherapeutic approaches in managing health-related psychological challenges.				

	Key Topics Include: • Introduction to Health Psychology and its scope • Overview of major body systems relevant to health behavior • Defining and promoting healthy living and its real-life applications • Everyday stress: causes, effects, and coping strategies • The patient experience within healthcare settings • Psychological and behavioral approaches to pain management • Understanding and supporting individuals with chronic illnesses • Psychological aspects of cardiovascular disease, hypertension, stroke, and diabetes • Psychoneuroimmunology: mind-body interactions in AIDS, cancer, and arthritis • Current trends and the evolving role of health psychology • The relationship between psychotherapy and physical health • Mental health in older adults • Psychological impacts of divorce and approaches to care The course prepares students to critically assess and apply health psychology methods in both clinical and everyday contexts.
Teaching methodology	Face to face
Bibliography:	Folkman, S. & Greer, S., 2020. Understanding Health Behavior: Psychosocial Perspectives for Health Professionals. 2nd edition. Jones & Bartlett Learning. Grant, J., 2023. Neuropsychology: A Clinical Approach. 2nd edition. Routledge. Lezak, M.D., Howieson, D.B., Bigler, E.D. & Tranel, D., 2012. Neuropsychological Assessment. 5th edition. Oxford University Press. Myers, D.G., 2021. Psychology. 13th edition. Worth Publishers. Schacter, D.L., Gilbert, D.T. & Wegner, D.M., 2012. Psychology. 3rd edition. Worth Publishers. Taylor, S.E., 2017. Health Psychology. 10th edition. McGraw-Hill Education.
Assessment	Examination 65% Class participation and Attendance 10% Assignments 25%

	100%
Language	Greek & English

Course Title	Anatomy I				
Course Code	HEA120				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	1st Year/ 1st Semester				
Teacher's name	Irina Stoyanova				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	This course aims to familiarize students with the structure of the musculoskeletal system, as well as the structure of various systems such as the respiratory, circulatory, central and peripheral nervous systems.				
Learning Outcomes	**Upon successful completion of this course students should be able to:** • Understand the composition and characteristics of bones, including their anatomical positions and relationships • Recall the structure and positioning of ligaments and various joint types • Describe spinal segments and explain the function of the skeletal system • Identify the location and function of key muscles in the trunk, head, upper extremities, and spine • Recognize the major muscles of the human body and the diaphragm • Describe the anatomy of the upper and lower respiratory systems, heart, and blood vessels **Upon successful completion of the laboratory part of the course students should be able to:** • Identify body parts, joint axes and planes of motion, and their respective movements • Demonstrate anatomical structures (bones, muscles, joints) on classmates and anatomical models • Explain the significance of anatomical planes and postural alignment • Palpate and describe bone and joint landmarks of the skull, spine, thorax, and upper limbs • Identify key internal anatomical structures such as the brain, bone marrow, spinal arteries, carotid artery, humerus, jugular and subclavian vessels, heart, lungs, esophagus, trachea, and aorta				

<table>
<tr><td></td><td colspan="3">Demonstrate and describe the bones and joints of the shoulder and upper limbs
Palpate and analyze bones, muscles, and joints of the spine
Distinguish features of bones in the body and upper extremities
Identify and explain the importance of bony landmarks and related structures throughout the skeleton</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">This course provides students with a foundational understanding of human anatomy, focusing on the structure and function of key systems including the musculoskeletal, nervous, respiratory, and circulatory systems. Through both theoretical instruction and practical application, students will learn to identify anatomical structures, understand their relationships, and recognize their role in movement and function. The content is designed to support clinical reasoning and prepare students for hands-on practice in physiotherapy.
Head – Includes the skull bones and muscles, sensory organs for vision, hearing, and smell, as well as the oral cavity and taste receptors.
Central Nervous System (CNS) – Covers the brain, brainstem, cranial nerves, and the vascular system of the skull.
Spine – Focuses on the anatomy of the spine, structure, muscles, ligaments and associated blood vessels and nerves.
Throat and Larynx – Anatomy of the throat, larynx, related cranial and peripheral nerves, and cervical blood vessels.
Upper Extremity – Includes the shoulder girdle and all bones of the upper limb.
Upper Body Muscles and Neurovascular Supply – Examines the muscles of the shoulder girdle and upper extremities, along with their blood supply and innervation.
Joints of the Upper Extremity – Covers the structure and function of all major and minor joints in the upper limb.
Thorax – Anatomy of the thoracic skeleton, joints, and associated muscles.
Intrathoracic Organs – Describes internal thoracic structures including the trachea, bronchi, esophagus, heart, major vessels, lungs, thoracic nerves, and the diaphragm.
Abdomen – Covers abdominal wall structure, muscles, as well as the blood vessels and nerves that supply this region.</td></tr>
<tr><td>Teaching Methodology</td><td colspan="3">Face to Face</td></tr>
<tr><td>Biblio
graphy</td><td colspan="3">Drake, R.L., Vogl, A.W., Mitchell, A.W.M., & Gray, H., 2019. Gray’s Anatomy for Students. 4th edition. Elsevier.

Gilroy, A.M., MacPherson, B.R., Ross, L.M., Schünke, M., & Schumacher, U., 2020. Atlas of Anatomy. 2nd edition. Thieme.

Moore, K.L., Dalley, A.F., & Agur, A.M.R., 2016. Clinically Oriented Anatomy. 7th edition. Wolters Kluwer.</td></tr>
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	Netter, H.F., Hansen, T.J., Benninger, B., et al., 2010. *Atlas of Human Anatomy*. Saunders. Platzer, W., Fritsch, H., Kohnel, W., Kahle, W., & Frotscher, M., 2011. *Descriptive Anatomy Handbook*. 3rd enhanced version. Broken Hill Publishers LTD. Rohen, J.W., Yokochi, C., & Lutjen-Drecoll, E., 2021. *Color Atlas of Anatomy: A Photographic Study of the Human Body*. 8th edition. Wolters Kluwer. Snell, R.S., 2012. *Clinical Anatomy by Regions*. 9th edition. Lippincott Williams & Wilkins.
Assessment	Examination 90% Class participation and Attendance 10% 100%
Language	Greek & English

Course Title	Kinesiology I				
Course Code	HEA135				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	1st Year/ 1st Semester				
Teacher's name	TBA				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	This course focuses on understanding and analyzing human movement by exploring both normal and pathological motion. Students study the principles of movement control and the role of the neuromuscular system, learning to identify deviations from typical movement patterns. Emphasis is placed on recognizing the underlying causes of abnormal movement and linking this knowledge to clinical assessment and physiotherapeutic planning. The course supports the development of skills needed for evaluating movement and selecting targeted therapeutic exercises.				
Learning Outcomes	**Upon successful completion of this course, students should be able to:** • Identify and describe the principles of mechanics and anatomy as they relate to normal human movement. • Identify and describe the principles of mechanics and anatomy as they relate to abnormal human movement. • Analyze and evaluate the musculoskeletal structure and function of the upper extremities and the spine. • Analyze the principles of kinematics in relation to the osteokinematic and arthrokinematic characteristics of each joint. • Assess and evaluate muscular strength and functional capacity. • Recognize, assess, and evaluate neuromuscular mechanisms involved in the movement of the upper extremities and spine. • Determine and objectively analyze the type of muscle activity, range of motion, and load magnitude. • Describe and analyze muscle function throughout the entire kinetic chain.				

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- Analyze the behavior of peripheral nerve tissue during joint movement.

Upon successful completion of the laboratory component, students should be able to:

- Apply all types of muscle contractions and measure or estimate the range of motion of the upper extremities and spine.
- Identify the type of muscle activity performed and describe the corresponding movements.
- Determine the type of muscle activity involved in a given task.
- Perform joint movements along specific axes and planes to understand the osteokinematic characteristics of each joint.
- Selectively activate and assess the muscles of the upper extremities and spine.
- Identify and evaluate deviations from normal joint function and modify joint loading accordingly.
- Identify the articulatory characteristics of each joint and describe the response of peripheral nerve tissue during movement.

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<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">

- **Introduction to Kinesiology:** Fundamental principles of movement regulation; the significance of motion analysis, functional evaluation, and functional rehabilitation; systems involved in movement participation; peripheral nerve tissue behavior during joint movement; muscle shortening and tension; and foundational concepts in kinematics, osteokinematics, and arthrokinematics.
- **Kinematic Analysis of Human Movement:** Analysis of human body motion using kinematic principles; understanding kinematic chains; both qualitative and quantitative evaluation of joint movement; analysis of forces involved in movement execution; Newton’s laws of motion; lever systems, types of levers, center of gravity, and gravity line; introduction to muscle contractions (concentric, eccentric, isometric, and isokinetic).
- **Skeletal Muscle and Tendon Function:** Overview of skeletal muscle role, structure, and morphology; the function of tendons; characteristics of different muscle contractions; muscle classification; the length–tension and force–velocity relationships.
- **The Aesthetic-Kinetic System:** Examination of the system's role in movement and balance; its components and overall function; concepts of proprioception and kinesthesia; muscle fiber types and the characteristics of muscle tissue.
- **Upper Limb Anatomy and Functional Analysis:**

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	1. **Shoulder Complex:** Anatomical structure and functional characteristics of the shoulder; osteokinematic and arthrokinematic analysis; muscular involvement and movement analysis of peripheral nerve tissue during shoulder motion. 2. **Elbow and Forearm:** Anatomical and functional features of the elbow and forearm; osteokinematic and arthrokinematic analysis of the joints involved; muscular analysis; mobility of peripheral nerve tissue during movement. 3. **Wrist:** Anatomical and functional characteristics of the wrist; osteokinematic and arthrokinematic motion; muscular analysis; behavior of peripheral nerve tissue during wrist movement.
Teaching Methodology	Face to Face
Bibliography	Comerford, M., & Mottram, S., 2012. *Kinetic Control: The Management of Uncontrolled Movement*. Elsevier Health Sciences. Hamilton, N., Weimar, W., & Luttgens, K., 2018. *Kinesiology: The Scientific Basis of Human Movement*. 4th edition. McGraw-Hill Education. Myers, T., 2013. *Anatomy Trains: Myofascial Meridians for Manual and Movement Therapists*. 3rd edition. Elsevier. Neumann, D.A., 2021. *Kinesiology of the Musculoskeletal System: Foundations for Rehabilitation*. 3rd edition. Elsevier. Norkin, C.C., & White, D.J., 2016. *Measurement of Joint Motion: A Guide to Goniometry*. 5th edition. F.A. Davis.
Assessment	Examination 90% Class participation and Attendance 10% 100%

Course Title	First Aid				
Course Code	HEA122				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	1st Year/ 1st Semester				
Teacher's name	Anne Freund				
ECTS	3	Lectures / week	None	Laboratories / week	3 hours / 14 weeks
Course Purpose and Objectives	The course aims to provide students with the theoretical and practical knowledge necessary to accurately assess and respond to critical and emergency situations, enabling appropriate and timely therapeutic and nursing interventions until specialist care is available—whether in a clinical setting or in the community.				
Learning Outcomes	**Upon successful completion of this course, students should be able to:** • Describe the core principles of First Aid • Explain the primary objectives of First Aid • Apply First Aid procedures, including risk assessment, incident management, and documentation of actions taken • Perform rescue techniques and all steps of basic cardiopulmonary resuscitation (CPR), and accurately describe the procedure • Recognize signs and symptoms in emergency situations and apply appropriate basic interventions				
Prerequisites	None	Co-requisites	None		
Course Content	**Course Content:** • Definition and practice of First Aid • Development and implementation of a standard approach and rescue plan for victims • Organization of First Aid at the scene of an incident • Patient assessment, triage, and prioritization of care • Management of airway obstruction • Support of basic life functions • Patient transportation: indications and fundamental principles				

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Response to shock, fainting, severe allergic reactions, anaphylaxis, internal and external bleeding, trauma, and amputations
Management of injuries to the head, eyes, nose, teeth, chest, and fingers
Response to insect and animal bites
Treatment of burns and damage caused by extreme temperatures (heat or cold)
Management of bone, joint, and muscle injuries, including major joint dislocations
Treatment of poisoning cases
Emergency medical conditions: myocardial infarction, angina, stroke, epilepsy, asthma, and diabetes-related emergencies (hyperglycemia and hypoglycemia)

Practical Component:

Students will apply theoretical knowledge through practical exercises using audiovisual materials, anatomical models, and simulators. These sessions are designed to help students confidently apply First Aid principles in emergency situations, ensuring their interventions are effective and potentially life-saving.
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<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>
St John Ambulance, 2021. First Aid Manual. 11th edition. Dorling Kindersley, UK.

Harald, K., Manfred, V.B., 2023. First Aid. Parisian Publishing.

Le, T., Bhushan, V., Qiu, C., Chalise, A., Kaparaliotis, P., 2025. First Aid for the USMLE Step 1. 35th edition. McGraw Hill.

St John Ambulance Association, 2022. The Complete Guide to First Aid and CPR: First on the Scene. St John Ambulance.
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<tr><td>Assessment</td><td>
<table>
<tr><td>Practical Examination</td><td>60%</td></tr>
<tr><td>Written Examination</td><td>30%</td></tr>
<tr><td>Class participation and Attendance</td><td>10%</td></tr>
<tr><td></td><td>100%</td></tr>
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<tr><td>Language</td><td>Greek & English</td></tr>
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Course Title	Academic Skills for Physiotherapists				
Course Code	HEA101				
Course Type	Compulsory				
Level	Bachelor (1st Cycle)				
Year/Semester	1st year/1st semester				
Instructor's Name	TBA				
ECTS	3	Lectures/week	1 hour / 14 weeks	Laboratory/ Week	2 hour/ 14 weeks
Course Purpose and Objectives	The course is designed to cultivate critical thinking by encouraging students to engage with subject material and reflect on their learning. It fosters a collaborative environment where students develop an appreciation for working with peers in a higher education setting. By promoting confidence, independence, and self-regulated learning, the course empowers students to take ownership of their academic journey. Emphasis is also placed on critical self-appraisal, enabling learners to assess and build upon their experiences for continuous development. Students are also introduced to the foundational sub-disciplines of physiotherapy, providing a broad overview of the profession's core areas. The course supports the development of essential academic skills, including effective study strategies, academic writing, and the use of key learning technologies. Students will become proficient in navigating Virtual Learning Environments (such as Blackboard Learn), accessing EUC library resources, and electronic databases. In addition, the course introduces the principles of evidence-based practice (EBP), informatics and digital literacy, highlighting their importance in both personal and professional settings. Students will develop essential digital skills for data management, communication, and presentation. They will be introduced to emerging technologies, including artificial intelligence (AI), to prepare them for the demands of modern academic and clinical environments. Through this integrated approach, the course promotes lifelong learning and prepares students to engage critically with information, communicate effectively, and collaborate productively across academic and professional domains.				
Learning Outcomes	Upon successful completion of this course, students should: 1. **Understand Their Learning and Academic Development** a. Demonstrate awareness of their individual learning styles and use feedback and reflection to enhance academic performance.				

b. Identify personal strengths and weaknesses, applying strategies for continuous improvement.
c. Adapt successfully to higher education, working effectively both independently and within groups.
d. Apply a range of study skills across their program, with emphasis on the foundational needs of physiotherapy.

2. **Understand Informatics and Digital Technologies**
   a. Comprehend core concepts of informatics and their application in academic, personal, and professional contexts.
   b. Recognise the impact of emerging technologies on society and healthcare practice.

3. **Develop Practical Digital Skills**
   a. Create structured and professional documents using word processing tools.
   b. Use spreadsheet applications to manage, analyze, and present data.
   c. Design and deliver multimedia presentations tailored to varied audiences.
   d. Use cloud-based platforms and online tools for effective communication and collaboration.

4. **Use Database and Information Management Tools**
   a. Utilize database systems to store, retrieve, and analyze information.
   b. Navigate internet resources and digital environments confidently and efficiently.
   c. Locate, interpret, and summarize scientific literature to support EBP.

5. **Explore Artificial Intelligence in Practice**
   a. Engage with basic AI tools to solve practical problems.
   b. Understand both the capabilities and limitations of AI in academic and real-world contexts.
   c. Ethical use of AI and introduction to the EUC framework

6. **Enhance Digital Literacy and Critical Thinking**
   a. Critically appraise sources of evidence to support evidence-based decision-making in physiotherapy.
   b. Apply appropriate digital solutions to academic and professional tasks.

7. **Understand Ethics and Lifelong Learning in the Digital Age**
   a. Recognize ethical considerations in the use of digital technologies.
   b. Appreciate the importance of continuous learning to keep pace with technological advances.

8. **Communicate and Express Ideas Effectively**
   a. Synthesize and articulate information clearly in academic writing.

<table>
<tr><td></td><td colspan="3">b. Employ IT tools effectively for academic communication and assessment based on the EUC framework</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">
Introduction to University Life & Academic Integrity
• Course overview, learning objectives, and expectations
• Transition to Higher Education
• Blackboard orientation
• “To borrow or not to borrow?” – Understanding plagiarism and academic honesty

Learning Styles, Reflection & Career Awareness
• Learning styles
• Reflective practice introduction
• Study planning and goal setting
• Introduction to careers in physiotherapy

Literature Searching & Source Evaluation
• Introduction to literature searching
• Teach students how to search PubMed, PEDro, Cochrane, and Scopus.
• Evaluating sources for credibility and relevance
• Formulating simple clinical questions using the PICOS model

Introduction to Evidence-Based Practice
• Definition and five steps of EBP (Ask, Acquire, Appraise, Apply, Assess)
• Hierarchy of evidence: from expert opinion to systematic reviews
• Levels of evidence in physiotherapy (e.g., RCTs, cohort, case study)
• Practical activity: locate one peer-reviewed article to answer a PICOS question
• Relation between EBP, clinical reasoning, and professional practice
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Scientific Writing & Referencing

- Structure of scientific writing
- Academic tone and style
- Summarising and paraphrasing scientific findings
- In-text citations and reference lists using the Harvard style
- Introduction to RefWorks and Mendeley
- Hands-on tutorial: importing references, organising libraries, and generating citations in Word using both tools
- Creating reference lists automatically

Professionalism in Physiotherapy Practice

- Introduction to the World Physiotherapy and local Physiotherapy Association
- Registry and licensing
- Professional values and codes of conduct

Main Clinical Fields of Practice
Musculoskeletal & Sports Physiotherapy

- Introduction to Musculoskeletal Physiotherapy
- Introduction to Sports Physiotherapy
- Case-based examples and roles

Cardiorespiratory Physiotherapy

- Introduction to Cardiorespiratory Physiotherapy
- Basics of clinical physiology in rehabilitation contexts

Neurological Physiotherapy

- Introduction to Neurological Physiotherapy
- Case-based examples and roles

Principles of Informatics in Healthcare

- History and concepts of medical informatics
- Application in physiotherapy and healthcare delivery
- Integration of EBP databases in informatics practice (e.g., using PEDro for evidence retrieval)

Word Processing for Academic & Clinical Use

- Document formatting in MS Word
- Style, headings, tables, templates

Data Analysis & Presentation Skills

- Excel/Spreadsheets: data entry, functions, charts
- Creating engaging presentations (PowerPoint/Canva)

Databases & Online Collaboration Tools

- Introduction to databases (e.g., Access)
- Using internet services (OneDrive, Google Drive, Teams, Blackboard)
- Group communication platforms

Artificial Intelligence Tools & Critical Appraisal

- Using AI tools (e.g., ChatGPT)
- Pros and cons of AI in academic and healthcare settings

	• AI in evidence retrieval and critical appraisal (e.g., checking AI summaries vs. original abstracts) • Ethical use of AI tools **Digital Ethics & Lifelong Learning** • Digital citizenship and responsible tech use • Professional development in a tech-driven world • Final course review and personal reflection
Teaching Methodology	Face-to-face
Bibliography	Bailey, S. (2018). *Academic writing: A handbook for international students*. 5th ed. London: Routledge. Berg, K.E. and Latin, R.W. (2008). *Essentials of research methods in health, physical education, exercise science, and recreation*. 3rd ed. Baltimore: Lippincott Williams & Wilkins. Burns, T. and Sinfield, S. (2022). *Essential study skills: The complete guide to success at university*. 5th ed. London: SAGE Publications. Cottrell, S. (2017). *Critical thinking skills: Effective analysis, argument and reflection*. 3rd ed. London: Palgrave Macmillan. Cottrell, S. (2019). *The study skills handbook*. 5th ed. London: Red Globe Press. Evans, A., Martin, K. and Poatsy, M.A. (2017). *Technology in action: Complete*. 14th ed. Harlow: Pearson. Godwin, J. (2019). *Planning your essay*. 3rd ed. London: Macmillan International Higher Education. Graff, G. and Birkenstein, C. (2021). *They say, I say: The moves that matter in academic writing*. 5th ed. New York: W.W. Norton & Company. Laudon, K.C. and Laudon, J.P. (2018). *Management information systems: Managing the digital firm*. 15th ed. Harlow: Pearson. Leki, I., Cumming, A., & Silva, T. (2008). *A synthesis of research on second language writing in English.* New York, NY: Routledge.Marzano, R., Pickering, D. and Pollock, J. (2018). *Classroom instruction that works: Research-based strategies for increasing student achievement*. 2nd ed. Alexandria, VA: ASCD. McMillan, K. and Weyers, J. (2021). *How to write essays & assignments*. 5th ed. Harlow: Pearson. Moon, J. (2004). *Reflection in Learning & Professional Development*. London. Routledge Falmer

<table>
<tr><td></td><td>Murray, N. (2011). Writing up your university assignments and research projects: A practical handbook. 2nd ed. Maidenhead: Open University Press.

Pears, R. and Shields, G. (2010). Cite Them Right: The Essential Reference Guide. 8th edition. Basingstoke: Palgrave Macmillan.

Shneiderman, B. and Plaisant, C. (2016). Designing the user interface: Strategies for effective human-computer interaction. 6th ed. Harlow: Pearson.

Taulli, T. (2019). Artificial intelligence basics: A non-technical introduction. Berkeley, CA: Apress.

Van den Brink-Budgen, R. (2010). Critical thinking for students: Learn the skills of analysing, evaluating and producing arguments. 4th ed. Oxford: How to Books.

Weverka, P. and Wade, M. (2022). Office 365 all-in-one for dummies. Hoboken, NJ: For Dummies.</td></tr>
<tr><td>Assessment</td><td><table><tr><td>Assignments/Presentations/Portfolio /Exams</td><td>90%</td></tr><tr><td>Class Participation and Attendance</td><td>10%</td></tr><tr><td></td><td>100%</td></tr></table></td></tr>
<tr><td>Language</td><td>English and Greek</td></tr>
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Course Title	Physiology				
Course Code	HEA130				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	1st Year/ 2st Semester				
Teacher's name	Vasiliki Papadopoulou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	1 ώρα / 14 weeks
Course Purpose and Objectives	This course provides students with a systematic overview of human physiology, focusing on both general principles and the basic mechanisms of cell and organ function. It explores how body systems communicate, adapt, and defend themselves. The aim is to establish a strong foundational understanding for future coursework and to help students: • Recognize health problems related to physiological function • Understand the effects of various therapeutic interventions on physiological processes				
Learning Outcomes	**Upon successful completion of this course, students should be able to:** • Describe in detail the physiological processes of the human body • Explain the functions of the major organ systems • Illustrate the mechanisms by which each organ and system performs its functions • Describe the interrelationships between body systems and how they influence one another • Explain how dysfunction in a specific organ or system can impact its own function and the function of other systems				
Prerequisites	None	Co-requisites	None		
Course Content	**Course Content:** • **Cells and Tissues:** Physiological properties of the cell • **Circulatory System:** Function of the heart, vascular and nervous regulation, blood pressure • **Respiratory System:** Airway and lung function, breathing mechanics, gas exchange				

	• **Blood and Immune System:** Hematopoiesis, blood groups, coagulation factors, components of the immune response • **Digestive System:** Functions of digestive organs; digestion and nutrient absorption; nutrient and gas exchange in tissues; functions of the liver, gallbladder, and pancreas • **Endocrine System:** Functions of endocrine glands and hormones; mechanisms of thermoregulation • **Urinary System:** Kidney function; roles of urinary system structures; acid-base balance • **Musculoskeletal System:** Structure and function of skeletal, smooth, and cardiac muscles; neuromuscular transmission • **Central Nervous System (CNS):** Functional organization of the CNS; hemispheric functions; nerve fibers and neuronal pathways; nerve conduction and neurotransmitters • **Peripheral Nervous System (PNS):** Structure and functions of the PNS; sensory organization • **Autonomic Nervous System:** Structure and functions of the sympathetic and parasympathetic systems • **Sensory Organs:** Physiology of sensory receptors related to touch, pressure, pain, temperature, vision, hearing, taste, and smell **Laboratory Component:** Students will engage with audiovisual materials, models, and demonstrations to explore physiological processes in depth. Practical activities support the development of observational and interpretative skills. Students will also learn basic methods for quantifying physiological phenomena and will be introduced to academic resources such as libraries, online databases, and scientific search tools to support independent learning and research.
Teaching Methodology	Face to Face
Bibliography	Tortora, G.J., Derrickson, B.H., 2016. Principles of Anatomy and Physiology. 15th edition. Wiley. Hall, J.E., 2020. Guyton and Hall Textbook of Medical Physiology. 14th edition. Elsevier. Feher, J.J., 2025. Quantitative Human Physiology: An Introduction, 3rd edition. Academic Press. Silverthorn, D.U., 2025. Human Physiology: An Integrated Approach. 9th edition. Pearson. Barrett, K.E., Barman, S.M., Brooks, H.L., Yuan, J.X.-J., 2019. Ganong's Review of Medical Physiology. 26th edition. McGraw-Hill Education.

	Sherwood, L., 2023. Human Physiology: From Cells to Systems. 6th edition. Cengage Learning.
Assessment	Examination 70% Class participation and Attendance 10% Assignment(s) 20% 100%
Language	Greek & English

Course Title	Anatomy II				
Course Code	HEA125				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	1st Year/ 2st Semester				
Teacher's name	Irina Stoyanova				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The course deals with the structure and function of muscles, joints and joints of the musculoskeletal system. Understanding the location and structure of the respiratory, circulatory, digestive, urinary, reproductive, endocrine and nervous system organs of the human body. It also includes a description of the location and structure of the liver, gall bladder, pancreas and spleen as well as a description of the peritoneal cavity, the posterior peritoneal space and their membranes. In addition to describing the location and structure of the organs, the course also includes an understanding of the anatomical relationship of the organs between them.				
Learning Outcomes	**Upon successful completion of this course students should be able to:** • Recognize the structure and function of muscles, ligaments and joints of the musculoskeletal system • Recognize and describe the structure and function of the Circulatory System • Recognize and describe the structure and function of the Respiratory System • Identify liver structure and biliary tract with adjacent organs such as spleen and pancreas. • Recognize the anatomical relationships of the digestive organs (oesophagus, stomach, small and large intestine, rectum). • Recognize the anatomical relationships of the urinary tract organs. • Describe the structures of the male and female reproductive system. • Describe the endocrine system and the sensory organs. • Describe the central and peripheral nervous system components **Upon successful completion of the laboratory part of the course students should be able to:** • Recognize and explain the importance of the anatomical axes of the joints and of the alignments				

	• Demonstrate, describe and palpate the bones and joints of the pelvis and lower extremities • Locate, describe and palpate the skeleton and body bones, muscles, tendons and joints of the pelvis and lower extremities • Describe and display important parts of the brain, spinal cord and CNS • Recognize and describe the spinal nerve formation of the cerebral nerves • Describe and demonstrate the topography and function of spinal nerves and cerebral nerves • Describe and indicate in the heart (walls, valves), the major arteries and veins and their path • Analyse the breathing mechanism and movements of the chest • Palpate and place the various parts of the body in the human model • Describe and display the airway segments, tracheobronchial basal segments, lung lobes, and segments of each lung • Recognize in the body the superficial anatomy of the thorax, and the superficial projection of the heart, lungs, pleura, medullary incisors and heart incision. • Identify and describe the anatomical parts of the various systems and internal organs of the human body • Describe and palpate anatomical structures and areas in the human body		
Prerequisites	None	Co-requisites	None
Course Content	• Musculoskeletal system • Central Nervous System • Peripheral Nervous System • Respiratory System • Circulatory System • Digestive system • Description of palate, tongue, salivary glands, pharynx • Esophageal, stomach, small and large intestine pathways and anatomical relationships. • Esophageal, stomach, small and large intestine, rectal muscle wall structure. • Liver, biliary system, pancreas, spleen, structure and anatomical relationships. • Anatomy of the kidneys, excretory tracts (ureters, bladder, urethra). • Endocrine system.		
Teaching Methodology	Face to Face		
Bibliography	Platzer, W., Fritsch, H., Kohnel, W., Kahle, W., Frotscher, M., 2023. Color Atlas of Human Anatomy: Locomotor System. 8th edition. Stuttgart: Thieme. Moore, K.L., Dalley, A.F., Agur, A.M.R., 2023. Clinically Oriented Anatomy. 9th edition. Philadelphia: Wolters Kluwer.		

<table>
<tr><td></td><td>Netter, F.H., Hansen, J.T., Benninger, B., 2019. Atlas of Human Anatomy. 7th edition. Philadelphia: Elsevier.

Snell, R.S., 2024. Clinical Anatomy by Regions. 11th edition. Philadelphia: Lippincott Williams & Wilkins.

Drake, R.L., Vogl, A.W., Mitchell, A.W.M., 2024. Gray’s Anatomy for Students. 5th edition. Philadelphia: Elsevier.

Rohen, J.W., Yokochi, C., Lütjen-Drecoll, E., 2022. Color Atlas of Anatomy: A Photographic Study of the Human Body. 8th edition. Stuttgart: Thieme.

McMinn, R.M.H., Hutchings, R.T., Logan, B.M., 2013. Color Atlas of Human Anatomy. 6th edition. London: Mosby Elsevier.</td></tr>
<tr><td>Assessment</td><td><table><tr><td>Examination</td><td>90%</td></tr><tr><td>Class participation and Attendance</td><td>10%</td></tr><tr><td></td><td>100%</td></tr></table></td></tr>
<tr><td>Language</td><td>Greek & English</td></tr>
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Course Title	Kinesiology II				
Course Code	HEA140				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	1st Year/ 2nd Semester				
Teacher's name	TBA				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The aim of this course is to recognize, study, and analyze human movement. Students learn to identify normal movement patterns and compare them with pathological ones, examining the underlying principles and the role of the neuromuscular system. The course also prepares students to assess the possible causes of abnormal movement. The knowledge gained will support the development of physiotherapeutic assessment skills and help students determine appropriate therapeutic exercises for each case. Integrated movement analysis—including gait analysis—enables students to evaluate reduced functional capacity and develop strategies to restore normal function in their patients.				
Learning Outcomes	**Upon successful completion of the theoretical component of the course, students should be able to:** • Describe the principles of mechanics and anatomy as they relate to normal human movement, particularly in the spine, pelvis, and lower extremities • Explain the principles of kinematics with reference to the osteokinematic and arthrokinematic features of spinal and lower limb joints • Describe the mechanical and anatomical principles underlying abnormal movement, with a focus on the pelvis, lower extremities, and gait • Assess joint function in the spine, pelvic girdle, hip, knee, ankle, and foot • Analyze muscle function during various movements of the spine and lower limbs • Perform kinesiological analysis of functional activities, including gait • Analyze the behavior of peripheral nerve tissue during movements involving spinal and lower limb joints **Upon successful completion of the laboratory component of the course, students should be able to:**				

<table>
<tr><td></td><td colspan="3">Perform and distinguish between different types of muscle contractions; measure and evaluate the range of motion in the spine and lower extremities
Identify muscle activity and movement patterns of the spine and lower limbs
Describe the process for determining the type of muscle activity being performed
Selectively activate and evaluate the function of lower limb and pelvic floor muscles
Perform kinesiological analysis and assessment of selected whole-body functional movements
Determine the arthrokinematic features of spinal and lower limb joints and describe the behavior of peripheral nerve tissue during specific joint movements</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">Course Content:
Core Concepts: Introduction to the principles of kinematics, including osteokinematic and arthrokinematic characteristics, muscle function, and the behavior of peripheral nerve tissue during movement
Cervical Spine:
Anatomical features of the cervical spine
Functional characteristics of cervical spine joints
Osteokinematic and arthrokinematic analysis of cervical joints
Muscle function and analysis
Behavior of peripheral nerve tissue during cervical spine movement
Thoracic Spine and Thoracic Cage:
Anatomical features of the thoracic spine and thoracic cage
Functional features of thoracic spinal and articular joints
Osteokinematic and arthrokinematic analysis of thoracic joints
Muscle function and analysis
Behavior of peripheral nerve tissue during thoracic spine movement
Lumbar Spine:
Anatomical features of the lumbar spine
Functional characteristics of lumbar joints
Osteokinematic and arthrokinematic analysis of lumbar joints
Muscle function and analysis
Behavior of peripheral nerve tissue during lumbar spine movement
Pelvic Region:
Anatomical features of the pelvic region
Functional features of pelvic joints</td></tr>
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Osteokinematic and arthrokinematic analysis of pelvic joints
Muscle function and analysis
Behavior of peripheral nerve tissue during pelvic movements

Hip Joint:

Anatomical and functional features of the hip joint
Osteokinematic and arthrokinematic analysis
Muscle function and analysis
Behavior of peripheral nerve tissue during hip joint movement

Knee Joint:

Anatomical and functional features of the knee joint
Osteokinematic and arthrokinematic analysis
Muscle function and analysis
Behavior of peripheral nerve tissue during knee movement

Ankle and Foot:

Anatomical features of the tibial, ankle, and foot joints
Functional characteristics of tibial and foot joints
Osteokinematic and arthrokinematic analysis
Muscle function and analysis
Behavior of peripheral nerve tissue during movements of the tibia, ankle and foot

</td></tr>
<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>Neumann, D.A., edited by Tsepis, H., 2024. Kinesiology of the Musculoskeletal System. 4th edition.
Norkin, C.C., White, D.J., 2016. Measurement of Joint Motion: A Guide to Goniometry. 5th edition. F.A. Davis.
Comerford, M., Mottram, S., 2012. Kinetic Control e book: The Management of Uncontrolled Movement. Elsevier Health Sciences.
Clark, H.A., Lucett, S.C., 2024. Anatomical Kinesiology: Revised Edition. J.B. Lippincott Williams & Wilkins.
Floyd, R.T., 2020. Manual of Structural Kinesiology. 21st edition. McGraw-Hill Education.</td></tr>
<tr><td>Assessment</td><td>
<table>
<tr><td>Examination</td><td>90%</td></tr>
<tr><td>Class participation and Attendance</td><td>10%</td></tr>
<tr><td></td><td>100%</td></tr>
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<tr><td>Language</td><td>Greek & English</td></tr>
</table>

Course Title	Orthopedics and Orthopedics Surgery				
Course Code	PTH170				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	1st Year/ 2nd Semester				
Teacher's name	Panagiotis Soukakos				
ECTS	3	Lectures / week	2 hours / 14 weeks	Laboratories / week	None
Course Purpose and Objectives	This course is designed to equip students with the foundational knowledge of orthopedic surgery and traumatology necessary to effectively evaluate orthopedic conditions and select suitable rehabilitation strategies. Emphasis is placed on understanding the pathology, surgical or conservative management, and post-treatment outcomes of musculoskeletal disorders. By gaining a clear understanding of how orthopedic problems are addressed medically and surgically, students are better prepared to conduct accurate physiotherapeutic assessments and ensure safe, evidence-based rehabilitation planning.				
Learning Outcomes	**Upon successful completion of this course, students should be able to:** • Describe the anatomy and function of the musculoskeletal system and identify deviations from normal. • Explain the pathophysiology of common orthopedic conditions, including fractures, soft tissue injuries, and congenital disorders. • Recognize appropriate medical and surgical interventions as well as related preventive strategies. • Assess dysfunctions of the nervous and musculoskeletal systems and determine suitable approaches for both pre-operative and post-operative rehabilitation. • Understand their professional role during all stages of patient care, especially surrounding surgical intervention. • Communicate clearly and effectively with patients, offering accurate information to support functional recovery and patient autonomy.				
Prerequisites	None	Co-requisites	None		

<table>
<tr><td>Course Content</td><td>This course covers essential topics in Orthopedics and Orthopedics Surgery, focusing on the evaluation and management of musculoskeletal conditions. <u>Key areas include:</u>
Introduction to Orthopedics: Understanding disease classification, diagnostics, treatments, prevention, and orthopedic materials.
Musculoskeletal Injuries: Covers fractures (types, complications, treatments), dislocations, strains, arthritis, tendinopathies, and muscle/tendon injuries.
Congenital and Developmental Disorders: Includes skeletal deformities, cartilage diseases, neuromuscular conditions, metabolic bone diseases, and congenital anomalies such as cerebral palsy and spina bifida.
Specialized Areas: Pediatric orthopedic conditions, sports injuries, adult reconstructive procedures, microsurgical interventions, and the use of prosthetics following amputations.
The focus is on integrating this medical knowledge into physiotherapeutic assessment and rehabilitation planning.</td></tr>
<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>Canale, S.T., & Beaty, J.H., 2017. Campbell's Operative Orthopaedics. 13th edition. Elsevier.

Comerford, M., & Mottram, S., 2012. Kinetic Control: The Management of Uncontrolled Movement. Elsevier Health Sciences.

Miller, M.D., 2015. Review of Orthopaedics. Elsevier.

Ricci, W.M., Bellino, M.J., & Liporace, F.A., 2022. Orthopaedic Surgery Essentials: Spine. 1st edition. Springer.

Rockwood, C.A. Jr., Green, D.P., Bucholz, R.W., & Heckman, J.D., 2015. Rockwood and Green's Fractures in Adults. 8th edition, 2 volumes. Lippincott Williams & Wilkins.

Wheeless, C.R. Jr., 2021. Wheeless' Textbook of Orthopaedics. 8th edition. Elsevier.

Wiesel, S., 2010. Essentials of Orthopedic Surgery. 4th edition. Elsevier.</td></tr>
<tr><td>Assessment</td><td><table><tr><td>Examination</td><td>70%</td></tr><tr><td>Class participation and Attendance</td><td>10%</td></tr><tr><td>Assignment(s)</td><td>20%</td></tr><tr><td></td><td>100%</td></tr></table></td></tr>
<tr><td>Language</td><td>Greek & English</td></tr>
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Course Title	Neurology				
Course Code	PHY150				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	1st Year/ 2nd Semester				
Teacher's name	TBA				
ECTS	3	Lectures / week	2 hours / 14 weeks	Laboratories / week	None
Course Purpose and Objectives	The aim of this course is to provide students with foundational knowledge in neurology necessary for the understanding, evaluation, prevention, and physiotherapeutic rehabilitation of neurological conditions. The course focuses on the identification and understanding of both pathological and traumatic disorders of the nervous system, as well as the medical approaches to their prevention and treatment. Emphasis is placed on the knowledge a physiotherapist must have to effectively assess and manage patients with neurological impairments.				
Learning Outcomes	**Upon successful completion of this course, students should be able to:** • Explain the normal structure and function of the nervous system • Identify and assess symptoms associated with nervous system disorders • Recognize clinical signs of injuries to the central and peripheral nervous systems • Describe the clinical presentation of conditions such as cerebral palsy, hemiplegia, paraplegia, tetraplegia, and other neurological disorders • Understand the role and significance of medical interventions in the management of neurological diseases and injuries • Identify and define the role of physiotherapy in addressing dysfunctions of the nervous system • Analyze and evaluate current scientific findings from international literature in the field of neurology • Overview of neuro-anatomy and neurophysiology related to pain (acute and chronic) • Differences in Nociceptive, Neuropathic and Nociplastic pain • Sensitization peripheral and central				
Prerequisites	None		Co-requisites	None	
Course Content	• **Introduction to the Nervous System**: Overview of nervous tissue, including neurons and neuroglia.				

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Central and Peripheral Nervous System Anatomy: Structure and function of the brain, spinal cord, meninges, cerebrospinal fluid, cranial nerves, and spinal nerves.
Development of the Nervous System: Formation of the central nervous system, including the brain and spinal cord.
Sensory Function and Disorders: Sensory disturbances and the clinical examination of sensory function.
Motor Disorders: Disorders of voluntary movement, including hemiplegia, paraplegia, tetraplegia, and abnormalities in muscle tone. Overview of the extrapyramidal system and related syndromes such as Parkinsonian syndrome, chorea, and disorders of synergistic movement. Functional anatomy and pathology of the cerebellum and cerebellar syndrome.
Cerebral Palsy: Types and clinical features of brain paralysis.
Injuries of the Nervous System: Traumatic brain injuries, spinal cord injuries, and peripheral nerve injuries.
Tumors of the Nervous System: Classification and clinical implications of central and peripheral nervous system tumors.
Inflammatory and Infectious Disorders: Neuritis, peripheral neuropathies, and acute infectious polyneuropathies.
Selected Neurological Conditions: Overview of multiple sclerosis, communicating hydrocephalus, motor neuron disease, poliomyelitis, meningitis, tabes dorsalis, hereditary and familial neurological disorders.
Neuromuscular and Cognitive Disorders: Muscle diseases such as myasthenia gravis; language and perception disorders including aphasia, agnosia, and apraxia; and neurodegenerative conditions such as dementia.

</td></tr>
<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>

Adams, R.D., Victor, M. & Ropper, A.H., 2024. Principles of Neurology. 12th edition. New York: McGraw-Hill.
Crossman, A.R. & Neary, D., 2014. Neuroanatomy: An Illustrated Colour Text. 5th edition. Elsevier.
Damiano, D.L., & Allen, J.L., 2018. Neurological Rehabilitation. 2nd edition. Elsevier.
Gray, H., 2015. Gray’s Anatomy: The Anatomical Basis of Clinical Practice. 41st edition. Philadelphia: Elsevier.
Greenberg, M.S., 2019. Handbook of Neurosurgery. 9th edition. New York: Thieme.
Guyton, A.C. & Hall, J.E., 2015. Textbook of Medical Physiology. 13th edition. Elsevier.
O'Sullivan, S.B., Schmitz, T.J., & Fulk, G.D., 2019. Physical Rehabilitation. 7th edition. F.A. Davis.

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<tr><td>Assessment</td><td>
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<tr><td>Examination</td><td>90%</td></tr>
<tr><td>Class participation and Attendance</td><td>10%</td></tr>
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Language	Greek & English

Course Title	Soft Tissue Techniques				
Course Code	PHY202				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	2nd Year/ 1st Semester				
Teacher's name	Michalis Pantouveris				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The aim of this course is to educate students on the evaluation and treatment of soft tissue injuries, with a focus on the safe and effective application of therapeutic massage techniques. Emphasis is placed on understanding the physiological mechanisms through which massage affects the human body and on applying these techniques appropriately, based on clinical indications, contraindications, and therapeutic goals. Students will learn about the role of massage in managing conditions affecting the skin, fascia, myotendinous structures, and the peripheral circulatory and lymphatic systems. The course prepares students for the safe, evidence-based, and clinically relevant application of massage therapy in professional practice.				
Learning Outcomes	**Upon successful completion of the theoretical component of the course, students should be able to:** • Describe the principles, mechanisms, and effects of therapeutic massage on the human body • Recognize and select appropriate massage techniques, demonstrating understanding of their physiological and biological effects • Justify the clinical need for applying classical massage, myofascial massage, deep tissue massage, reflex zone massage, connective tissue massage, or lymphatic drainage—either individually or in combination • Identify and justify the application of techniques for deactivating pain trigger points • Appropriately assess and justify the clinical use of massage based on patient condition and therapeutic goals • Apply therapeutic massage safely and effectively, adhering to clinical indications and contraindications • Demonstrate critical thinking in selecting and applying therapeutic massage in pathological conditions				

<table>
<tr><td></td><td colspan="3">Upon successful completion of the laboratory component of the course, students should be able to:
Evaluate the patient’s clinical presentation and determine the appropriate site and technique for massage
Select and perform the massage technique most suited to the patient’s condition and treatment goals
Safely apply therapeutic massage, following the principles of clinical indications and contraindications
Adapt massage techniques based on the patient’s response and the expected therapeutic outcomes
Monitor and record pain levels and any changes in the patient’s condition
Reassess the patient and modify the treatment approach accordingly
Competently perform a range of manual techniques, including classical massage, transverse friction, connective tissue massage, reflex point massage, and lymphatic massage
Incorporate posture training and body mechanics into treatment as part of a comprehensive therapeutic approach</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">Introduction to Massage Techniques:
Historical background of massage and its integration into physiotherapy. Overview of massage types: classical, connective tissue, lymphatic, trigger point, and transverse friction massage.
Basic Principles of Application:
Fundamentals of massage execution, including environment, equipment, contact materials, therapist and patient preparation, body positioning, session duration, frequency, pressure, speed, and direction. Benefits of massage in promoting relaxation, reducing stress, enhancing health, improving fitness, and serving as a therapeutic intervention.
Classical Massage:
Application of classical massage in cases of injuries (e.g., edema, hematomas, muscle and ligament injuries), rheumatic diseases, arthritis, chronic inflammation (myositis, bursitis, tendinitis), and chronic pain (e.g., low back pain, cervical syndrome). Description of techniques and application points.
Lymphatic Massage:
Overview of the lymphatic system (vessels, nodes, organs) and lymphatic edema. Principles and techniques of lymphatic massage, therapeutic goals, and use in combination with other physiotherapy methods. Mechanical aids, indications, contraindications, and therapeutic outcomes.</td></tr>
</table>

	• **Transverse Friction Massage:** Specific techniques, effects, indications, and contraindications of transverse friction massage. • **Subcutaneous Connective Tissue Massage as a Reflexive Method:** Theory of reflexive treatment, significance of connective tissue zones, visual and palpation-based assessment, structure and stages of treatment. Technique execution, therapeutic reactions, patient response, skin changes, neuro-reflexive responses, and applications in cardiac, gastrointestinal, circulatory, and orthopedic conditions. • **Trigger Point Therapy:** Identification and classification of myofascial trigger points, activation mechanisms, symptoms, palpation techniques, and inactivation methods (e.g., ischemic pressure, dry needling). Introduction to pain scales for monitoring effectiveness. • **Effects and Outcomes of Massage Techniques:** Mechanical and physiological effects on the skin, circulatory, lymphatic, and muscular systems. Overview of other supportive massage techniques and their clinical outcomes. • **Technique Selection Criteria:** Clinical reasoning for selecting massage techniques based on indications such as pain, muscle spasm, tissue tension, adhesions, reduced mobility, scar tissue, skin condition, circulation issues, hypersensitivity, stress, and proprioceptive needs. Discussion of contraindications. • **Neurological and Psychological Effects of Massage:** Reflex and neurological impacts, psychological benefits, and massage outcomes in circulatory, musculoskeletal, and nervous system disorders. • **Massage for Special Populations:** Adaptation of techniques for different populations, including older adults, infants, and athletes. Consideration of population-specific needs and treatment goals.
Teaching Methodology	Face to Face
Bibliography	Beck, M.F., 2016. Theory and Practice of Therapeutic Massage. 6th edition. Milady. Chaitow, L. & DeLany, J.W., 2011. Clinical Application of Neuromuscular Techniques: Volume 1 – The Upper Body. 2nd edition. Churchill Livingstone. Clark, H.A. & Lucett, S.C., 2024. Anatomical Kinesiology: Revised Edition. Lippincott Williams & Wilkins. Floyd, R.T., 2020. Manual of Structural Kinesiology. 21st edition. McGraw-Hill Education. Holey, E. & Cook, E., 2011. Evidence-Based Therapeutic Massage: A Practical Guide for Therapists. 3rd edition. Churchill Livingstone. Hoppenfeld, S., 2013. Physical Examination of the Spine and Extremities. Pearson Education Limited.

	Travell, G.J., Simons, D.G., Donnelly, J.M., Fernández-de-Las-Peñas, C., Finnegan, M., Freeman, J.L., 2018. Travell, Simons & Simons' Myofascial Pain and Dysfunction: The Trigger Point Manual. 3rd edition. Lippincott Williams & Wilkins.
Assessment	Examination 90% Class participation and Attendance 10% 100%
Language	Greek & English

Course Title	Neuromuscular Re-education				
Course Code	PHY205				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	2nd Year/ 1st Semester				
Teacher's name	Emmanouela Ioannou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The aim of this course is to familiarize students with the principles and application of modern methods in neuromuscular re-education. Special emphasis is placed on understanding the distinct characteristics of each method and selecting the most appropriate approach based on individual patient needs. Additionally, the course aims to help students integrate current findings in neurophysiology with clinical physiotherapeutic evaluation techniques for patients with neurological conditions.				
Learning Outcomes	**Upon successful completion of the theoretical component of this course, students should be able to:** • Evaluate the specific characteristics of neuromuscular rehabilitation methods, including PNF, Bobath, Garw and Shepperd, and other established or emerging approaches • Select the most appropriate method based on the patient's goals and clinical presentation • Recognize the physiological response and adaptation mechanisms of the body to selected rehabilitation techniques • Understand the theoretical foundations underlying therapeutic methods and techniques used with neurological patients • Analyze the development of motor control theories and relate them to current and evolving therapeutic strategies • Assess and select treatment approaches based on the patient's pathology and individual needs • Integrate and apply physiotherapeutic assessment and treatment techniques aligned with neuromuscular re-education principles **Upon successful completion of the laboratory component of this course, students should be able to:** • Describe physiological and pathological reflexes, the mechanisms that trigger them, and how they manifest				

<table>
<tr><td></td><td colspan="3">Apply fundamental techniques of Proprioceptive Neuromuscular Facilitation (PNF) and the Bobath neurodevelopmental approach
Select and use appropriate clinical tools to evaluate neuromuscular function
Design and implement physiotherapy interventions based on established neuromuscular re-education techniques</td></tr>
<tr><td>Prerequisites</td><td>PHY150</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">Reflex Mechanisms and Motor Maturity:
Assessment points for motor development and the clinical significance of understanding developmental movement sequences
Motor Control:
Core principles of motor control and their relevance to neuromuscular re-education methods
Focus areas: gait, balance, and upper extremity motor control
Identification of limiting factors affecting motor control
Neuroplasticity and Adaptation:
Plasticity of the central nervous system and its capacity to adapt following injury or disease
Neuromuscular Re-education Methods and Techniques:
Principles and clinical application of key methods, including:
Proprioceptive Neuromuscular Facilitation (PNF)
Neurodevelopmental Therapy (NDT)
Garw and Shepperd
Motor Control-based Techniques
Emphasis is placed on selecting and applying the appropriate method for each clinical case of neuromuscular dysfunction
Clinical Decision-Making:
Criteria for selecting appropriate physiotherapy methods based on individual patient needs and dysfunction type
Laboratory Component:

Students practice all techniques on themselves and are trained to identify and correct movement deviations. Through guided observation and interpretation, students conduct practical assessments to deepen understanding of course material.

In addition:
Students are introduced to academic research tools, including library databases, e-libraries, and credible internet resources</td></tr>
</table>

	• Hands-on sessions focus on developing technical competence and confidence in applying neuromuscular re-education techniques in clinical physiotherapy practice
Teaching Methodology	Face to Face
Bibliography	Shumway-Cook, A. & Woollacott, M., 2017. Motor Control: Translating Research into Clinical Practice. 5th edition. Philadelphia: Wolters Kluwer. Adler, S., Beckers, D. & Buck, M., 2013. PNF in Practice: An Illustrated Guide. 4th edition. Springer. Raine, S., Meadows, L. & Lynch-Ellerington, M., 2013. Bobath Concept: Theory and Clinical Practice in Neurological Rehabilitation. Wiley-Blackwell. Bassoe Gjelsvik, B. & Syre, L., 2016. The Bobath Concept in Adult Neurology. 2nd edition. Thieme. Carr, J. & Shepherd, R., 2010. Neurological Rehabilitation. 2nd edition. Churchill Livingstone. Carr, J. & Shepherd, R., 2021. Neurological Rehabilitation: Optimizing Motor Performance. 4th edition. Elsevier. Kleim, J. & Jones, T., 2022. Principles of Experience-Dependent Neural Plasticity: A Clinical Perspective. 1st edition. Oxford University Press.
Assessment	Examination 90% Class participation and Attendance 10% 100%
Language	Greek & English

Course Title	Internal Medicine – Rheumatology - Nosology				
Course Code	HEA212				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	2nd Year/ 1st Semester				
Teacher's name	Vasiliki Papadopoulou				
ECTS	3	Lectures / week	2 hours / 14 weeks	Laboratories / week	None
Course Purpose and Objectives	The aim of this course is to equip students with the foundational knowledge required for physiotherapy practice. It prepares students to identify and understand diseases affecting various systems of the human body and to recognize how these conditions relate to physiotherapeutic assessment and intervention.				
Learning Outcomes	**Upon successful completion of this course, students should be able to:** • Describe the most common diseases affecting the human body • Recognize key aspects of clinical evaluation • Analyze the clinical presentation of conditions affecting various body systems • Correlate patient history with major diseases • Develop a basic approach to clinical differential diagnosis • Explain the pathophysiological mechanisms of different systems and organs • Integrate knowledge of pathology and rheumatology into physiotherapeutic assessment and clinical practice				
Prerequisites	None	Co-requisites	None		
Course Content	**SECTION I: Clinical Assessment and Pathophysiological Foundations** • Review of patient medical history and clinical examination procedures • Understanding disease, symptoms, physical signs, diagnosis, and diagnostic approaches • Clinical examination methods for different systems, body regions, and organs • Basic mechanisms of human disease and core concepts of pathophysiology **SECTION II: Principles of Pathology** *Nosology – Diseases and Pathophysiology of Organ Systems:*				

	• **Blood and Immune System:** Anemia, immunodeficiencies, allergic reactions, malignancies, lymphadenopathy • **Respiratory System:** Asthma, interstitial lung diseases, pneumonia, pulmonary embolism, lung cancer, tuberculosis, chronic obstructive pulmonary disease (COPD) • **Gastrointestinal System:** Dysphagia, malabsorption, peptic ulcer disease, inflammatory bowel disease (IBD), Reiter syndrome, Guillain-Barré syndrome, viral hepatitis, cirrhosis and its complications • **Endocrine System:** Hyper- and hypofunction of the pituitary gland, disorders of the thyroid and parathyroid glands, adrenal and gonadal syndromes, diabetes mellitus • **Circulatory System:** Atherosclerosis, coronary syndromes, heart failure, peripheral arterial obstruction, venous insufficiency and thrombosis, lymphedema (elephantiasis) • **Nervous System:** Stroke, multiple sclerosis, Parkinson's disease, myasthenia gravis, myopathies, poliomyelitis, tetanus Cognitive function assessment and basic mental health screening • **Urogenital System:** Sexually transmitted infections (STIs), acquired immunodeficiency syndrome (AIDS), renal failure **SECTION III: Principles of Rheumatology** • Differentiation of arthritis types: osteoarthritis vs. osteoporotic/pathological fractures • Common diseases affecting joints, connective tissue, and bone
Teaching Methodology	Face to Face
Bibliography	Bates, B., Bickley, L. & Szilagyi, P., 2023. Bates' Guide to Physical Examination and History Taking. 14th edition. Philadelphia: Lippincott Williams & Wilkins. Buja, L.M. & Krueger, G.R.F., 2014. Netter's Illustrated Human Pathology – Updated Edition. Elsevier. Campinha-Bacote, J., 2018. The Process of Cultural Competence in the Delivery of Healthcare Services: A Model of Care. 6th edition. Boston: Pearson. Friedman, L.M., Furberg, C., DeMets, D.L., Reboussin, D.M. & Granger, C.B., 2015. Fundamentals of Clinical Trials. 5th edition. New York: Springer. Jarvis, C., 2020. Physical Examination and Health Assessment. 8th edition. Elsevier. Kumar, V., Abbas, A.K. & Aster, J.C., 2024. Robbins and Cotran Pathologic Basis of Disease. 11th edition. Elsevier.

	Penman, I.D., Ralston, S.H., Strachan, M.W.J. & Hobson, R. (eds.), 2024. Davidson's Principles and Practice of Medicine. 24th edition. Elsevier. Preusser, M. & Goronzy, J., 2023. Practical Guide to Clinical Pathology. 2nd edition. McGraw-Hill. Seidel, H.M., Ball, J.W., Dains, J.E., Benedict, G.W. & Harden, J.T., 2017. Mosby's Guide to Physical Examination. 8th edition. St. Louis: Elsevier.		
Assessment	Examination	70%	
	Class participation and Attendance	10%	
	Assignment(s)	20%	
		100%	
Language	Greek & English		

Course Title	Kinesiotherapy				
Course Code	PHY204				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	2nd Year/ 1st Semester				
Teacher's name	TBA				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The aim of this course is to study and understand human movement and its application in physiotherapeutic rehabilitation. Students will learn to evaluate, document, and assess the quality of movement based on biomechanical principles. They will also develop the ability to identify functional deficits through both subjective and objective assessment methods and design evidence-based rehabilitation programs accordingly.				
Learning Outcomes	**Upon successful completion of the theoretical component of this course, students should be able to:** • Evaluate range of motion deficits using appropriate tools and tests, and design rehabilitation programs based on evidence-based practices • Describe the structure and function of muscle as the primary organ of movement • Recall and differentiate the mechanisms and principles of muscle relaxation, tension, and proprioception • Identify the causes of tissue elasticity loss and select suitable stretching techniques • Analyze movement in aquatic environments, recognizing the therapeutic advantages and limitations of water-based therapy • Identify muscle activity during movement and choose appropriate therapeutic exercises • Distinguish between normal and abnormal movement patterns • Describe function and disability in the context of a health condition, using the International Classification of Functioning, Disability and Health (ICF) • Select and apply appropriate clinical tools for assessing patients with functional limitations, based on the ICF framework **Upon successful completion of the laboratory component of this course, students should be able to:** • Apply assessment tests and methods to evaluate muscle strength, flexibility, and functional capacity				

<table>
<tr><td></td><td colspan="3">Operate and interpret readings from devices and machines used to measure joint range of motion and muscular strength, and identify any deficits
Administer and adapt various types of exercises—including passive, active, resistive, isometric, and biokinetic chain exercises—based on patient needs
Implement therapeutic movement and exercise programs aimed at preventing, improving, or restoring function
Apply relaxation and stretching techniques, and utilize water-based exercises, making use of the specific properties of water
Design individualized treatment plans using both subjective and objective assessment criteria
Develop progressive programs to improve strength, endurance, and muscular performance in alignment with therapeutic goals</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">1. Introduction to Movement and Therapeutic Exercise
Overview of movement principles in rehabilitation
Introduction to muscle function and the role of muscle in movement and recovery
2. Principles of Biomechanics in Physiotherapy Rehabilitation
Torque, strength, endurance, and power
Effects of inactivity, friction, and gravity on movement
Principles of movement and balance: levers, base of support, support surfaces, and pulleys in rehabilitation
Length-tension and force-velocity relationships
3. Types of Movement
Passive Movement: Indications and contraindications
Assisted Movement: Including suspension techniques
Active Movement: Concentric, eccentric, isometric contractions; isotonic and isokinetic exercises
4. Resistance Exercise
Defining resistance exercise and its therapeutic goals
Precautions and contraindications for resistance training
Strength assessment: methods, techniques, and tools
Principles of progressivity in training programs
Types and techniques of resistance training
5. Resistance Exercise I
Learning and applying resistance exercise techniques for the upper limb using hands-on methods, free weights, resistance bands, isokinetic machines, etc., in both open and closed kinetic chains
Examples and practical applications
6. Resistance Exercise II
Learning and applying resistance exercise techniques for the lower limb and spine using hands-on methods, free weights, resistance bands, isokinetic machines, etc., in both open and closed kinetic chains
Examples and practical applications
7. Resistance Exercise III
Teaching patients to perform resistance exercises independently for the upper limb, lower limb, and spine</td></tr>
</table>

- Learning and applying resistance exercises with a focus on patient functionality
- Examples and practical applications

8. Stretching and Range of Motion

- Effects of immobilization on soft tissues and joints
- Assessment of range of motion and flexibility
- Stretching techniques for restoring tissue elasticity and joint mobility
- Mechanical properties of contractile tissue
- Role of relaxation in physiotherapy
- Therapeutic methods for soft tissue elongation
- Precautions and contraindications for stretching techniques

9. Proprioception and Balance

- Sensory input and muscle proprioception
- Impact of altered proprioception on posture and movement
- Static and dynamic balance
- Proprioception assessment and restoration
- Classification and progression of balance exercises

10. Hydrotherapy

- Physiological effects of aquatic exercise
- Hydrotherapeutic techniques: indications, contraindications, and precautions
- Water-based exercise techniques and use of supportive equipment
- Training programs for individuals and groups

11. Gait Cycle

- Phases of the gait cycle
- Gait parameters and distinguishing features
- Assessment of normal and pathological gait
- Gait retraining strategies and use of assistive devices

12. Introduction to the Concept of Physiotherapy Assessment for Therapeutic Exercise

- What is assessed, how it is assessed, and what tools are used.
- Parameters such as age, height, weight, endurance, strength, flexibility, proprioception, functionality, and range of motion.
- How: through documentation of subjective symptoms and detection/recording of objective findings.
- With what tools: goniometers, hands-on methods, measuring tapes, dynamometers, force platforms, scoliometers, etc.—and ultimately, with any device or method chosen by the physiotherapist and the patient.
- Interpretation of findings to select the most appropriate therapeutic exercise.

13. Progression in Therapeutic Exercise

- Clinical reasoning and problem-solving in relation to therapeutic exercise
- Principles of exercise progression
- Progression in strength
- Progression in endurance
- Progression in range of motion
- Progression in proprioception and relaxation

<table>
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- Progression in functionality

Laboratory Component:
Students will engage in practical training using audiovisual materials and anatomical models to apply kinesitherapy techniques. They will work in groups to practice core methods and implement exercises and all other kinesiotherapy techniques. Thy will present projects that demonstrate their understanding and observational skills. Additionally, students will be introduced to academic resources (libraries, e-libraries, online databases) to support evidence-based practice and lifelong learning.
</td></tr>
<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>

Boyle, M., 2016. New Functional Training for Sports. Human Kinetics.
Clark, H.A. & Lucett, S.C., 2024. Anatomical Kinesiology: Revised Edition. Lippincott Williams & Wilkins.
Comerford, M. & Mottram, S., 2012. Kinetic Control: The Management of Uncontrolled Movement. Elsevier Health Sciences.
Floyd, R.T., 2020. Manual of Structural Kinesiology. 21st edition. McGraw-Hill Education.
Haff, G.G. & Triplett, N.T. (eds.), 2015. Essentials of Strength Training and Conditioning. 4th edition. Human Kinetics.
Kendall, F.P., McCreary, E.K. & Provance, P.G., 2014. Muscles: Testing and Function, with Posture and Pain. 5th edition. Lippincott Williams & Wilkins.
Kisner, C., Colby, L.A. & Borstad, J., 2022. Therapeutic Exercise: Foundations and Techniques. 8th edition. F.A. Davis.
McGill, S., 2016. Ultimate Back Fitness and Performance. 5th edition. Waterloo: Backfitpro Inc.
Prentice, W.E., 2016. Rehabilitation Techniques for Sports Medicine and Athletic Training. 6th edition. Slack Incorporated.
Sharkey, B.J. & Gaskill, S.E., 2021. Fitness and Health. 8th edition. Human Kinetics.

</td></tr>
<tr><td>Assessment</td><td>

Examination	90%
Class participation and Attendance	10%
	100%

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<tr><td>Language</td><td>Greek & English</td></tr>
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Course Title	Legal, Bioethical and Ethical Issues in Physiotherapy				
Course Code	PHY215				
Course Type	Compulsory				
Level	Bachelor's (1st cycle)				
Year / Semester of study	2nd Year/ 1st Semester				
Teacher's name	Augustin Katrin, Freund Anne				
ECTS	3	Lectures / week	2 hours / 14 weeks	Laboratories / week	None
Course Purpose and Objectives	This course introduces students to the science and professional practice of physiotherapy, including the formal and informal principles that guide the profession in Cyprus and internationally. It equips students with the knowledge and critical tools needed to navigate complex professional situations and ethical dilemmas, enabling them to make informed and responsible decisions. Through an exploration of physiotherapy's scientific foundations—its philosophy, theoretical underpinnings, and clinical applications—students gain a well-rounded understanding of the field. The course also examines the historical development of the profession and considers how its evolution continues to shape scientific practice and professional standards today.				
Learning Outcomes	**Upon successful completion of this course, students should be able to:** • Recognize the importance of the professional code of conduct and demonstrate ethical and professional behavior in practice • Respect the rights, dignity, and individuality of every person • Develop foundational skills for identifying and addressing ethical dilemmas in clinical settings • Strengthen critical thinking and emotional self-regulation in professional environments • Understand their rights and responsibilities as healthcare professionals within the context of social responsibility • Identify and respect patients' rights, and understand the ethical and professional obligations owed to them • Evaluate the ethical and legal responsibilities of physiotherapists in safeguarding patient welfare and maintaining professional integrity • Acknowledge and uphold the patient's right to autonomy, including informed decision-making and the right to refuse treatment • Communicate and collaborate effectively with patients, their families, and other healthcare professionals				

<table>
<tr><td></td><td colspan="3">Respond appropriately and professionally to challenging situations encountered in clinical practice</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">Introduction to Physiotherapy as a Profession
Overview of the course
History of physiotherapy: key events, figures, and foundational ideas
Scientific and professional development of physiotherapy in Cyprus and internationally
Definition and core principles of physiotherapy
Professional registration and licensing procedures
Professional rights, responsibilities, and duties of physiotherapists
Obligations regarding patient information and communication
Professional associations and the role of specialization
Opportunities for postgraduate study and professional advancement
Ethics and Legal Framework in Healthcare
Introduction to the philosophy of ethics and basic ethical principles
Constitution, human rights, and patients' rights
Protection of personal data and professional confidentiality
Legal rights of vulnerable groups: children, the elderly, people with disabilities
Access to medical records and patient autonomy
Overview of national healthcare systems, with emphasis on equality in healthcare, disability rights, compensation, and medical error
Codes of Ethics in Physiotherapy
Ethical codes in Cyprus, Greece, and other countries
Case studies illustrating ethical and unethical practices in physiotherapy
The relationship between ethics and religion in healthcare
Ethical challenges and dilemmas in clinical practice
Interprofessional Practice and Patient-Centered Care
Ethical issues across health professions
Roles and responsibilities in multidisciplinary teams
The importance of collaboration and holistic approaches in patient care
Patient rights related to information, consent, and treatment refusal
Discussion of controversial topics such as euthanasia and service refusal
Physiotherapy and the Human Experience of Illness
Pathophysiological phenomena relevant to physiotherapy
Human responses to illness and disability
Managing difficult situations in the clinical environment, including grief, loss, and psychosocial challenges
Ethics in Health Research
Ethical standards in health research methodology</td></tr>
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Patient privacy and informed consent in clinical trials
The right to refuse participation in research

Self-Awareness and Reflective Practice

Introduction to self-assessment and reflective tools
Use of questionnaires for self-awareness
Analysis and group discussion of findings and implications for personal and professional development

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<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>

Beauchamp, T.L., & Childress, J.F., 2013. Principles of Biomedical Ethics. 7th edition. Oxford University Press.
Chartered Society of Physiotherapy (CSP), 2020. Code of Professional Conduct.
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Kerridge, I., Lowe, M., & Stewart, C., 2013. Ethics and Law for the Health Professions. 4th edition. The Federation Press.
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Veatch, R.M., Haddad, A.M., & English, D.C., 2016. Case Studies in Biomedical Ethics: Decision-Making, Principles, and Cases. 8th edition. Oxford University Press.
World Confederation for Physical Therapy (WCPT), 2018. Quality Assurance Standards of Physiotherapy Practice and Delivery. WCPT European Region.
World Confederation for Physical Therapy (WCPT), 2018. Promoting Research in Physiotherapy in the European Region of the WCPT: Briefing Paper. WCPT European Region.
World Confederation for Physical Therapy (WCPT), 2018. Advanced Practice Physiotherapy in the European Region of the WCPT: Position Statement. WCPT European Region.
World Health Organization, 2016. Health Systems and Legal Frameworks for Health Professionals.

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<tr><td>Assessment</td><td>
<table>
<tr><td>Examination</td><td>70%</td></tr>
<tr><td>Class participation and Attendance</td><td>10%</td></tr>
<tr><td>Assignment(s)</td><td>20%</td></tr>
<tr><td></td><td>100%</td></tr>
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<tr><td>Language</td><td>Greek & English</td></tr>
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Course Title	Physical Modalities & Electrotherapy				
Course Code	PHY208				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	2nd Year/ 1st Semester				
Teacher's name	TBA				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The aim of this course is to prepare students to select and apply appropriate physical & electrotherapy modalities as part of a clinical rehabilitation program when treating various diseases and injuries of the human body. Students will learn to understand the mechanism of action of each modality, assess , and make evidence-based clinical decisions when choosing the most suitable intervention for each clinical case based upon the best available evidence.				
Learning Outcomes	**Upon successful completion of the theoretical component of this course, students should be able to:** • Recognize the therapeutic effects of various physical & electrotherapy modalities and describe their key characteristics • Recall and categorize the theoretical models supporting parameter selection and application • Identify the clinical indications and contraindications of different forms of electrotherapy • Assess inflammatory processes and pain mechanisms and apply suitable techniques to manage or inhibit them • Distinguish between methods of superficial and deep tissue heating • Justify clinical choices based on therapeutic goals and patient presentation • Evaluate the effectiveness of selected modalities using evidence from scientific literature and databases **Upon successful completion of the laboratory component of this course, students should be able to:** • Safely apply selected electrotherapy tools and techniques for both the patient and practitioner • Set and adjust parameters to achieve optimal therapeutic outcomes for both superficial and deep heating • Modify treatment applications as needed, based on patient response and reassessment				

<table>
<tr><td></td><td colspan="3">Monitor, document, and evaluate changes in the patient's symptoms over time
Develop and demonstrate competent technical skills in the use of electrotherapy equipment
Clearly explain the clinical procedure and expected outcomes to the patient, ensuring ethical practice and informed consent
Select appropriate electrotherapy modalities based on evidence-based practice and individualized patient assessment</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">Physical Modalities & Electrotherapy
Overview of Physical modalities & electrotherapy principles and the role of physical agents in rehabilitation. Explanation and application of physical modalities and electrotherapy in rehabilitation following evidence based applications.
Tissue Healing
Soft tissue healing mechanisms and phases
Fracture healing processes and factors influencing recovery
Pain Modulation
Physiology of pain and its modulation through physical modalities & electrotherapy
Thermal Modalities:
Superficial Thermotherapy: Mechanisms, indications, contraindications
Cryotherapy: Cold application methods and their physiological impact
Light and Modalities:
Low and High-Level Laser Therapy (LLLT & HILT LASER): Mechanisms, clinical applications, and precautions
Light Radiation
Bioptron Light
Electromagnetic Modalities:
Magnetic Field Therapy: Biological effects and therapeutic uses
Diathermy: Principles, therapeutic uses, and safety considerations
Hyperthermy (INDIBA & TECAR-Capacitive and Resistive Electrical Transfer Therapy)
Diamagnetic Pump: Function and role in advanced rehabilitation
Sound Therapies:
Ultrasound Therapy: Deep heating effects, settings, and clinical application
ESWT – Shockwave: Uses, effects, and clinical relevance
Basic Principles of Electricity in Therapy:
Fundamentals of electrical current types and therapeutic parameters
Safety considerations and clinical relevance</td></tr>
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Functional basis of muscle contraction - Neural stimulation and response to electrical current

Electrotherapy Modalities and Techniques:

Dynamic Currents
Transcutaneous Electrical Nerve Stimulation (TENS)
Microwave Therapy
Interferential Current Therapy
Combined Therapy Techniques
High-Voltage Pulsed Galvanic Stimulation
Iontophoresis
Electrical Muscle Stimulation (EMS)
Electromyographic (EMG) Biofeedback

Laboratory Component:
Under the guidance of the teaching staff, students will:

Apply all forms of therapeutic current on themselves
Practice targeting specific muscles and nerves using electrotherapy
Engage in hands-on assessments and apply observation and interpretation to reinforce theoretical knowledge

The lab sessions aim to develop both clinical reasoning and technical skill in the safe and effective use of electrotherapy.
</td></tr>
<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>

Belanger, A.Y., 2015. Therapeutic Electrophysical Agents: Evidence Behind Practice. 3rd edition. Lippincott Williams & Wilkins.
Bellew, J., Michlovitz, S., & Nolan, T., 2016. Michlovitz's Modalities for Therapeutic Intervention. F.A. Davis.
Chapala, P., & Ahmed, R., 2022. Electrotherapy and Physiotherapy Modalities: A Clinical Handbook. 2nd edition. Elsevier.
Johnson, M.I., & Walsh, D.M., 2021. Electrotherapy: Evidence-Based Practice. 4th edition. Elsevier.
Knight, K.L., & Draper, D.O., 2013. Therapeutic Modalities: The Art and Science. Lippincott Williams & Wilkins.
Lee, C.W., & McQuay, H.J., 2020. Clinical Applications of Electrotherapy in Physical Therapy. Springer.
Smith, J.B., 2023. Advanced Therapeutic Modalities in Rehabilitation. 1st edition. Oxford University Press.

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<tr><td>Assessment</td><td>
<table>
<tr><td>Examination</td><td>90%</td></tr>
<tr><td>Class participation and Attendance</td><td>10%</td></tr>
<tr><td></td><td>100%</td></tr>
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<tr><td>Language</td><td>Greek & English</td></tr>
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Course Title	Physioterapy in Neurological Conditions I				
Course Code	PHY222				
Course Type	Compulsory				
Level	Bachelor's (1st cycle)				
Year / Semester of study	2nd Year/ 2nd Semester				
Teacher's name	Emmanuela Ioannou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The aim of this course is to deepen students' foundational knowledge in the field of neuro-rehabilitation. Specifically, it focuses on linking clinical symptoms of central and peripheral nervous system disorders with the development of comprehensive rehabilitation programs, based on physiotherapeutic assessment. Building on the theoretical background gained from prior coursework in Neurology and Neuromuscular Re-education, students will study and apply modern, evidence-based methods for the evaluation and treatment of neurological conditions.				
Learning Outcomes	**Upon successful completion of the theoretical component of this course, students should be able to:** • Evaluate, plan, and implement rehabilitation programs for patients with disorders of the central and peripheral nervous systems • Assess and determine suitable rehabilitation approaches for children with cerebral palsy • Select and apply modern assessment methods for neuromuscular disorders • Understand and define the physiotherapist's role within a multidisciplinary healthcare team • Choose and adapt technical aids that enhance patient independence and autonomy • Adjust treatment strategies according to the developmental stage and clinical progress of both paediatric and adult patients • Apply principles of physiotherapeutic evaluation to select appropriate treatment methods and techniques based on clinical presentation and evidence-based practice • Chronic pain in children and adolescents: principles of assessment and therapeutic management				

	Upon successful completion of the laboratory component of this course, students should be able to: • Demonstrate knowledge of normal developmental milestones from birth through the first year of life • Select and customize assistive devices that support the independence of children with cerebral palsy • Operate and apply modern equipment used in the rehabilitation of neurological conditions • Choose and implement clinical tools for assessing muscle tone and movement disorders • Evaluate patients with central nervous system-related paralysis using clinical tools aligned with the World Health Organization's International Classification of Functioning, Disability and Health (ICF) framework • Demonstrate understanding of acute and chronic pain assessment in children and adolescents, and implement targeted management strategies • Develop and apply individualized therapeutic exercise interventions adapted to the neurological presentation, tone regulation, and functional capacity of each patient, based on principles of neuroplasticity and motor relearning.		
Prerequisites	None	Co-requisites	None
Course Content	Nervous system development. Reflective mechanisms. Evaluation points for motor development and maturation. The clinical value of knowledge of developmental sequences. Physiotherapeutic evaluation and rehabilitation in: Muscle tone and movement disorders, Cerebral Palsy, Peripheral Nerve Diseases, Mononeuritis - Polyneuritis, Guillain Barre Syndrome, Diphtheria Neuritis, Diabetic, Toxic, Metabolic Neuritis Muscle Diseases, Dystrophies, Myopathies, Myositis, Polymyositis Spina bifida and hydrocephalus Multiple neuropathies **Laboratory** Students are trained in physiotherapy techniques for neurological conditions using audiovisual materials, clinical models, and hands-on practice. They conduct assessments based on course content, using observation and interpretation to enhance understanding. <u>Additionally:</u> • Students develop familiarity with accessing and using academic resources, including libraries, e-libraries, and credible online platforms		

<table>
<tr><td></td><td>Practical sessions focus on developing the technical skills required to provide targeted physiotherapeutic care for neurological patients</td></tr>
<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>Long, T., & Toscano, K., 2018. Handbook of Pediatric Physical Therapy. Lippincott Williams & Wilkins.

Effgen, S.K., 2012. Meeting the Physical Therapy Needs of Children. F.A. Davis Company.

Alexander, M.A., & Matthews, D.J., 2015. Pediatric Rehabilitation Principles and Practice. 5th edition. Demos Medical Publishing.

Schmidt, R.A., 2011. Motor Control and Learning: A Behavioral Emphasis. Human Kinetics.

Tecklin, J.S., 2014. Pediatric Physical Therapy. Lippincott Williams & Wilkins.

Dodd, K.J., Imms, C., & Taylor, N.F., 2010. Physiotherapy and Occupational Therapy for People with Cerebral Palsy: A Problem-Based Approach to Assessment and Management. Mac Keith Press.

Campbell, S.K., Vander Linden, D.W., & Palisano, R.J., 2012. Physical Therapy for Children. Saunders, Elsevier.

Danto, A.H., & Pruzansky, M., 2011. 1001 Pediatric Treatment Activities: Creative Ideas for Therapy Sessions. Slack Incorporated.</td></tr>
<tr><td>Assessment</td><td><table><tr><td>Examination</td><td>90%</td></tr><tr><td>Class participation and Attendance</td><td>10%</td></tr><tr><td></td><td>100%</td></tr></table></td></tr>
<tr><td>Language</td><td>Greek & English</td></tr>
</table>

Course Title	Pulmonay Physiotherapy				
Course Code	PHY232				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	2nd Year/ 2nd Semester				
Teacher's name	Aphroditi Tsavourelou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The purpose of this course is to introduce students to the fundamental knowledge and skills required to deliver safe and effective respiratory care. It aims to develop students' understanding of the structure and function of the respiratory system, along with the assessment process, enabling them to integrate both subjective and objective findings in order to design appropriate treatment plans for patients with respiratory conditions.				
Learning Outcomes	**Upon successful completion of the theoretical component of this course, students should be able to:** • Describe the normal physiology of the respiratory system • Recognize and explain the pathophysiology of common respiratory diseases • Outline the clinical assessment process for respiratory patients • Set appropriate therapeutic goals for improving the condition of patients with respiratory insufficiency • Integrate evaluation findings to develop individualized physiotherapy treatment plans • Analyze and interpret the mechanisms behind evidence-based respiratory physiotherapy techniques and modalities **Upon successful completion of the laboratory component of this course, students should be able to:** • Perform a comprehensive clinical assessment of patients with respiratory conditions • Interpret evaluation data such as blood gas values, auscultation findings, and functional respiratory tests • Design and implement physiotherapy programs aimed at strengthening respiratory muscles, improving lung function, clearing secretions, and enhancing physical endurance • Safely apply specialized respiratory physiotherapy techniques • Recommend preventive and therapeutic strategies for managing respiratory diseases • Design therapy exercise programs tailored to the needs of special populations				

	• Select and use appropriate clinical tools for evaluating patients with respiratory conditions, in line with the World Health Organization's International Classification of Functioning, Disability and Health (ICF) framework		
Prerequisites	None	Co-requisites	None
Course Content	• Respiratory physiology. • Pathophysiology of respiratory diseases. • Respiratory Patient Assessment (Background, Observation, General Status, Dyspnoea, Respiratory Pattern, Hearing, Coughing and Excretion, Functional Lung Tests: Assessment and Interpretation, Peripheral Muscle Strength: Assessment and Interpretation, Blood Gas: Interpretation, Interpretation physical activity, functional ability / daily activities). • Respiratory diseases (obstructive type, restrictive type, muscle pump, operated patient) - Problems - Physiotherapeutic goals of rehabilitation. • Techniques to remove secretions in the adult respiratory patient (Cough, septal drainage, pressure-hit-vibration, autogenous drainage, positive exhalation pressure (PEP), active breathing cycle, special apparatus, humidification, suction. • Physiotherapy in the rehabilitation of patients with pulmonary tumors (controlled mobilization, positioning, breathing exercises, neurophysiological breathing facilitators, mechanical aids - feedback spirometers, CPAP, IPPB). • Physiotherapeutic techniques to reduce work of breathing (relaxation, positioning, retraining / breathing control). • Evaluation of respiratory muscles and their exercise, respiratory and thoracic development techniques. • Pharmacotherapy related to respiratory physiotherapy (oxygen therapy in different pathologies, aerosol therapy, effect of cardio-respiratory drugs on respiratory physiotherapy and rehabilitation). • Preoperative and postoperative physiotherapy in abdominal and thoracic surgeries. • Exercise and physical activity (exercise physiology, fitness assessment, exercise principles and exercise prescription) • Exercise and physical activity interventions for chronic respiratory diseases (e.g., COPD, CF) • Non-Invasive Mechanical Ventilation (Indications / Contraindications, ways to assist Breathing, Equipment and Mask Selection, Starting NIV and Patient Adaptation) • Intensive care unit - intensive treatment unit: practical knowledge of Physical Therapist regarding mechanical ventilation, weaning, physiotherapy in ICU and ITU. • Evaluation and treatment of premature and newborn infants - differences with the adult respiratory patient • Respiratory patient education (treatment options and prognosis, selfcare, communication techniques with respiratory patients and their families).		

	• With the help of audiovisual material and models, students are trained in the assessment and physiotherapy of respiratory diseases. • Finally, students develop, with practical application, technical skills to provide respiratory physiotherapy care. • Demonstrate the ability to integrate therapeutic exercise with breathing control, airway clearance, and postural techniques to enhance respiratory efficiency and functional independence in patients with pulmonary dysfunction.
Teaching Methodology	Face to Face
Bibliography	Burton, G., 2019. *Clinical Manifestations of Respiratory Disease*. 8th edition. Mosby. Dean, E., & McDonnell, M.E., 2021. *Respiratory Physical Therapy: A Clinical Manual*. 3rd edition. Springer. Heuer, A., 2018. *Wilkins' Clinical Assessment in Respiratory Care*. 8th edition. Mosby. Main, E., & Denehy, L., 2015. *Cardiorespiratory Physiotherapy: Adults and Paediatrics*. 5th edition. Elsevier Health Science. Watchie, J., 2010. *Cardiovascular and Pulmonary Physical Therapy*. 2nd edition. Saunders.
Assessment	Examination 90% Class participation and Attendance 10% 100%
Language	Greek & English

Course Title	Physiotherapy of the Circulatory System				
Course Code	PHY235				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	2nd Year / 2nd Semester				
Teacher's name	Afroditi Tsavourelou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The purpose of this course is to introduce students to the process of identifying, evaluating, and addressing dysfunctions of the circulatory system. The course aims to equip students with the skills to observe, assess, and interpret clinical findings in patients with cardiovascular and peripheral vascular conditions. The ultimate goal is to enable students to design and implement evidence-based physiotherapeutic interventions that are scientifically grounded and tailored to individual patient needs.				
Learning Outcomes	**Upon successful completion of the theoretical component of this course, students should be able to:** • Evaluate and document cardiac disorders using appropriate clinical methods • Observe, assess, and justify the presence of vascular disorders • Recognize the pathophysiology and clinical features of cardiovascular diseases • Understand physiotherapy assessment methods and intervention strategies for both acute and chronic circulatory conditions • Interpret key elements of an electrocardiogram (ECG) • Understand the role and therapeutic value of exercise in the prevention and management of cardiovascular disease and aplication • Design and organize a safe, effective, and evidence-based rehabilitation program tailored to the patient's clinical findings **Upon successful completion of the laboratory component of this course, students should be able to:** • Assess patients with cardiovascular and peripheral vascular disorders • Set therapeutic goals aimed at improving the clinical status and functional capacity of cardiovascular patients • Apply physiotherapeutic interventions in cases of acute and chronic cardiovascular disease, post-surgical recovery, and prolonged immobility				

	• Reassess treatment plans by identifying clinical signs of improvement or deterioration • Design and implement progressive exercise programs for cardiovascular disease prevention and rehabilitation • Select and apply appropriate clinical evaluation tools for cardiovascular patients, aligned with the World Health Organization's International Classification of Functioning, Disability and Health (ICF) framework • Design and implement therapeutic exercise programs appropriate to the cardiovascular profile, exercise tolerance, and safety considerations of patients with circulatory or cardiac conditions.		
Prerequisites	None	Co-requisites	None
Course Content	Exercise and circulatory system Evaluation of patients with cardiovascular problems and implementation of relevant physiotherapeutic interventions Physiotherapeutic treatment of peripheral vascular diseases Electrocardiogram data Prevention and rehabilitation of cardiovascular diseases Physiotherapy in intensive care unit Cardiopulmonary resuscitation - Paediatric Resuscitation Athletic Heart Syndrome Clinical Imaging - Bradycardia- Vasomotor Diseases - Secondary Vasomotor Lesions Vasomotor Thrombovascular - Peripheral Vascular Diseases Intermittent lameness and its treatment Fatigue tests Physiotherapeutic Assessment and Therapeutic Intervention in: Venous Diseases Thrombosis Edema With the support of audiovisual materials and anatomical models, students receive hands-on training in the physiotherapeutic management of circulatory system diseases. They are required to present course-related projects, applying observation and clinical interpretation to demonstrate their understanding of the material. Additionally, students become familiar with accessing and utilizing academic resources, including physical libraries, electronic databases, and reliable online sources. Through practical application, they also develop the technical skills necessary to deliver targeted physiotherapy care in cardiovascular and peripheral vascular conditions.		
Teaching Methodology	Face to Face		
Bibliography	Burton, G., 2019. Clinical Manifestations of Respiratory Disease. 8th edition. Mosby. Frownfelter, D. & Dean, E., 2012. Cardiovascular and Pulmonary Physical Therapy: Evidence and Practice. 5th edition. Mosby. Heuer, A., 2018. Wilkins' Clinical Assessment in Respiratory Care. 8th edition. Mosby.		

	Jones, R.L. & Hawkins, M., 2023. Evidence-Based Cardio-Respiratory Physiotherapy. 2nd edition. Elsevier. Main, E. & Denehy, L., 2015. Cardiorespiratory Physiotherapy: Adults and Paediatrics. 5th edition. Elsevier Health Science. Reid, W.D. & Chung, F., 2013. Cardiopulmonary Physical Therapy: Management and Case Studies. 2nd edition. SLACK Incorporated. Smith, K.P. & Lee, J., 2024. Advanced Techniques in Cardiorespiratory Physical Therapy. 1st edition. Oxford University Press. Watchie, J., 2010. Cardiovascular and Pulmonary Physical Therapy. 2nd edition. Saunders.
Assessment	Examination 90% Class participation and Attendance 10% 100%
Language	Greek & English

Course Title	Manual Therapy				
Course Code	PHY240				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	2nd Year/ 2nd Semester				
Teacher's name	Iris Rousou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The purpose of this course is to analyze and apply specific techniques for the mobilization of joints and soft tissues. Students will learn to assess physiological movement limitations and determine joint range of motion using linear passive mobilization techniques. The course also introduces students to the differential assessment of intra-articular and extra-articular dysfunctions, as well as to the principles and application of neural tissue mobilization techniques.				
Learning Outcomes	**Upon successful completion of the theoretical component of this course, students should be able to:** • Identify and select appropriate treatment techniques based on the patient's clinical presentation and physiotherapeutic assessment • Assess mechanical sensitivity and mobility of peripheral nerve tissue using neurodynamic techniques • Manage increased mechanical sensitivity and hypomobility of peripheral neural tissue through slider and tensioner techniques • Evaluate muscle imbalances affecting the spine and extremities • Apply Muscle Energy Techniques to address muscle imbalances • Justify the use of intra-articular mobilization techniques for both assessment and treatment of musculoskeletal conditions • Identify biological tissue adaptations resulting from intra-articular mobilization • Predict the physiological mechanisms underlying treatment outcomes • Recall and apply foundational principles of soft tissue mobilization • Differentiate between types of dysfunctions affecting joint and soft tissue structures				

<table>
<tr><td></td><td colspan="3">Upon successful completion of the laboratory component of this course, students should be able to:
Select and apply appropriate manual therapy techniques tailored to specific dysfunctions
Perform differential assessments to distinguish between intra-articular and extra-articular dysfunctions
Apply peripheral nerve mobilization techniques during both assessment and treatment of peripheral neuropathies
Use Muscle Energy Techniques effectively to correct muscle imbalances
Evaluate and treat intra-articular dysfunctions across various joints in the body</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">Peripheral Nerve Tissue Mobilization: Application of neurodynamic techniques for the treatment of peripheral musculoskeletal neuropathies
Muscle Energy Techniques (MET): Use of MET for the correction and treatment of muscular imbalances affecting the spine and extremities
Intra-Articular Mobilization Techniques: Application of mobilization techniques for the treatment of intra-articular dysfunctions across all joints. Focus on technique selection based on clinical findings
Introduction to Joint Mobilization and Manipulation:
Overview of mobilization and manipulation techniques. Clinical indications and contraindications. Principles of safe application and expected outcomes
Laboratory Component:
Students will develop a clear understanding of joint behavior, the effects of physiotherapeutic intervention, and the specific characteristics of each anatomical region.
With the support of audiovisual materials and anatomical models, students are trained in the application of mobilization techniques. They present course-related projects, demonstrating understanding through observation, interpretation, and hands-on application.
In addition, students:
Learn to access and use academic resources (libraries, electronic databases, and internet-based tools)
Gain technical competence in the safe and effective application of joint and soft tissue mobilization techniques as part of individualized physiotherapy care</td></tr>
<tr><td>Teaching Methodology</td><td colspan="3">Face to Face</td></tr>
<tr><td>Bibliography</td><td colspan="3">Gibbons, P. & Tehan, P., 2016. Manipulation of the Spine, Thorax and Pelvis. 4th edition. Elsevier.
Jull, G., Moore, A., Falla, D., Lewis, J., McCarthy, C. & Sterling, M., 2015. Grieve's Modern Musculoskeletal Physiotherapy. 4th edition. Elsevier.</td></tr>
</table>

	Fernández de las Peñas, C., Cleland, J. & Dommerholt, J., 2015. Manual Therapy for Musculoskeletal Pain Syndromes. 1st edition. Elsevier. Hing, W., Hall, J. & Mulligan, B., 2015. The Mulligan Concept of Manual Therapy. 1st edition. Elsevier. Magee, D., 2015. Orthopedic Physical Assessment. 6th edition. Elsevier. Childs, J.D. & Fritz, J.M., 2021. Mobilization and Manual Therapy in Musculoskeletal Practice: Evidence-Based Techniques. 2nd edition. Elsevier. Cleland, J.A. & Snyder, A.F., 2022. Contemporary Manual Therapy: Theory and Clinical Application. 1st edition. Springer.
Assessment	Examination 90% Class participation and Attendance 10% 100%
Language	Greek & English

Course Title	Communication Skills in Physiotherapy				
Course Code	PHY245				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year/Semester	2rd Year / 2nd Semester				
Teacher's Name	TBA				
ECTS	3	Lectures / week	1 hour / 14 weeks	Laboratories / week	2 hours/14 weeks
Course Purpose and Objectives	Communication is pivotal in establishing an effective therapist-patient relationship and promoting treatment adherence. In addition, poor communication is largely associated with an increased risk of litigation. Communication skills can be developed by learning and practice. The aim of this course is to develop physiotherapy students' communication skills and reflective thinking. The students will learn how to establish rapport, demonstrate empathy, and how to handle difficult emotional outbreaks during their professional carrier.				
Learning Outcomes	Upon successful completion of this course students should be able to: • Perform an effective structured physiotherapy interview • Implement motivational interview skills • Demonstrate empathy and establish rapport • Apply effective communication skills in all doctor-patient interactions • Recognize, appreciate and be able to cope with patient's needs, perceptions, moral and ethical beliefs. • Appreciate the role of human factors in healthcare practitioners' performance and effectiveness				
Prerequisites	None	Co-requisites	None		
Course Content	• Importance of practicing good communication skills • Motivational Interview • Establishing rapport- Empathy and how to demonstrate it • Cultural background and communication • Giving medical information, managing uncertainty and communicating risks • Dealing with bad news				

	• Talking to children and young patients • Talking to patients with disabilities • Talking about mistakes and dealing with complaints • Talking about sex and sexuality • Dealing with the difficult patient or “expert patient” • Professional behaviour and communication (patient referral, handover techniques, writing patient reports)

Teaching Methodology	Face-to-face
	• The course is taught using a variety of teaching and learning methodologies as listed below to enhance student’s learning experience:Lectures
	• Basic Teaching Methodologies
	  ○ Interactive small group tutorials
	  ○ Computer Assisted Learning
	  ○ Team-based learning
	• Laboratory Practices:
	  ○ Simulation Labs
	  ○ Virtual courses

Bibliography	• Clinical communication skills, Peter Washer, Oxford University Press. • Communication skills for Medicine, Margaret Lloyd and Robert Bor, Churchill- Livingstone. • Silverman JD, Kurtz SM, Draper J (1998) Skills for Communicating with Patients. Radcliffe Medical Press (Oxford) • Miller, W. R., & Rollnick, S. (2023). *Motivational interviewing: helping people change and grow.* Fourth edition. The Guilford Press, a division of Guilford Publications, Inc.
Assessment	Theoretical assessment (Midterm & Final Exam) A written test is applied to evaluate knowledge and critical reasoning regarding the topics covered during the semester. Practical assessment: • Objective Structured Clinical Examination (OSCE) • Standardized Patient Participation and Attendance is evaluated when students engage in the learning activities as described below: • Ask questions and actively participate in debates and discussions during classes; • Complete tasks required by the professor during classes and as individual work; • Comply with deadlines to deliver assignments; • Show collaborative attitude when engaged in group work;

<table>
<tr><td></td><td>

Assumes responsibility for his/her tasks and deliverables;
Portray focus by not getting distracted with other activities that are not part of the learning sessions.

<table>
<tr><td>Examinations</td><td>70%</td></tr>
<tr><td>Practical Assessment</td><td>20%</td></tr>
<tr><td>Participation and Attendance</td><td>10%</td></tr>
<tr><td>Total</td><td>100%</td></tr>
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<tr><td>Language</td><td>Greek & English</td></tr>
</table>

Course Title	Inter-professional Practice in Healthcare				
Course Code	PHY250				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester	2nd Year / 2nd Semester				
Teacher's Name	TBA				
ECTS	3	Lectures / week	2 hrs / 14 weeks	Laboratories / week	0 hrs / 14 weeks
Course Purpose and Objectives	This course provides an important perspective on interprofessional communication and collaboration in health care. Students will be introduced and acquainted with the nature of and need for interprofessional communication, the exploration of the health care professions, the qualities of successful teams and interprofessional interactions, the professional identity, ethics, integrity and values as well as the communication and decision making in the interprofessional environment. Moreover, the course will develop students' skills and abilities to function in inter-professional teams by using knowledge of various health care professions, principles of teamwork pertinent to any setting, and knowledge of teams as they function specifically in health care. In addition, the course will introduce the students to the requirements and responsibilities related to their professional identity and will guide them to adopt the appropriate behaviours that promote and safeguard professional values.				
Learning Outcomes	Upon successful completion of this course students should be able to: ○ Describe key elements of effective interprofessional team-based care and identify barriers to interprofessional collaborative practice. ○ Analyze the positive and negative aspects of interactions between health professionals and patients, families and communities. ○ Identify basic concepts of effective teamwork among professionals with an emphasis on communication and teamwork. ○ Explore the emerging concept of interprofessional ethics and professionalism as an underpinning of collaborative practice among health professionals. ○ Transform a multidisciplinary group into an interdisciplinary team through leadership, micro system functioning, conflict management, handoffs and communication. ○ Recognize and manage conflicts in daily clinical practice. ○ Demonstrate commitment to their professional responsibilities.				

<table>
<tr><td></td><td colspan="3">o Behave according to professional values</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">In that regard, students will familiarize themselves with:

o Interprofessional Education and its relationship to interprofessional practice and care

Key elements of integrated care: collaborative models in healthcare

o Ethics and its role in interprofessional practice
o Role Clarification: the roles and responsibilities of each healthcare team member and profession (doctors, nurses, physiotherapists dieticians, occupational therapists speech and language therapists, psychologists etc.)
o Effective communication strategies and ethical conduct for addressing error and preventable harms in primary care, hospitals, clinics and rehabilitation centres
o Fundamental communication & interpersonal skills for collaborative teamwork
o Basic aspects of the team function: Team and teamwork
o Leadership in healthcare, conflict management and negotiation
o Patient Safety & Communication in Interprofessional Practice
o Dealing with Interprofessional conflict: conflict resolution & negotiation in healthcare
o Adverse events, root cause analysis (RCA), and communication
o Fundamentals in Quality Improvement.
o Collaborative decision-making procedures, tools and approaches.
o Patient-centered care: the patient as a member of the healthcare team.

Professional identity in Physiotherapy

o Definition of professional identity in physiotherapy
o Professional values
o Professional responsibilities
o Behaviours promoting professionalism</td></tr>
<tr><td>Teaching Methodology</td><td colspan="3">Face-to-face

The course is taught using a variety of teaching and learning methodologies as listed below to enhance student’s learning experience:

• Lectures
• Basic Teaching Methodologies
o Interactive small group tutorials</td></tr>
</table>

<table>
<tr><td></td><td>Case-based Learning Discussions</td></tr>
<tr><td>Bibliography</td><td>TEXTBOOK:

○ Foundations of Interprofessional Collaborative Practice in Health Care. Margaret Slusser, Luis I. Garcia, Carole-Rae Reed, Patricia Quinn McGinnis. Elsevier
○ Understanding Medical Professionalism. Wendy Levinson, Shiphra Ginsburg, Frederic W. Hafferty, Catherine R. Lucey, Lange.

ADDITIONAL RECOMMENDED TEXTBOOKS:

Interprofessional Health Care Practice. Sue Coffey, Charles Anyinam. Pearson Canada

Healthcare Teamwork: Interprofessional Practice and Education. Theresa Drinka, Philipp Clark, ABC-CLIO.</td></tr>
<tr><td>Assessment</td><td><table><tr><td>Examinations</td><td>70%</td></tr><tr><td>Assignment</td><td>20%</td></tr><tr><td>Class participation and Attendance</td><td>10%</td></tr><tr><td></td><td>100%</td></tr></table></td></tr>
<tr><td>Language</td><td>Greek & English</td></tr>
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Course Title	Research Methodology and Biostatistics				
Course Code	HEA115				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year / 1st Semester				
Teacher's name	Yiannis Alatsathianos				
ECTS	6	Lectures / week	3 hours/ 14 weeks	Laboratories / week	None
Course Purpose and Objectives	The aim of this course is to equip students with the ability to locate scientific information and understand the fundamental principles of designing and conducting research in the field of health sciences. Through the course, students will also develop skills in evaluating scientific articles and gain an understanding of the ethical considerations involved in conducting research. By the end of the course, students should recognize the importance of research methodology and its role in evidence-based practice within health sciences.				
Learning Outcomes	**Upon successful completion of the course, students should be able to:** • Identify and interpret the role of research methodology in applying evidence-based practices in the health sciences • Formulate research questions and hypotheses and plan appropriate data collection methods • Apply descriptive statistics and conduct basic statistical hypothesis testing • Interpret findings from both quantitative and qualitative studies • Describe, recognize, and analyze the steps involved in research design, including protocol development and data collection, in both quantitative and qualitative research • Critically read and evaluate the quality of published scientific articles in the field of health sciences • Explain the findings and relevance of systematic reviews in the health sciences				
Prerequisites	None	Co-requisites	None		
Course Content	By the end of the course, students will have a solid understanding of the content covered in Research Methodology and Biostatistics, with a focus on research in the health sciences. The course introduces the				

<table>
<tr><td></td><td>concepts and types of scientific research, research ethics, and scientific approaches to problem-solving in health science contexts. Students will be trained in advanced information retrieval techniques and search strategies using various electronic medical databases.

Key topics include the formulation of research problems, development of research questions and protocols, and the role of pilot studies. The course covers different sampling methods, as well as the concepts of reliability and validity. It also addresses threats to internal and external validity and strategies for managing them.

Students will learn about various data collection tools and how to manage data according to variable types and measurement scales. Special emphasis will be placed on systematic reviews and meta-analyses. Finally, students will be taught how to apply appropriate statistical methods to investigate research questions and interpret results using statistical significance.</td></tr>
<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>Christensen, L.B., Johnson, R.B., Turner, L.A., 2021. Research Methods, Design, and Analysis. 13th edition. Boston: Pearson
Creswell, J.W., Creswell, J.D., 2024. Research Design: Qualitative, Quantitative, and Mixed Methods Approaches. 6th edition. Los Angeles: SAGE Publications.
Higgins, J.P.T., Thomas, J., Chandler, J., Cumpston, M., Li, T., Page, M.J., Welch, V.A. (eds.), 2024. Cochrane Handbook for Systematic Reviews of Interventions, version 6.5 (updated August 2024). The Cochrane Collaboration
Marder, P.M., 2011. Research Methods for Science. Cambridge: Cambridge University Press.
Padgett, D.K., 2011. Qualitative and Mixed Methods in Public Health. 1st edition. London: SAGE Publications Ltd.
Picardi, C.A., Masick, K.D., 2013. Research Methods: Designing and Conducting Research with a Real-World Focus. London: SAGE Publications Ltd.
Saks, M., Allsop, J., 2012. Researching Health: Qualitative, Quantitative and Mixed Methods. 2nd edition. London: SAGE Publications Ltd.
Robson, C., McCartan, K., 2023. Real World Research. 5th edition. Chichester: Wiley.</td></tr>
<tr><td>Assessment</td><td><table><tr><td>Examination</td><td>70%</td></tr><tr><td>Class participation and Attendance</td><td>10%</td></tr><tr><td>Assignment(s)</td><td>20%</td></tr><tr><td></td><td>100%</td></tr></table></td></tr>
<tr><td>Language</td><td>Greek & English</td></tr>
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Course Title	Physiotherapy in Neurological Conditions II				
Course Code	PHY322				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year/ 1st Semester				
Teacher's name	Emmanouela Ioannou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The purpose of this course is to provide students with foundational knowledge around nervous system diseases and injuries. The course focuses on correlating clinical symptoms of central nervous system conditions with the design of comprehensive rehabilitation programs. Building on the theoretical background from previous related courses, students will study and apply modern methods of physiotherapeutic assessment and treatment for neurological disorders and injuries, guided by current evidence-based research and clinical best practices.				
Learning Outcomes	**Upon successful completion of the theoretical component of this course, students should be able to:** • Assess and interpret the clinical presentation of patients with central nervous system (CNS) diseases and injuries • Design and implement rehabilitation programs for patients with brain and spinal cord injuries • Evaluate and apply modern physiotherapeutic assessment methods appropriate to neurological conditions • Understand and define the physiotherapist's role within a multidisciplinary rehabilitation team • Select and adapt appropriate assistive devices that enhance patient autonomy • Operate modern rehabilitation equipment used in the treatment of neurological disorders • Analyze and explain the mechanisms of action of therapeutic agents, techniques, and modalities based on evidence-based physiotherapy practice **Upon successful completion of the laboratory component of this course, students should be able to:** • Apply appropriate hands-on techniques to enhance the functional abilities of patients with neurological conditions • Use effective techniques to educate patients and promote their independence				

<table>
<tr><td></td><td colspan="3">Select and customize assistive devices to support autonomy in patients with spinal cord injury, stroke, traumatic brain injury, or multiple sclerosis
Operate and apply modern rehabilitation equipment used in the treatment of CNS disorders and injuries
Select and utilize appropriate clinical evaluation tools for patients with CNS-related paralysis, in accordance with the WHO's International Classification of Functioning, Disability and Health (ICF) framework
Develop and apply individualized therapeutic exercise interventions adapted to the neurological presentation, tone regulation, and functional capacity of each patient, based on principles of neuroplasticity and motor relearning.</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">Clinical Physiotherapeutic Assessment of Neurological Disorders: Principles and procedures for the evaluation and rehabilitation of adult patients with neurological diseases
Physiotherapeutic Assessment and Rehabilitation in:
Brain Injuries
Cranio-Cerebral Injuries
Spinal Cord Injuries
Cerebrovascular Accident (Stroke)
Brain Tumors
Neuromuscular Disorders (e.g., Myasthenia Gravis)
Neurodegenerative Conditions:
Parkinson's Disease
Multiple Sclerosis
Amyotrophic Lateral Sclerosis (ALS)
Huntington's Disease
Rehabilitation of Paraplegia and Quadriplegia
Intervention Across Different Stages:
Physiotherapy in the acute phase
Advanced physiotherapy techniques
Functional Rehabilitation Training:
Floor-based exercises
Patient transfers and mobility
Gait training and re-education
Balance retraining
Activities of daily living and independence training
Chronic Pain Assessment and Management in Neurological Disorders (e.g., chronic central neuropathic pain, stroke, spinal cord injuries, MS)</td></tr>
<tr><td>Teaching Methodology</td><td colspan="3">Face to Face</td></tr>
<tr><td>Bibliography</td><td colspan="3">Lennon, S., Ramdharry, G., and Verheyden, G., 2018. Physical Management for Neurological Conditions, 4th Edition. Elsevier</td></tr>
</table>

	Lisa Harvey, 2008. Management of Spinal Cord Injuries: A Guide for Physiotherapists. Churchill Livingstone Shumway-Cook, A., and Woollacott, M. H., 2017. Motor control: Translating research into clinical practice (5th ed.). Philadelphia: Wolters Kluwer Health/Lippincott Williams & Wilkins. Stokes, M. and Lennon, S., 2008. Pocketbook of Neurological Physiotherapy. Churchill Livingstone Stokes, M.,and Stack E., 2011. Physical management for neurological conditions. Churchill Livingstone Umphred, D.A., and Lazaro R., 2012. Neurological Rehabilitation (6th Edition). Elsevier Umphred, D. A., 2013. Umphred's neurological rehabilitation. St. Louis, Mo: Elsevier/Mosby.
Assessment	Examination 90% Class participation and Attendance 10% 100%
Language	Greek & English

Course Title	Ergophysiology				
Course Code	PHY304				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year / 1st Semester				
Teacher's name	Antonis Constantinou, Andreas Antoniou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	1 ώρα / 14 weeks
Course Purpose and Objectives	The primary aim of this course is to introduce students to the fundamental concepts surrounding the impact of chronic diseases on functional capacity, with particular emphasis on exercise limitations in special populations. These include older adults and individuals living with cardiovascular, respiratory, and metabolic conditions. The course also explores the role of structured, systemic exercise as a therapeutic intervention. Emphasis is placed on understanding how exercise can alleviate disease symptoms, reduce morbidity, enhance physical fitness and health status, and ultimately improve the overall quality of life for individuals with chronic illnesses.				
Learning Outcomes	**Upon successful completion of this course, students will be able to:** • Identify and describe limitations in physical fitness resulting from chronic disease. • Select and apply appropriate clinical assessment tools for patients with functional limitations, in accordance with the World Health Organization's International Classification of Functioning, Disability and Health (ICF). • Explain the pathophysiological mechanisms underlying reduced functional capacity. • Analyze and interpret outcomes from standardized evaluation tests used with individuals with chronic conditions. • Differentiate the effects of exercise and physical activity across various chronic diseases. • Design, implement, and adapt exercise programs tailored to the needs of specific populations • Evaluate potential risks associated with exercise participation in individuals with chronic health conditions.				

Prerequisites	None	Co-requisites	None
Course Content	• Exercise, Health and Wellness o Guidance - Adjusting the training process o Aerobic Fitness o Power o Mobility o Coordination skills o Speed • Exercise and Special Populations o Childhood o Geriatric Exercise • Heart Diseases Coronary Disease Chronic heart failure Valve diseases • Angiopathies o Hypertension o Hyperlipidemia and Dyslipidemia • Exercise and Chronic Pulmonary Diseases • Chronic obstructive pulmonary disease o Asthma • Metabolic Diseases o Diabetes mellitus o Obesity o Metabolic Syndrome • Exercise and Kidney Diseases • Bone and Joint Diseases • Osteoporosis • Osteoarthritis • Rheumatoid Arthritis • Immune system disorders o Cancer o Chronic Immunodeficiency Syndrome (AIDS) • Neuromuscular Diseases o Multiple Sclerosis o Cerebral Palsy o Alzheimer's o Parkinson • Exercise, Stress and Anxiety • Exercise and Depression		

<table>
<tr><td></td><td>• Exercise in different or extreme environments (e.g. cold, heat, pollution, altitude)</td></tr>
<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>Durstine, J.L. & Moore, G.E., 2005. ACSM’s Exercise for Chronic Diseases and Disabilities. Paschalidis Medical Publications.

Thompson, W.R., 2019. ACSM's Clinical Exercise Physiology. Human Kinetics, Champaign, Illinois, USA. ISBN: 978-1-4963-8780-6

Taylor, A. & Johnson, M., 2019. Physiology of Exercise and Healthy Aging. Human Kinetics, Champaign, Illinois, USA. ISBN: 978-0-7360-5838-4

Ehrman, J., Gordon, P., Visich, P. & Keteyian, S., 2018. Clinical Exercise Physiology. 4th edition. Human Kinetics, Champaign, Illinois, USA. ISBN: 978-1-4925-8849-8

Coast, J.R. & Oden, G., 2017. Clinical Exercise Physiology: Physiological Assessments in Health, Disease and Sport Performance. 3rd edition. Kendall Hunt Publishing Company, Dubuque, IA, USA. ISBN: 978-1-5249-0159-2

Moore, G.E., Durstine, J.L. & Painter, P.L., 2016. ACSM’s Exercise Management for Persons with Chronic Diseases and Disabilities. Human Kinetics, Champaign, Illinois, USA. ISBN: 978-1-4504-3414-0

Scott, A. & Gidlow, C., 2016. Clinical Exercise Science. Routledge, Abingdon, UK and New York. ISBN: 978-1-1346-1784-5

Chodzko-Zajko, W., 2014. ACSM’s Exercise for Older Adults. Human Kinetics, Champaign, Illinois, USA. ISBN: 978-1-6091-3647-5

Goodman, C. & Helgeson, K., 2011. Exercise Prescription for Medical Conditions: Handbook for Physical Therapists. F.A. Davis Company, USA. ISBN: 978-0-8036-1714-8</td></tr>
<tr><td>Assessment</td><td><table>
<tr><td>Examination</td><td>70%</td></tr>
<tr><td>Assignment(s)</td><td>20%</td></tr>
<tr><td>Class Participation and Attendance</td><td>10%</td></tr>
<tr><td></td><td>100%</td></tr>
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<tr><td>Language</td><td>Greek & English</td></tr>
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Course Title	Physiotherapy of the Musculoskeletal System I				
Course Code	PHY312				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year/ 1st Semester				
Teacher's name	Antonis Zacharopoulos				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The aim of this course is to help students understand the underlying mechanisms that lead to dysfunctions in the neuromusculoskeletal system. By the end of the course, students should be able to identify structural and functional deviations, analyze their clinical presentation, and justify their causes. A central focus is placed on the physiotherapeutic evaluation of spinal abnormalities and limb deformities, with an emphasis on identifying dysfunction, assessing joint stress, and interpreting how these factors impact movement and function.				
Learning Outcomes	**Upon successful completion of the theoretical part of the course, students will be able to:** • Identify the mechanisms of injury and the stages of tissue healing • Recognize musculoskeletal conditions through clinical evaluation • Analyze muscle function of the upper and lower limbs and spine • Recall relevant knowledge of the peripheral nervous and musculoskeletal systems • Collect and interpret patient data during assessment • Provide ergonomic advice and prescribe therapeutic exercises • Assess clinical findings and select appropriate interventions based on evidence-based practices • Differentiation, assessment and management of nociceptive and nociplastic pain • Assessment and management of peripheral neuropathic pain due to peripheral nerve injuries **Upon successful completion of the laboratory part of the course, students will be able to:**				

	• Evaluate the patient's clinical condition and identify deviations from normal function • Choose appropriate, evidence-based intervention strategies • Detect structural and functional impairments such as weakness, muscle length imbalances, muscle contracture or reduced mobility • Palpate soft and hard tissues to support diagnostic findings • Assess and analyze the implications of injuries such as fractures, muscle or ligament damage, and peripheral nerve involvement • Apply and justify specific treatment protocols and adjust them as needed • Monitor patient progress and adapt treatment based on objective outcomes • Select and use appropriate clinical evaluation tools aligned with the WHO's ICF classification system • Select and apply therapeutic exercise techniques to improve mobility, strength, and functional performance of the lower limb, adapting to the biomechanical characteristics and rehabilitation stage of each condition.		
Prerequisites	None	Co-requisites	None
Course Content	**Physiotherapeutic Limb Assessment**: Principles and techniques for evaluating the musculoskeletal condition of the upper and lower limbs. **General Principles of Rehabilitation:** Stages of rehabilitation, tissue healing, and treatment planning based on clinical findings. **Tendon Injuries**: Common tendon conditions including: • Achilles tendon • Patellar tendon • Lateral epicondyle (tennis elbow) • Shoulder tendons (e.g. rotator cuff) **Tendon Ruptures**: Evaluation and physiotherapy approach following complete or partial ruptures. **Muscle Injuries**: Recognition and management of strains, contusions, and tears. **Specific Upper Extremity Injuries:** • Carpal tunnel syndrome • De Quervain's tenosynovitis (stenosing tenosynovitis)		

	• Thoracic outlet syndrome (Paddle Syndrome) **Bursitis**: Identification and physiotherapy management of inflamed bursae. **Joint Injuries** • Ankle sprain • ACL and PCL injuries • Lateral knee ligament injuries • Elbow joint injuries (including lateral epicondylitis) • High ankle sprain • Acromioclavicular joint injuries **Meniscus Injury**: Evaluation and treatment of meniscal tears and degeneration. **Plantar Fasciitis**: Assessment and treatment of plantar fascia inflammation and overuse. **Dislocations**: Focus on shoulder dislocations, mechanisms, reduction, and rehabilitation. **Shoulder Instability**: Chronic and acute instability: assessment, treatment, and prevention strategies. **Fractures**: Basic fracture management and post-immobilization rehabilitation principles. **Specialized Lower Extremity Injuries**: Complex and sport-related lower limb injuries and their physiotherapeutic management.
Teaching Methodology	Face to Face
Bibliography	Cook, C., 2015. Orthopedic Chiropractic: A Documented Approach. Lagos Dimitrios Publications. Fousekis, K., 2015. Applied Sports Physiotherapy. Paschalidis Scientific Publications. Brukner, P. & Khan, K., 2012. Clinical Sports Medicine. McGraw-Hill. Magee, D., 2020. Orthopedic Physical Assessment. 7th edition. Elsevier. Prentice, W., 2018. Rehabilitation Techniques in Sports Medicine. 6th edition. Jones & Bartlett Learning. Perry, J. & Moore, P., 2011. Neuromusculoskeletal Examination and Assessment. 4th edition. Churchill Livingstone. Donatelli, R. & Wooden, M., 2010. Orthopaedic Physical Therapy. 4th edition. Churchill Livingstone.

	Donatelli, R. et al., 2012. Orthopaedic Physical Therapy. 5th edition. Churchill Livingstone.
Assessment	Examination 90% Class participation and Attendance 10% 100%
Language	Greek & English

Course Title	Clinical Practice I				
Course Code	PHY315				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year/ 1st Semester				
Teacher's name	Antonis Constantinou, Freund Anne				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	11 hours / 14 weeks
Course Purpose and Objectives	This course prepares students to understand the structure and function of the cardio-respiratory system and equips them with the knowledge needed to evaluate patients effectively. Students learn how to gather and interpret relevant clinical information and develop individualized physiotherapy rehabilitation plans. Emphasis is placed on understanding the criteria for selecting appropriate therapeutic methods and techniques based on a thorough assessment and current evidence-based practice. By the end of the course, students will be able to apply clinical reasoning to manage cardio-respiratory conditions safely and effectively.				
Learning Outcomes	**Upon completion of the theoretical part of the course, students will be able to:** • Identify the specific needs of patients requiring cardio-respiratory physiotherapy and set realistic treatment goals. • Evaluate the clinical picture, select appropriate rehabilitation strategies, and adjust plans as needed. • Maintain accurate patient records, including initial assessments and ongoing treatment outcomes. • Understand and apply principles of bioethics and professional responsibility in clinical settings. • Recognize the importance of interdisciplinary collaboration in patient care. • Consider psychological, social, and economic factors that may affect patient outcomes. • Reassess patients, record findings, and evaluate treatment effectiveness in order to modify rehabilitation programs as appropriate. **Upon completion of the laboratory part of the course, students will be able to:**				

<table>
<tr><td></td><td colspan="3">Evaluate, document, and interpret clinical findings in real-world hospital settings for patients with cardio-respiratory conditions.
Use clinical data to design and implement evidence-based physiotherapy plans.
Observe and assess patient behavior, identify key clinical issues, and set both short- and long-term goals tailored to each individual.
Develop and apply programs aimed at improving cardio-respiratory endurance, muscle strength, and functional independence.
Interpret lab and clinical findings, perform specialized physiotherapy techniques, and adapt treatment as the patient progresses.
Understand the roles of other healthcare professionals and demonstrate a responsible, team-oriented approach to care.
Deliver physiotherapy interventions confidently and safely, maintaining a high standard of care for both patients and colleagues
Integrate therapeutic exercise into rehabilitation across the lifespan, adjusting activities to age-related changes, functional abilities, and the individual's level of physical and social participation.</td></tr>
<tr><td>Prerequisites</td><td>PHY232, PHY235</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">Advanced Evaluation of the Cardiopulmonary Patient
Includes interpretation of:
Blood gas analysis
Imaging of the respiratory and cardiovascular systems
Electrocardiogram (ECG)
Spirometry
Bronchoscopy
Clinical Case Discussions
Respiratory diseases
Cardiovascular diseases
Intensive care and enhanced care settings (mechanical support)
Organ transplantation (heart and lung)
Post-surgical and terminally ill patients
Emergency situations in respiratory and cardiovascular conditions
Neonatal and pediatric patients with cardiopulmonary conditions</td></tr>
</table>

	Cardiopulmonary Physiotherapy Rehabilitation Methods and techniques, supported by current research, including: • Early mobilization • Respiratory positioning • Techniques to improve respiratory volumes • Airway clearance strategies • Respiratory muscle training • Use of prosthetic aids to support breathing **Exercise Program Design** • Group programs for patients with chronic respiratory disease • Group programs for patients with chronic cardiovascular disease • Preventive programs for high-risk populations (e.g. elderly, immunocompromised individuals) **Physiotherapy in the Community**: The role of the physiotherapist outside the hospital setting, with emphasis on prevention, education, and support for long-term conditions **Clinical Practice**: Clinical experience is a core component of the course. Students apply theoretical and practical knowledge in real patient care settings, reinforcing their learning and developing essential professional skills required for physiotherapy practice.
Teaching Methodology	Face-to-Face Instruction Includes hands-on Clinical Practice conducted within clinical settings, supervised by experienced and specialized clinical instructors.
Bibliography	American College of Sports Medicine, 2017. ACSM's Guidelines for Exercise Testing and Prescription. 3rd edition. Lippincott Williams & Wilkins. DeTurk, W.E. & Cahalin, L.P., 2018. Cardiovascular and Pulmonary Physical Therapy: An Evidence-Based Approach. 3rd edition. McGraw-Hill Medical. Frownfelter, D. & Dean, E., 2022. Cardiovascular and Pulmonary Physical Therapy: Evidence and Practice. 6th edition. Mosby. Hillegass, E.A., 2022. Essentials of Cardiopulmonary Physical Therapy. 5th edition. Elsevier. Hough, A., 2017. Hough's Cardiorespiratory Care: An Evidence-Based, Problem-Solving Approach. 5th edition. Elsevier. Main, E. & Denehy, L., 2016. Cardiorespiratory Physiotherapy: Adults and Paediatrics. 5th edition. Elsevier Health Sciences.

	Reid, W.D. & Chung, F., 2013. Cardiopulmonary Physical Therapy: Management and Case Studies. 2nd edition. SLACK Incorporated.	
Assessment	Clinical Practice	80%
	Examination	20%
		100%
Language	Greek & English	

Course Title	Pharmacology in Physiotherapy				
Course Code	PHY320				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year/ 2nd Semester				
Teacher's name	Elsanhoury Ahmed				
ECTS	3	Lectures / week	2 hours / 14 weeks	Laboratories / week	None
Course Purpose and Objectives	This course introduces students to the basic principles of general pharmacology. It covers major drug categories organized by disease and body system, focusing on their therapeutic use, mechanisms of action, and potential side effects.				
Learning Outcomes	**Upon successful completion of this course, students will be able to:** • Define what constitutes a drug and identify various dosage forms • Explain how drugs produce their effects in the body • Describe the key principles of pharmacokinetics, including absorption, distribution, metabolism, and elimination • Identify different types of side effects and understand how they relate to a drug's mechanism of action • Recognize common drug interactions and how they can affect drug levels or therapeutic effectiveness • Classify drugs according to the Anatomical Therapeutic Chemical (ATC) system and link drug categories to their main clinical uses				
Prerequisites	None	Co-requisites	None		
Course Content	**Introduction to Pharmacology**: Definitions and key concepts; overview of pharmacodynamics and pharmacokinetics. **Drug Forms and Administration**: Pharmaceutical forms, routes of administration, prescription rules and authorities. **Pharmacodynamics**: Mechanisms of drug action: agonists, antagonists, drug-receptor interactions; measuring therapeutic and toxic effects.				

	Pharmacokinetics: Absorption, bioavailability, distribution, metabolism, and elimination of drugs. **Dosage and Calculations**: Basic dosage units and pharmaceutical dose calculations. **Adverse Effects and Interactions**: Side effects, drug interactions, pharmacovigilance, and adverse reaction reporting. **Dependency and Misuse**: Tolerance, dependence, and addiction. **Drug Information**: Reliable sources for drug information and mechanisms of action; awareness of falsified medications. **Drugs by System** • **Central Nervous System**: Sympathetic and parasympathetic system drugs, CNS depressants (hypnotics), antiepileptics, antipsychotics, antidepressants, anxiolytics, anti-Parkinson's drugs. • **Antibiotics and Anti-Infectives** • **Digestive System**: Drugs acting on the stomach and intestines. • **Circulatory System**: Cardiovascular drugs. • **Pain and Inflammation**: Antipyretics, analgesics, anti-inflammatory drugs. • **Respiratory System**: Medications used in respiratory conditions. • **Endocrine System**: Hormonal therapies. • **Hematology**: Drugs affecting blood and blood-forming organs. • **Oncology and Genetics**: Chemotherapeutic agents, drugs targeting gene abnormalities.
Teaching Methodology	Face to Face
Bibliography	Greenstein, B., 2022. *Sustained-Release Clinical Pharmacology for Nurses*. 2nd edition. Parisian Publications SA. Katzung, B.G., Trevor, A.J., & Kruidering-Hall, M., 2024. *Basic & Clinical Pharmacology*. 16th edition. McGraw-Hill Education. Page, C., Curtis, M., Sutter, M., Walker, M., & Hoffman, B., 2023. *Pharmacology: An Introduction for Healthcare Professionals*. Paschalides Publications. Rang, H.P., Ritter, J.M., Flower, R.J., & Henderson, G., 2021. *Rang & Dale's Pharmacology*. 9th edition. Elsevier. Simonsen, T., Aarbakke, J., Kay, I., Coleman, I., Sinott, P., & Lysaa, R., 2023. *Contemporary Pharmacology: Mechanisms and Therapeutic Use*. Paschalides Publications.

Assessment	Examination	70%	
	Class participation and Attendance	10%	
	Assignment(s)	20%	
		100%	
Language	Greek & English		

Course Title	Physiotherapy of the Musculoskeletal System II				
Course Code	PHY332				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year/ 2nd Semester				
Teacher's name	Kyriakos Pavlou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	This course focuses on understanding the mechanisms behind dysfunctions in the neuro-musculoskeletal system. Students will learn to identify deviations from normal function and accurately interpret clinical symptoms. Effective physiotherapeutic assessment requires a solid grasp of anatomical abnormalities and deformities in the extremities, as well as the ability to justify the presence of dysfunction and recognize joint stress. A key component of the course includes up-to-date knowledge in neuroanatomy and neurophysiology of pain, with emphasis on how pain influences sensory-motor control. Students will also explore the psychosocial model of pain, including recognition and interpretation of yellow, blue, black, and orange flags. Additional topics include: • The anatomy and functional significance of the fascia in musculoskeletal health • The impact of stress on the development of chronic pain and disability • The role of modern communication strategies in clinical practice, with training in motivational interviewing to support behaviour change and improve patient outcomes By the end of the course, students will be equipped with both the clinical reasoning and communication skills necessary for a holistic and evidence-based approach to managing musculoskeletal pain and dysfunction.				
Learning Outcomes	**Upon completion of the theoretical component, students will be able to:** • Conduct thorough subjective and objective assessments to gather and analyze all relevant information, and organize an individualized treatment plan. • Identify and explain pain mechanisms in both acute and chronic musculoskeletal pain syndromes. • Differentiation, assessment, and management of nociceptive, nociplastic, and neuropathic pain in musculoskeletal conditions, based on the current ICD classification				

	• Use validated pain assessment tools (e.g., questionnaires) to support the early detection of individuals at risk of developing chronic pain. • Understand and articulate the role of fascia in both normal and dysfunctional states of the neuro-musculoskeletal system. • Evaluate clinical problems and select treatment methods based on current evidence-based physiotherapy for managing peripheral joint dysfunctions. • Monitor a patient's progress, recognize stagnation or regression, and adjust the intervention plan accordingly with clinical justification. **Upon completion of the laboratory component, students will be able to:** • Perform focused assessments to identify the root causes of neuro-musculoskeletal disorders. • Use palpation, observation, and differential diagnosis techniques to develop appropriate treatment programs, justify their use, and assess outcomes objectively. • Detect ergonomic faults and educate patients using scientifically supported strategies. • Apply the psychosocial model of pain using tools such as the Fear Avoidance Beliefs Questionnaire (FABQ), Tampa Scale for Kinesiophobia, and the Pain Catastrophizing Scale. • Score and interpret psychosocial questionnaires to guide treatment planning. • Learn and apply fascia mobilization techniques through manual and exercise-based therapy. • Use effective, patient-centred communication strategies in clinical practice. • Design and adjust rehabilitation plans based on detailed assessment findings. • Select and apply clinical assessment tools consistent with the WHO's ICF classification for musculoskeletal disorders. • Select and apply therapeutic exercise techniques to improve mobility, strength, and functional performance of the lower limb, adapting to the biomechanical characteristics and rehabilitation stage of each condition.		
Prerequisites	None	Co-requisites	None

Course Content	**Understanding Physiotherapy Assessment**
	• Introduction to the importance and structure of Subjective and Objective Assessment in Physiotherapy
	• Principles of clinical reasoning in developing individualized treatment plans
	Physiotherapeutic Assessment and Rehabilitation in the Following Conditions:
	• **Limb Deformities:**
	  ○ Flat foot, genu varum (bowlegs), genu valgum (knock knees), leg length discrepancy, hallux valgus (big toe deformity), and related biomechanical issues
	  ○ Assessment of contributing factors and appropriate rehabilitation strategies		

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Patellofemoral Dysfunction / Pain:

Evaluation and rehabilitation based on movement analysis and muscular imbalances

Limb Syndromes and Dysfunctions:

Shoulder dysfunctions, hereditary musculoskeletal conditions (e.g., hereditary folliculitis), and other regional syndromes

Spinal Deformities:

Scoliosis, kyphosis, lordosis – identification, postural assessment, conservative physiotherapy management

Arthritic Conditions:

Osteoarthritis (knee, hip, spine), ankylosing spondylitis, post-traumatic arthritis
Functional impact, staging, and physiotherapy goals

Pre- and Postoperative Rehabilitation:

Total joint replacements (shoulder, hip, knee)
Goals and progression of physiotherapeutic intervention before and after surgery

Neuroscience and Pain:

How pain influences sensory-motor control and functional movement
Practical application of knowledge to guide treatment planning

</td></tr>
<tr><td>Teaching Methodology</td><td>Face to Face</td></tr>
<tr><td>Bibliography</td><td>

Brotzman, B.R., & Manske, R.C., 2011. Clinical Orthopaedic Rehabilitation. 3rd edition. Elsevier.
Chaitow, L., 2018. Fascial Dysfunction: Manual Therapy Approaches. Handspring Publishing.
Childs, J.D., & Fritz, J.M., 2021. Mobilization and Manual Therapy in Musculoskeletal Practice: Evidence-Based Techniques. 2nd edition. Elsevier.
Cook, C., 2012. Orthopaedic Manual Therapy. 2nd edition. Pearson.
Jacobs, D., 2016. Dermo Neuro Modulating. TellWell.
Jull, G., Moore, A., Falla, D., Lewis, C., McCarthy, C., & Sterling, M., 2015. Grieve's Modern Musculoskeletal Physiotherapy. 4th edition. Elsevier.
Myers, T., 2014. Anatomy Trains. 3rd edition. Elsevier.
Schmitt, J., & Gatterman, M., 2023. Advanced Manual Therapy: Integration and Treatment Planning. 1st edition. Springer.
Van Griensven, H., Strong, J., & Unruh, A., 2014. Pain: A Textbook for Health Professionals. 2nd edition. Elsevier.

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<tr><td>Assessment</td><td>
<table>
<tr><td>Examination</td><td>90%</td></tr>
<tr><td>Class participation and Attendance</td><td>10%</td></tr>
<tr><td></td><td>100%</td></tr>
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<tr><td>Language</td><td>Greek & English</td></tr>
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Course Title	Biomechanics & Ergonomy				
Course Code	PHY335				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year / 2nd Semester				
Teacher's name	TBA				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	1 ώρα / 14 weeks
Course Purpose and Objectives	The purpose of this course is to provide students with a foundational understanding of the kinetic and kinematic analysis of human movement, along with the ergonomic principles that govern functional motor behavior. Emphasis is placed on identifying and interpreting the forces and mechanical loads acting on the body during both normal and abnormal movement patterns. Students will explore concepts such as load, overload, and mechanical stress, and how these affect the musculoskeletal system over time. The course also aims to develop the ability to assess deviations from typical movement and to design retraining strategies that promote efficient, safe, and functional movement. Instruction will focus on analyzing how movement adapts or compensates under different conditions, and how to restore or enhance physiological movement patterns through evidence-based physiotherapeutic interventions.				
Learning Outcomes	**Upon successful completion of the theoretical component of the course, students will be able to:** • Interpret the forces and mechanical loads that occur during different types of human movement. • Identify the structural adaptations that take place in biological tissues in response to various loads and activities. • Predict the effects of poor posture, repetitive movement, and biomechanical stress on the musculoskeletal system. • Analyze both physiological and pathological gait cycles. • Explain the behavior of biological materials under stress and at rest. • Recognize pathological joint kinematics resulting from neurological or soft tissue injuries. • Differentiate between qualitative and quantitative approaches to movement analysis. • Assess the magnitude of mechanical load during daily functional activities.				

<table>
<tr><td></td><td colspan="3">Understand and apply the basic principles of ergonomics to clinical and everyday scenarios.
Recognize the role of orthotic and prosthetic devices in correcting movement deviations and supporting functional mobility.
Upon successful completion of the laboratory component of the course, students will be able to:
Analyze complex and combined movements across multiple planes.
Identify the forces acting during various physical activities and propose appropriate injury prevention strategies.
Analyze key factors that influence joint stability and mobility.
Detect postural or movement deviations and propose corrective strategies.
Use and interpret data from modern laboratory tools and equipment for movement analysis.</td></tr>
<tr><td>Prerequisites</td><td>PHY204</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">Biomechanics
Laws of physics applicable to physiotherapy (kinetics, kinematics, work, power, energy, pairs of forces).
Biomechanics of materials (tension, deformation, elasticity, plasticity, tensile stress, compression, shear, torsion, stress relaxation, creep, hysteresis).
Bone biomechanics (cortical or compact bone, spongy bone, biomechanical mechanisms of tensile, compression, torsion, and shear fractures; bone’s response to the rate of load application; bone fatigue from repeated loading; mechanical behavior of bone; bone regeneration, etc.).
Biomechanics of collagen tissues (factors affecting biomechanical properties; relationship between tendon strength and cross-sectional area; relationship between tendon strength and length; effects of immobilization or lack of exercise; effects of pregnancy and lactation; effects of exercise; effects of non-steroidal anti-inflammatory drugs on tendon biomechanics).
Biomechanics of muscles (skeletal muscle architecture; parallel and pennate arrangements; muscle-tendon angles; tension development in parallel-fibered muscles; muscles with large pennation angles and large cross-sectional areas; muscles with small pennation angles, small cross-sections, and long fibers and their functional roles; active and passive tension; active and passive insufficiency; Hill model components; force-length-velocity relationship; stretch-shortening cycle; moment arm of a muscle).</td></tr>
</table>

	• Articular cartilage biomechanics (structure, zones, nutrition, loading, healing; collagen fiber orientation and its effect on osmotic pressure; permeability; tensile load and strength; viscoelasticity; injury frequency and tension; effects of immobilization and inactivity; age-related changes; rehabilitation of articular cartilage). • Biomechanics of the spine. • Nerve tissue biomechanics (tensile and compressive stresses in peripheral nerves; critical stress thresholds; methods of pressure application; biomechanical factors in nerve compression; mechanical behaviour of spinal nerve roots). • Basic principles of ergonomics (goals and objectives; workspace analysis; occupational risk factors; physical characteristics; ergonomics in preventive physiotherapy; effects of static vs dynamic work; visibility; heat, humidity, and stress; selection of ergonomic tools and workstations). • Weight management. • The role of orthotics and prosthetics in physiotherapy. • Orthotics, functional splints, correction of deformities, additions and implants, types and usage; robotics and modern technology; training in functional movements and walking with orthotics.
Teaching Methodology	Face to Face
Bibliography	Flanagan, S.P., 2013. *Biomechanics: A Case-Based Approach*. Jones & Bartlett Learning. Frankel, V.H., & Nordin, M., 2019. *Basic Biomechanics of the Musculoskeletal System*. 4th North American edition. Lippincott Williams & Wilkins. Hall, S.J., 2018. *Basic Biomechanics*. McGraw-Hill. Knudson, D., 2015. *Fundamentals of Biomechanics*. Springer. McGinnis, P.M., 2013. *Biomechanics of Sport and Exercise*. Human Kinetics. Newman, D.A., 2015. *Kinesiology of the Musculoskeletal System: Foundations for Rehabilitation*. Mosby. Robertson, D.G.E., Caldwell, G.E., Hamill, J., Kamen, G., & Whittlesey, S.N., 2022. *Research Methods in Biomechanics*. 2nd edition. Human Kinetics. Winter, D.A., 2023. *Biomechanics and Motor Control of Human Movement*. 5th edition. Wiley.

Assessment	Examination	70%
	Class participation and Attendance	10%
	Assignment(s)	20%
		100%
Language	Greek & English	

Course Title	Diagnostic Imaging				
Course Code	PHY340				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year/ 2nd Semester				
Teacher's name	Yasemin Tanyildizi				
ECTS	3	Lectures / week	2 hours / 14 weeks	Laboratories / week	None
Course Purpose and Objectives	The aim of this course is to study, understand, and analyse both classical and modern diagnostic imaging methods. Students will gain the knowledge necessary to interpret various imaging techniques, recognize normal and abnormal findings, and assess pathology as it appears across different diagnostic imaging modalities. The course provides a foundation for integrating imaging into clinical reasoning and physiotherapy decision-making.				
Learning Outcomes	**Upon successful completion of the theoretical part of this course, students should be able to:** • Identify both classical and modern imaging methods and understand their basic principles of operation. • Recognize how pathological and non-pathological findings appear in different imaging techniques. • Distinguish between magnetic resonance imaging (MRI) and computed tomography (CT), including their respective advantages and limitations. • Understand the basic principles and clinical applications of nuclear medicine. • Describe the function and clinical uses of interventional radiology. • Specify appropriate imaging methods used in the evaluation of the cardiovascular and respiratory systems. • Identify normal and pathological findings in radiographs of joints and bones. • Interpret normal chest and lung radiology. • Recognize pathology in a range of imaging methods, with particular focus on evaluating abnormalities on chest X-rays.				

Prerequisites	None	Co-requisites	None
Course Content	**Introduction to Diagnostic Imaging** • General principles of radiophysics • Safety and ethical considerations in imaging **System-Based Radiodiagnosis** • Overview of imaging by body system (musculoskeletal, neurological, thoracic, abdominal, etc.) **Interventional Radiology** • Radiovascular imaging and invasive radiologic procedures **Modern Imaging Modalities** • Computed Tomography (CT) • Magnetic Resonance Imaging (MRI) • Digital Subtraction Angiography (DSA) • Bone Scintigraphy and other nuclear medicine techniques **Radiologic Pathology** • Introduction to common radiologic pathologies across systems • Differentiating normal vs. abnormal findings **Physiological Radiographs** • Normal radiographic anatomy of: • Spine • Pelvis and hip • Shoulder and upper extremities • Tibia and forearm • Ankle joint • Chest **Degenerative Conditions** • Imaging of degenerative spine lesions (e.g., osteoarthritis, disc degeneration) **System-Specific Imaging** • Cardiovascular system: angiography, echocardiography-related imaging • Respiratory system: chest X-ray, CT, ventilation/perfusion imaging • Other body systems: gastrointestinal, genitourinary, neurological		
Teaching Methodology	Face to Face		
Bibliography	Corne, J., & Kumaran, M., 2017. *Chest X-ray: Easy Reading*. 4th edition. Parisianou S.A. Fleckenstein, P., & Tranum-Jensen, J., 2016. *Anatomy of Diagnostic Imaging*. 3rd edition. Parisianou S.A. Elmaoglu, M., & Celik, A., 2017. *Magnetic Resonance Handbook*. Parisianou S.A. Eisenberg, R.L., 2020. *Clinical Imaging: An Atlas of Differential Diagnosis*. 6th edition. Lippincott Williams & Wilkins. Webb, W.R., & Higgins, C.B., 2017. *Thoracic Imaging: Pulmonary and Cardiovascular Radiology*. 3rd edition. Lippincott Williams & Wilkins.		

	Brant, W.E., & Helms, C.A., 2022. *Fundamentals of Diagnostic Radiology*. 5th edition. Lippincott Williams & Wilkins. Krestin, G.P., et al., 2023. *Diagnostic Imaging: Principles and Practice*. 2nd edition. Springer.
Assessment	Examination 70% Class participation and Attendance 10% Assignment(s) 20% 100%
Language	Greek & English

Course Title	Clinical practise II				
Course Code	PHY345				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year/ 2nd Semester				
Teacher's name	Antonis Constantinou, Freund Anne				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	11 hours / 14 weeks
Course Purpose and Objectives	This course aims to prepare students for clinical practice by developing their competence and confidence in the assessment and treatment of patients with neurological disorders. Students gain hands-on experience in evaluating congenital and acquired neurological conditions, analyzing assessment findings, and formulating evidence-based short and long-term treatment goals. Through supervised clinical placements, students practice physiotherapy techniques in real patient scenarios, learning to evaluate outcomes and modify treatment plans as needed. The course emphasizes a strong understanding of major neurological conditions and related pathological processes. Students work as part of an interdisciplinary team, gaining appreciation for the roles of other health professionals in managing neurological dysfunction. The course also highlights how disability, age, culture, and socioeconomic status affect treatment and recovery. Emphasis is placed on understanding the indications, contraindications, and limitations of physiotherapy interventions. Students also learn strategies for complication prevention and patient education, while developing professional behavior and ethical practice.				
Learning Outcomes	**Upon successful completion of the theoretical component, students will be able to:** • Identify the mechanisms underlying neurological dysfunction and assess the patient's current clinical status • Interpret and systematically document clinical findings using standardized methods • Accurately record both subjective history and objective examination results				

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Set and justify short and long-term treatment goals, particularly in cases of spinal cord and craniocerebral injuries, even with limited prior exposure
Conduct comprehensive patient assessments using contemporary evaluation tools and techniques
Justify clinical decisions based on assessment data and best available evidence
Develop individualized treatment plans that integrate all relevant clinical findings

Upon successful completion of the laboratory component, students will be able to:

Recognize deviations from normal function and apply suitable physiotherapy techniques based on the identified deficits
Clearly explain clinical findings and treatment plans to patients, demonstrating respect for their autonomy, privacy, and informed consent
Apply clinical reasoning to select and implement appropriate physiotherapeutic interventions
Monitor patient progress, maintain accurate clinical records, and collaborate effectively with other healthcare professionals
Reassess patients regularly and adjust treatment plans based on observed progress or lack thereof, using evidence-based reasoning
Utilize modern clinical tools and technologies to assess balance, proprioception, gait, functional limitations, and levels of independence

</td></tr>
<tr><td>Prerequisites</td><td>PHY222, PHY332, PHY205</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">This course provides students with hands-on clinical training in the physiotherapeutic evaluation and management of neurological disorders. Under the supervision of qualified instructors, students apply theoretical knowledge in real patient settings, focusing on assessment, treatment planning, and rehabilitation strategies tailored to individual needs.

The course covers a range of neurological conditions including:

Brain and spinal cord injuries, CVA, TIA
Cranial-brain trauma and tumors
Parkinson’s disease, multiple sclerosis
Alzheimer’s, Dementia
Hemiplegia, paraplegia, quadriplegia

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</table>

Special attention is also given to adapting physiotherapy approaches across age groups and conditions such as osteoporosis, stroke, amputations, burns, fractures, mental health issues, and falls.

The ultimate objective is to support patient recovery in terms of gait retraining, balance, self-care, and functional independence, promoting reintegration into daily life and the broader community.

Clinical practice takes place in nursing institutions and other healthcare settings, ensuring that students gain valuable experience in translating classroom learning into effective, patient-centered care.

Learning Outcomes

Upon successful completion of the course and clinical training, students will be able to:

Interpersonal Skills

1. Establish therapeutic relationships and respond with sensitivity to physical, psychosocial, and cultural needs
2. Work effectively as part of a multidisciplinary team, including healthcare professionals and peers
3. Communicate professionally with patients, families, and colleagues using appropriate verbal, non-verbal, listening, and written skills

Professionalism

4. Recognize their own learning needs and actively seek opportunities for improvement
5. Reflect on clinical feedback and demonstrate a reasoned, constructive response
6. Manage time and responsibilities in line with clinical demands and professional standards
7. Demonstrate accountability, uphold personal and professional boundaries, and value the contributions of other team members in a patient-centered model

Patient Management and Treatment

8. Perform safe and effective assessments and treatments using appropriate physiotherapeutic techniques and exercise
9. Monitor the impact of interventions and adjust treatment strategies in collaboration with the patient and carers
10. Empower patients to take an active role in their care and rehabilitation

Clinical Reasoning

	11. Justify clinical decisions through comprehensive assessment and critical questioning 12. Analyze findings to identify strengths, limitations, and form a physiotherapeutic diagnosis 13. Set SMART (Specific, Measurable, Achievable, Relevant, Time-bound) goals in partnership with the patient and/or carer 14. Design individualized and effective treatment plans with input from the patient where applicable 15. Select relevant outcome measures to track the effectiveness of interventions 16. Demonstrate clinical reasoning and decision-making in documentation and care delivery
Teaching Methodology	**Face-to-Face Instruction** Clinical practice takes place in real healthcare settings under the direct supervision of experienced and specialized clinical instructors. Students engage in hands-on learning, guided patient assessments, and physiotherapeutic interventions within structured clinical frameworks.
Bibliography	Adler, S., Beckers, D., & Buck, M., 2018. *PNF in Practice: An Illustrated Guide*. 5th edition. Springer. Bassoe Gjelsvik, B., & Syre, L., 2019. *The Bobath Concept in Adult Neurology*. 3rd edition. Thieme. Carr, J., & Shepherd, R., 2021. *Neurological Rehabilitation: Optimizing Motor Performance*. 4th edition. Elsevier. Duncan, P.W., & Sullivan, K.J., 2020. *Physical Therapy for Stroke Recovery and Rehabilitation*. 1st edition. Demos Medical Publishing. Langhorne, P., Bernhardt, J., & Kwakkel, G., 2022. *Stroke Rehabilitation: Evidence-Based Approaches*. 2nd edition. Oxford University Press. Raine, S., Meadows, L., & Lynch-Ellerington, M., 2017. *Bobath Concept: Theory and Clinical Practice in Neurological Rehabilitation*. Wiley-Blackwell. Shumway-Cook, A., & Woollacott, M., 2017. *Motor Control: Translating Research into Clinical Practice*. 5th edition. Wolters Kluwer.
Assessment	Clinical Practice 80% Examination 20% 100%
Language	Greek & English

Course Title	Physiotherapy of Special Population Groups				
Course Code	PHY350				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	3rd Year/ 2nd Semester				
Teacher's name	Iris Rousou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The purpose of this course is to help students understand, evaluate, and address the unique challenges faced by specific population groups. Students will gain the knowledge and practical skills needed to assess the needs of each patient category and develop personalized physiotherapy interventions. The course emphasizes the importance of tailoring treatment plans to the characteristics of each group, with a focus on safe, effective, and evidence-based care.				
Learning Outcomes	**Upon successful completion of the theoretical part of the course, students should be able to:** • Assess and design therapeutic programs for common issues in special populations, including children with cognitive decline, pregnant women, cancer patients, individuals with osteoporosis, and amputees • Evaluate and analyze gait and self-care difficulties specific to different groups • Observe and quantify functional deficits and choose appropriate strategies for improvement • Select and adapt assistive devices to enhance individual independence • Apply suitable physiotherapeutic approaches for older adults (3rd and 4th age), based on each person's unique characteristics • Identify and explain the mechanisms of action of various physiotherapy techniques and tools, using evidence-based practice • Understand and describe the role of the interdisciplinary team and the application of the biopsychosocial model in the treatment of special populations **Upon successful completion of the laboratory part of the course, students should be able to:**				

<table>
<tr><td></td><td colspan="3">Evaluate the needs of different population groups and select appropriate physiotherapeutic interventions
Apply specific techniques that promote independence and self-care
Demonstrate and teach daily living skills tailored to the capabilities of each group
Plan and lead group exercise sessions designed for particular populations
Classify patients' functional performance using structured assessment tools
Understand and apply the principles of adapted physical education
Train and prepare individuals with disabilities for improved function and participation
Work collaboratively within an interdisciplinary team to organize community and workplace reintegration activities for people from special population groups
Select and apply appropriate clinical tools for evaluating patients with functional limitations, following the ICF framework of the World Health Organization</td></tr>
<tr><td>Prerequisites</td><td>None</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">Rehabilitation Service Provision – Principles of Assessment and Exercise Prescription for Special Populations
Introduction to rehabilitation service delivery and the role of physiotherapy in special populations
Key principles of assessment and exercise prescription tailored to specific clinical needs
Identification of target groups within special populations (e.g., individuals with chronic diseases, disabilities, or functional limitations)
Therapeutic goals and documented benefits of exercise and physiotherapy interventions
Development of strategies to improve access and quality of rehabilitation services for diverse populations
Physiotherapy and Rehabilitation in Amputees
Classifications of upper and lower limb amputations; stump types and characteristics
Pre- and post-operative physiotherapy care and assessment
Therapeutic exercise and rehabilitation planning tailored to stump condition and patient needs
Stump care: pain management, skin issues, circulation, and positioning
Gait retraining, strength restoration, and functional activity rehabilitation
Prosthesis types, training in daily use, and evaluation
Psychological, social, and vocational adaptation</td></tr>
</table>

	• Special topics: pediatric amputees, amputee athletes, and emerging prosthetic technologies **Physiotherapy in Women's Health: Obstetrics and Gynecology** • Physiotherapy assessment and therapeutic exercise in pelvic floor dysfunctions (e.g., incontinence, pelvic organ prolapse) • Exercise prescription following lymph node dissection or mastectomy; management of lymphedema • Anatomical and physiological adaptations during pregnancy; evaluation of physical activity and pelvic floor status • Therapeutic exercise in pregnancy and postpartum, including Kegel exercises and biofeedback techniques • Management of diastasis recti and musculoskeletal changes during and after pregnancy • Relaxation, breathing, posture, and core strengthening exercises • Group and individualized exercise programs adapted to the needs of women across different stages (pre- and postnatal, gynecological conditions) **Physiotherapy related to men's health** • Physiotherapy in pelvic floor dysfunction (e.g., incontinence, pelvic pain) • Rehabilitation following prostate surgery • Exercise and hormonal changes in aging males (e.g., sarcopenia) **Pediatrics and Adolescent Physiotherapy** • Physiological and developmental differences in children and adolescents • Physiotherapy in children with disabilities and congenital conditions (e.g., Down syndrome, juvenile arthritis) • Adaptations in assessment and rehabilitation tools/environment • Therapeutic exercise for posture, balance, strength, and neuromuscular control • Management of musculoskeletal injuries, postural deformities, and chronic conditions (e.g., diabetes, obesity, cardiorespiratory issues) • Role of the interdisciplinary team and individualized or group-based exercise programs **Assessment and Rehabilitation in Geriatric and Late Adulthood Physiotherapy** • Systemic changes associated with aging and their impact on physical function • Physiological and pathophysiological differences in older adults, including comorbidities that affect physiotherapy assessment • Fall risk assessment tools and prevention strategies in elderly patients • Osteoporosis-specific exercise programs focused on bone health, posture, and strength

	• Obesity management and metabolic considerations in the aging population • Therapeutic exercise prescription adapted to individual capacity and safety needs • Safe implementation of exercise and rehabilitation programs in elderly individuals with multiple health conditions • Recognition of functional decline, frailty, and mobility limitations in clinical decision-making **Burn Injury Management: Physiotherapeutic Assessment and Recovery** • Burn classification, depth, and systemic implications for physiotherapy • Assessment of functional limitations and mobility restrictions post-burn • Physiotherapy goals and evidence-based techniques during different healing stages • Scar management: massage, stretching, pressure therapy, and positioning • Therapeutic exercise to maintain joint mobility, prevent contractures, and restore function • Pain management strategies and patient education • Interdisciplinary collaboration in complex burn rehabilitation cases **Physiotherapy in Cognitive Decline, Psychiatric and Behavioral Conditions** • Cognitive decline and related postural instability and frailty • Assessment of cognitive-motor interaction (dual-task challenges) • Frailty indices and fall risk screening tools • Cognitive-motor training and functional rehabilitation • Environmental safety adaptations and fall prevention strategies • Family education and caregiver support • Physiotherapy for psychiatric and behavioral conditions • Exercise-based strategies for emotional regulation, motivation, and social participation • Management of obesity and congenital sensory/motor impairments • Adaptation of therapeutic exercise to cognitive, emotional, and sensory needs **Physiotherapy in auditory and visual impairments** • Sensorimotor training to enhance balance, orientation, and spatial awareness • Tailored movement programs to address proprioceptive deficits • Functional independence training and environmental adaptation • Interdisciplinary collaboration with occupational therapists and educators

	Chronic Conditions and Cancer Rehabilitation: Physiotherapy Approaches • Pathophysiology and functional limitations in chronic cardiac and pulmonary conditions (e.g., COPD, CHF, asthma) • Physiotherapy in cystic fibrosis, bronchiectasis, and interstitial lung diseases • Management of diabetes mellitus, obesity, and metabolic syndrome through physiotherapy • Common cancer types and treatment-related effects • Physical, psychological, and social impact of cancer on patients • Side effects of surgery, chemotherapy, and radiation • Pain management and physiotherapy goals in cancer care • Therapeutic exercise to improve function, quality of life, and treatment tolerance • Collaborative role of the interdisciplinary team in long-term care and rehabilitation **Physiotherapy and Therapeutic Exercise in Non-Clinical and Community Settings** • Physiotherapy-led exercise programs in workplace settings (e.g., injury prevention, ergonomics, active breaks) • Therapeutic exercise in educational environments (e.g., posture training, school-based movement programs) • Physiotherapy interventions in psychiatric units (e.g., movement therapy, regulation of psychomotor activity) • Therapeutic exercise in addiction rehabilitation centers (e.g., improving physical condition, emotional regulation) • Exercise-based physiotherapy in elderly care facilities (e.g., fall prevention, mobility maintenance) • Planning and implementation of group physiotherapy sessions tailored to population needs **Laboratory** Students are trained in practical assessment and treatment techniques specific to each patient group using audiovisual tools and clinical case applications. They present their work, using observation and interpretation to demonstrate their understanding. Additionally, through collaboration with EUC External Centers for Social Welfare Services in Nicosia, students organize and implement targeted prevention and rehabilitation programs tailored to the needs of specific patient populations. Training includes the use of modern physiotherapy tools and technology-assisted methods (e.g., virtual reality, biofeedback) where appropriate. Emphasis is placed on interdisciplinary collaboration and adapting interventions to real-world clinical and community settings.
Teaching Methodology	Face to Face
Bibliography	Chodzko-Zajko, W., 2014. *ACSM's Exercise for Older Adults*. Human Kinetics. ISBN: 978-1609136475

<table>
<tr><td></td><td>Coast, J.R., & Oden, G., 2017. Clinical Exercise Physiology: Physiological Assessments in Health, Disease and Sport Performance. 3rd edition. Kendall Hunt Publishing Company. ISBN: 978-1524901592
Durstine, J.L., & Moore, G.E., 2005. ACSM’s Exercise for Chronic Diseases and Disabilities. Paschalidis Medical Publications.
Ehrman, J., Gordon, P., Visich, P., & Keteyian, S., 2018. Clinical Exercise Physiology. 4th edition. Human Kinetics. ISBN: 978-1492588498
Goodman, C., & Helgeson, K., 2011. Exercise Prescription for Medical Conditions: Handbook for Physical Therapists. F.A. Davis. ISBN: 978-0803617148
Moore, G.E., Durstine, J.L., & Painter, P.L., 2016. ACSM’s Exercise Management for Persons with Chronic Diseases and Disabilities. Human Kinetics. ISBN: 978-1450434140
Scott, A., & Gidlow, C., 2016. Clinical Exercise Science. Routledge. ISBN: 978-1134617845
Taylor, A., & Johnson, M., 2019. Physiology of Exercise and Healthy Aging. Human Kinetics, Champaign, Illinois, USA. ISBN: 978-0736058384
Thompson, W.R., 2019. ACSM's Clinical Exercise Physiology. Human Kinetics, Champaign, Illinois, USA. ISBN: 978-1496389022
Williamson, P., 2016. Therapeutic Exercise for Special Populations. Constantaras Publications.</td></tr>
<tr><td>Assessment</td><td>Examination 90%
Class participation and Attendance 10%
100%</td></tr>
<tr><td>Language</td><td>Greek & English</td></tr>
</table>

Course Title	Physiotherapy Assessment				
Course Code	PHY400				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	4th Year/ 1st Semester				
Teacher's name	Iris Rousou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The course aims to develop a holistic approach to physiotherapy by fostering clinical reasoning and the ability to create personalized, well-justified rehabilitation plans. Students are trained in gathering, organizing, and interpreting both subjective and objective patient data using the SOAP (Subjective, Objective, Assessment, Plan) framework. Emphasis is placed on the use of evidence-based practice to guide clinical decisions in complex situations and cases. A key focus of the course is teaching students how to assess a patient's clinical status using specialized, reliable, and valid assessment tools, including current clinical tests and technologies. Students will learn to critically evaluate the patient's condition and select appropriate treatment strategies based on modern rehabilitation principles and individualized clinical needs in complex cases and scenarios.				
Learning Outcomes	**Upon successful completion of the theoretical part of this course, students will be able to:** • Gather patient history using targeted questions and validated questionnaires, adapting their communication to the patient's mental, educational, psychological, and social background. • Document and interpret findings from observation, palpation, and special clinical tests. • Integrate subjective and objective data through clinical reasoning to identify the underlying causes of musculoskeletal or neurological dysfunction. • Differentiate between physiotherapeutic and non-physiotherapeutic pathologies. • Select and apply appropriate methods and tools for assessing pain, range of motion, muscle strength, proprioception, balance, and overall functional capacity. • Understand the scope and limitations of physiotherapeutic assessment.				

	• Recognize abnormal movement patterns and classify patients accordingly. • Identify and quantify functional impairments, injuries, or disabilities. • Synthesize evaluation findings with the patient's psychosocial profile to support clinical decision-making and design an individualized treatment plan. • Understand the importance of regular reassessment to adapt and refine treatment interventions. **Upon successful completion of the laboratory part of this course, students will be able to:** • Perform clinical assessments of the upper and lower limbs through observation, palpation, and manual testing of contractile and non-contractile tissues. • Apply commonly used special tests to assess musculoskeletal injuries and peripheral nerve mobility. • Conduct manual muscle testing and evaluate strength in key muscle groups. • Use functional questionnaires and outcome measures to assess pain and disability across musculoskeletal, neurological, and respiratory conditions. • Adapt history-taking and assessment techniques to suit the needs of diverse patient populations. • Demonstrate clinical reasoning skills to identify patterns of dysfunction and differentiate them from systemic or organic pathologies. • Operate advanced physiotherapy assessment tools (e.g. isokinetic dynamometry, electromyography, ECG) to evaluate neuromuscular function and conduct case-based assessments. • Select and apply assessment tools in alignment with the World Health Organization's ICF framework to classify patient limitations and guide intervention planning.		
Prerequisites	None	Co- requisites	None
Course Content	**1. Physiotherapeutic Assessment** • Overview of physiotherapy evaluation and its role in clinical practice • Methods and techniques for recording evaluation data • Key differences between physiotherapeutic assessment and medical diagnosis • Principles of clinical reasoning, with emphasis on hypothetico-deductive reasoning • The role of the biopsychosocial model in assessment and treatment planning		

	2. Assessment Tools • Criteria for selecting valid, reliable, and relevant tools • Subjective assessment: patient history, questionnaires, observation, and clinical presentation • Objective assessment: tools and techniques (e.g. isokinetic testing, 3D motion analysis) • Synthesizing findings to organize and prioritize the rehabilitation plan **3. Pain Assessment** • Common causes of pain and their mechanisms • Methods and tools for pain evaluation (e.g. VAS, McGill Pain Questionnaire) • Interpretation of subjective and objective pain data in clinical reasoning **4. Musculoskeletal Assessment: Upper Extremity, Lower Extremity, and Spine** • Range of Motion: Active and passive movement evaluation • Strength: Manual muscle testing and instrumental tools • Proprioception: Tools and special tests for sensory-motor evaluation • Joint Stability: Manual and instrument-based assessment • Functionality: Assessment of functional limitations with custom tools and patient-specific tasks **5. Gait Analysis** • Subjective and objective methods for evaluating walking • Analysis of normal and pathological gait patterns **6. Respiratory System Evaluation** • Techniques for physical examination of the respiratory system • Assessment tools (e.g. auscultation, functional breathing tests, spirometry interpretation) **7. Neurological Assessment** • Clinical examination of patients with neurological conditions • Tools for assessing motor control, tone, reflexes, coordination, and functional independence **Laboratory Practice** • Hands-on training using models and audiovisual resources • Group work on key physiotherapeutic evaluation methods • Practice in observation, palpation, clinical tests, and documentation • Guided application of tools and scales across different systems • Training in information literacy: navigating libraries, e-libraries, and online databases
Teaching Methodology	Face to Face
Bibliography	Albert, T., & Vaccaro, A., 2006. *Clinical Examination of the Spine*. PASCALIDIS Publications. American College of Sports Medicine, 2009. *ACSM's Guidelines for Exercise Testing and Prescription*. Williams & Wilkins.

	Bickley, L.S., & Szilagyi, P.G., 2013. *Bates' Guide to Physical Examination and History Taking*. 12th edition. Lippincott Williams & Wilkins. Seidel, H.M., Ball, J.W., Dains, J.E., & Benedict, G.W., 2014. *Mosby's Guide to Physical Examination*. 8th edition. Elsevier. Talley, N.J., & O'Connor, S., 2017. *Clinical Examination: A Systematic Guide to Physical Diagnosis*. 7th edition. Elsevier.	
Assessment	Examination	90%
	Class participation and Attendance	10%
		100%
Language	Greek & English	

Course Title	Sport physiotherapy				
Course Code	PHY405				
Course Type	Compulsory				
Level	Bachelor (1st Cycle)				
Year / Semester of study	4th Year/ 1st Semester				
Teacher's name	Antonis Zacharopoulos				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The purpose of this course is to train students in the evaluation and rehabilitation of injured athletes, with a focus on the unique physical and psychological demands of this population. Students will also explore strategies for injury prevention, learn how to manage acute injuries on the field, and understand the physiotherapist's role within the broader interdisciplinary sports team. The course emphasizes evidence-based practice and prepares students to support athletes throughout the recovery process and safe return to sport.				
Learning Outcomes	**Upon successful completion of the theoretical part of the course, students should be able to:** • Define what constitutes a sports injury and overuse syndromes, and understand the epidemiology of injuries across different sports. • Identify key parameters involved in the evaluation and rehabilitation of injured athletes. • Understand the role of restoring muscular and functional performance, including return-to-running protocols, after injury. • Explain the importance of neuromuscular retraining in recovery. • Describe the principles and stages of rehabilitation for upper and lower body injuries. • Recognize the value of injury prevention strategies in sports. • Understand the significance of physiotherapy assessment and evidence-based practice in sports rehabilitation. **Upon successful completion of the laboratory part of the course, students should be able to:** • Evaluate sports injuries and provide immediate first aid on the field when needed.				

	• Apply appropriate methods to restore muscle strength and overall function. • Design and deliver physiotherapy programs for common upper and lower extremity sports injuries. • Apply physiotherapy approaches for spinal injuries related to sports. • Plan and guide a functional rehabilitation program and safe return-to-play progression, based on clinical evidence. • Use appropriate clinical tools to assess sports injuries, aligned with the World Health Organization's ICF framework.		
Prerequisites	PHY312, PHY202	Co-requisites	None
Course Content	**Introduction to Sports Injuries**: overview of injury mechanisms in sports; differentiation between acute injuries and overuse syndromes. **Epidemiology of Sports Injuries**: Injury prevalence and patterns across different sports and athlete populations. **Assessment and Management of the Injured Athlete**: First aid on the field, immediate care, and planning post-injury evaluation. **Injury Evaluation Process**: Subjective and objective evaluation techniques, functional assessments, and use of tools such as Functional Movement Screening (FMS). **Restoring Muscle Function and Return to Running**: Concepts of muscular recovery; use of open and closed kinetic chains, eccentric and concentric loading, isokinetic training, and flexibility work. **Neuromuscular Retraining After Injury**: Joint neurophysiology, neuromuscular coordination, and structured retraining protocols. **Functional Rehabilitation & Return to Sport**: Field-based rehab progression: running, jumping, agility, and sport-specific drills. Criteria and planning for return to sport. **Rehabilitation of Lower Extremity Injuries (Part I)**: Post-surgical considerations (e.g., arthroscopy), recovery plans for foot and ankle injuries. **Rehabilitation of Lower Extremity Injuries (Part II)**: Knee and hip injury rehab: planning and implementation. **Rehabilitation of Upper Extremity Injuries**: Shoulder, elbow, and hand injuries: evaluation and treatment planning. **Rehabilitation of Spinal Injuries in Sports**: Management of spinal instability, soft tissue injuries, and vertebral issues. **Special Rehabilitation Techniques and Injury Prevention**: Use of evidence-based protocols, predictive testing, and injury prevention strategies.		

	Return-to-Play Criteria: Establishing safe and objective benchmarks for return to sport. **Supportive Techniques in Sports Physiotherapy**: Taping methods, EMG-biofeedback, and removal of compensatory patterns. **Physiotherapist's Role in the Sports Team:** Responsibilities during training, travel, event preparation, and integration with medical and performance staff. **Doping and Ethical Responsibilities**: Anti-doping awareness, fair play principles, and the physiotherapist's role in maintaining athlete integrity. **Injuries in Athletes with Disabilities**: Adapted injury management strategies and understanding epidemiological differences. **Sports Injury Policy and Event Planning**: Injury prevention rules, risk management in organized sports, and physiotherapy logistics for large-scale sporting events. **Laboratory Component** Students actively design and implement rehabilitation programs tailored to specific sports injuries. Through guided practical sessions and case presentations, they apply theoretical knowledge, build hands-on skills, and develop clinical reasoning. They also gain experience in accessing and evaluating academic and clinical resources (e.g., databases, journals, clinical guidelines).
Teaching Methodology	Face to Face
Bibliography	Andrews, J., Harrelson, G., & Wilk, K., 2019. *Physical Rehabilitation of the Injured Athlete*. 5th edition. Saunders Elsevier. Brukner, P., & Khan, K., 2017. *Clinical Sports Medicine, Volume I: Injuries*. 5th edition. McGraw-Hill. Cohen, M.S., 2022. Sports Physical Therapy: Principles and Practice. 1st edition. Wolters Kluwer. Ellenbecker, T.S., & Davies, G.J., 2023. *The Athlete's Shoulder*. 3rd edition. Human Kinetics. Hudson, Z., & Small, C., 2011. *Managing the Injured Athlete*. Churchill Livingstone. ISBN: 978-0-7020-3004-8. Joyce, D., & Lewindon, D., 2016. *Sport Injury Prevention and Rehabilitation*. Routledge. Manske, R.C., & Prohaska, D., 2021. *Rehabilitation of the Shoulder: A Case-Based Approach*. 2nd edition. Elsevier. Prentice, W.E., 2016. *Rehabilitation Techniques for Sports Medicine and Athletic Training*. 6th edition. McGraw-Hill Higher Education.

Assessment	Examination	90%
	Class participation and Attendance	10%
		100%
Language	Greek & English	

Course Title	Clinical Practice III				
Course Code	PHY415				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	4th Year/ 1st Semester				
Teacher's name	Antonis Constantinou, Freund Anne				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	11 hours / 14 weeks
Course Purpose and Objectives	This course is designed to give students hands-on clinical experience in evaluating musculoskeletal conditions, both congenital and acquired. Students learn to identify dysfunctions, analyze and interpret assessment findings, and set realistic short- and long-term goals based on identified problems. Through supervised clinical placements, students build the competence and confidence to apply physiotherapy skills in real-world situations—working with patients who may have musculoskeletal disorders or post-surgical complications. They also learn to monitor treatment outcomes and adjust rehabilitation plans accordingly. The course offers a solid understanding of common musculoskeletal issues and their underlying pathology, as seen in both inpatient and outpatient settings. It encourages interdisciplinary collaboration and helps students appreciate the role of other healthcare professionals in managing complex cases. Students are trained to consider how disability, age, cultural background, and socioeconomic status influence patient outcomes. They also gain awareness of contraindications and limitations in physiotherapy techniques, and the importance of prevention—both in the general population and in minimizing complications for patients under their care. Lastly, the course supports the development of professional behaviour and attitudes essential for ethical, patient-centred physiotherapy practice.				
Learning Outcomes	**Upon successful completion of the theoretical part of this course, students should be able to:** • Collect necessary clinical information while respecting patient autonomy and confidentiality • Approach patients with professionalism, communicate evaluation results clearly, and seek informed consent before beginning rehabilitation				

<table>
<tr><td></td><td colspan="3">

Understand rehabilitation options for soft tissue injuries, fractures, nerve injuries, and stress syndromes
Analyze evaluation findings, adjust treatment plans as needed, and support all decisions with clinical reasoning
Provide ergonomic advice and collaborate with other healthcare professionals when appropriate
Recognize indications and contraindications for physiotherapy methods and apply treatment safely for both patient and therapist
Apply appropriate methods for patient reassessment, record clinical findings, and identify progress or stagnation

Upon successful completion of the laboratory part of this course, students should be able to:

Recognize and interpret clinical findings and select suitable tools and techniques for treatment
Understand therapeutic exercise principles, choose appropriate exercises, and ensure proper execution
Design kinesiotherapy programs, assess load and movement speed, and identify the type of muscle contraction
Plan interventions to improve proprioception, balance, muscle strength, and endurance
Evaluate patients and develop treatment programs using evidence-based physiotherapy practices
Apply therapeutic exercise as part of comprehensive neurological rehabilitation, modifying approach and dosage according to the patient’s motor control, tone, and sensory–motor integration profile.

</td></tr>
<tr><td>Prerequisites</td><td>PHY312, PHY332</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">
The student is trained by the responsible teacher to evaluate and document physiotherapeutically each patient's condition within the scope of the course, specifically in areas such as:

Fractures of the upper/lower limbs, spine, and pelvis: Includes conservative vs. surgical management, complications, special considerations, and physiotherapy evaluation throughout all recovery stages.
Spinal and lower limb deformities: Focus on targeted assessments, exercise planning, use of assistive devices, and patient education.
Nerve injuries: Covers both conservative and surgical rehabilitation, with emphasis on strength, function, and aesthetic retraining.
Microsurgery: The physiotherapist’s role and contribution in recovery.
Muscle, tendon, and ligament injuries: Assessment and management under conservative and surgical treatment plans.

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</table>

- **Pain syndromes** of the spine and extremities: Evaluation and therapy across all stages of rehabilitation.
- **Arthritis, rheumatic and metabolic conditions:** The value of exercise and the role of physiotherapy.
- **Arthroplasty:** Pre- and post-operative assessment and rehabilitation for shoulder, hip, knee, toes, etc.
- Emphasis on **functional dynamic stabilization** and rehabilitation through real-life tasks.

Clinical practice is a core component of learning, providing critical hands-on experience that connects classroom knowledge with real-world patient care.

Method & Implementation

- **Theoretical component:** Lectures and discussion based on clinical cases and subject-specific content.
- **Laboratory component:** Supervised clinical training in nursing institutions, guided by departmental instructors.

Upon successful completion of this course and clinical training, students are expected to demonstrate:

Interpersonal Skills

1. Build therapeutic relationships with empathy and respect for cultural, psychological, and physical needs
2. Work effectively within interprofessional teams
3. Communicate clearly and professionally with patients, caregivers, and colleagues (verbally, non-verbally, in writing, and through active listening)

Professionalism

1. Recognize personal learning needs and create development plans
2. Act on feedback and apply clinical reasoning before taking action
3. Manage workload responsibly and adapt to varying clinical environments
4. Show accountability and understand professional boundaries while respecting team contributions

Patient Management / Treatment

1. Perform safe and appropriate physiotherapy evaluations and treatments

	2. Monitor treatment plans and adjust based on patient progress and feedback 3. Empower patients in their care and support their independence **Clinical Reasoning** 1. Use structured strategies and questioning to guide holistic evaluation 2. Interpret findings to identify strengths and limitations and form a physiotherapy diagnosis 3. Set SMART goals collaboratively with the patient and/or caregiver 4. Develop and tailor effective treatment plans 5. Choose outcome measures that align with treatment goals and track effectiveness
Teaching Methodology	**Face to Face** Clinical practice in clinical setting, conducted under the direct supervision of experienced and specialized clinical instructors. Students engage in hands-on physiotherapy practice within real healthcare settings, applying theoretical knowledge to clinical cases while receiving ongoing feedback and guidance.
Bibliography	Brukner, P., & Khan, K., 2017. *Clinical Sports Medicine*. 5th edition. McGraw-Hill. Childs, J.D., & Fritz, J.M., 2021. *Mobilization and Manual Therapy in Musculoskeletal Practice: Evidence-Based Techniques*. 2nd edition. Elsevier. Kisner, C., Colby, L.A., & Borstad, J., 2022. *Therapeutic Exercise: Foundations and Techniques*. 8th edition. F.A. Davis. Magee, D., 2020. *Orthopedic Physical Assessment*. 7th edition. Elsevier. McGill, S.M., 2015. *Low Back Disorders: Evidence-Based Prevention and Rehabilitation*. 3rd edition. Human Kinetics. Prentice, W.E., 2018. *Rehabilitation Techniques for Sports Medicine and Athletic Training*. 6th edition. McGraw-Hill.
Assessment	Examination 20% Clinical Practice 80% 100%
Language	Greek & English

Course Title	Physiotherapy of the Musculoskeletal System III				
Course Code	PHY432				
Course Type	Compulsory				
Level	Bachelor (1st cycle)				
Year / Semester of study	4th Year/ 1st Semester				
Teacher's name	Michalis Pantouveris, Kyriakos Pavlou				
ECTS	6	Lectures / week	2 hours / 14 weeks	Laboratories / week	2 hours / 14 weeks
Course Purpose and Objectives	The aim of this course is to expand the student's knowledge and clinical expertise in evaluating and managing neuro-musculoskeletal dysfunctions of the spine. Emphasis is placed on the development of advanced clinical reasoning, allowing students to understand, assess, and treat both common and complex spinal conditions with confidence and precision. Students will learn to design and implement targeted assessment strategies, categorize dysfunctions, make evidence-based prognostic decisions, and apply effective treatment plans tailored to individual patient needs. This course supports the integration of theory with practice, encouraging the application of critical thinking in real clinical contexts.				
Learning Outcomes	**Upon successful completion of this course, students will be able to:** • Demonstrate in-depth knowledge of spinal anatomy, physiology, and the biomechanics of the musculoskeletal and neurological systems. • Explain the pathology, pathophysiology, pathogenesis, and diagnosis of neuro-musculoskeletal dysfunctions affecting the spine. • Perform differential diagnoses, distinguishing spinal neuro-musculoskeletal conditions from visceral, cardiovascular, articular, and lymphatic dysfunctions. • Apply advanced clinical reasoning to differentiate mechanical from non-mechanical sources of dysfunction and make evidence-based decisions in the evaluation and treatment of spinal conditions. • Analyze the psychosocial aspects of pain and integrate this understanding into assessment, prognosis, and rehabilitation planning.				

	• Critically apply knowledge of specific diagnostic tools and tests, including their reliability and validity, for evaluating neuromuscular and vascular integrity related to spinal dysfunction. • Assess prognosis and identify predictive factors, and communicate these effectively and empathetically to patients. • Demonstrate advanced clinical skills in selecting and safely applying appropriate therapeutic interventions for complex spinal presentations, including those affecting the cervical, thoracic, and lumbar regions. • Critically evaluate and apply recent scientific literature relevant to the physiotherapy management of spinal neuro-musculoskeletal disorders. • Select and use appropriate clinical tools for the assessment of musculoskeletal dysfunctions in alignment with the World Health Organization's ICF classification. • Plan, justify, and apply therapeutic exercise interventions targeting spinal stability, postural control, and neuromuscular coordination, tailored to the specific mechanical and functional characteristics of spinal dysfunctions.		
Prerequisites	PHY312, PHY202, PHY240	Co-requisites	None
Course Content	**Cervical Spine Dysfunctions** • **Cervicogenic headache**: A headache caused by dysfunction or irritation in the upper cervical spine, often presenting with neck pain and limited mobility. Includes clinical evaluation of joint mechanics and postural dysfunction; management strategies based on manual therapy, neuromuscular re-education, and evidence-based practice. • **Cervical dizziness**: Sensation of dizziness linked to proprioceptive input disturbances from the cervical spine, typically seen in cases of neck trauma or dysfunction. Differential diagnosis from vestibular causes; use of sensorimotor retraining techniques in clinical practice. • **Upper cervical spinal instability**: Excessive mobility or laxity in the upper cervical vertebrae, which can compromise neurological structures and requires careful assessment. Focus on clinical testing (e.g., Sharp-Purser test), recognition of red flags, and application of stabilization strategies. • **Cervical radiculopathy**: Compression or irritation of cervical nerve roots causing radiating pain, numbness, or weakness. Assessment includes neurodynamic testing and neurological screening; therapeutic exercise and education form the core of intervention. • **Brachial plexus syndromes**: Conditions affecting the brachial plexus nerves with motor and sensory symptoms in the upper		

limb. Incorporates clinical evaluation, rehabilitation planning, and, when indicated, interdisciplinary management.

- **Cervical disc pathology**: Degenerative or herniated discs causing nerve compression and referred symptoms. Evaluation tools include imaging and functional tests; management includes postural training, therapeutic exercise, and patient education.

Thoracic Spine Dysfunctions

- **Thoracic spine disorders and differential diagnosis**: Conditions in this region may mimic visceral or cervical symptoms. Emphasis on clinical reasoning and diagnostic accuracy to guide appropriate physiotherapeutic intervention.
- **Thoracic outlet syndrome**: Neurovascular compression at the thoracic outlet leading to sensory and vascular symptoms in the upper limb. Assessment techniques include provocative testing; treatment involves posture correction, soft tissue work, and neural mobilization.
- **Referral patterns and clinical implications**: Thoracic dysfunctions may refer pain to the chest, scapula, or abdomen. Understanding pain patterns supports accurate diagnosis and selection of targeted interventions.

Lumbar Spine Dysfunctions

- **Low back pain:** Epidemiology, etiology, classification, evaluation, and management. Focus on both acute and chronic presentations, incorporating biopsychosocial factors. Stratification models and outcome measures guide individualized treatment planning.
- **Lumbar disc herniation and sciatica:** Nerve root compression due to disc pathology resulting in radiating pain. Assessment includes straight leg raise, neurological screening, and functional movement evaluation. Evidence-based interventions include exercise, education, and manual therapy.
- **Segmental instability and mechanical dysfunction:** Abnormal intersegmental motion associated with recurrent or chronic pain. Management involves motor control retraining, stabilization protocols, and dynamic functional exercises.

Sacrococcygeal Region

- **Coccygodynia:** Pain in the coccyx region often associated with trauma or prolonged sitting. Evaluation includes clinical history, palpation, and posture assessment; treatment strategies involve manual techniques, ergonomic adaptations, and patient education.
- **Clinical syndromes involving the coccyx and related structures:** Neuromusculoskeletal disorders in the sacrococcygeal area. Approach includes differential diagnosis

	and the use of multimodal, interdisciplinary management to reduce chronic pain and restore function. **Learning Emphasis** Throughout the unit, students will be trained to: • Apply clinical reasoning in spinal dysfunctions • Perform accurate musculoskeletal and neurodynamic assessments • Distinguish between acute and chronic pain presentations • Select and implement evidence-based physiotherapy interventions • Use contemporary diagnostic tools and outcome measures • Incorporate patient-centered and functional goals in treatment planning
Teaching Methodology	Face to Face
Bibliography	Brotzman, B., & Manske, R., 2011. *Clinical Orthopaedic Rehabilitation*. 3rd edition. Elsevier. Childs, J.D., & Fritz, J.M., 2021. *Mobilization and Manual Therapy in Musculoskeletal Practice: Evidence-Based Techniques*. 2nd edition. Elsevier. Cleland, J.A., & Snyder, A.F., 2023. *Contemporary Manual Therapy: Theory and Clinical Application*. 1st edition. Springer. Fernández de las Peñas, C., Cleland, J., & Dommerholt, J., 2015. *Manual Therapy for Musculoskeletal Pain Syndromes*. 1st edition. Elsevier. Gibbons, P., & Tehan, P., 2016. *Manipulation of the Spine, Thorax and Pelvis*. 4th edition. Elsevier. Hengeveld, E., & Banks, K., 2014. *Maitland's Peripheral Manipulation*. 5th edition. Churchill Livingstone. Hing, W., Hall, J., & Mulligan, B., 2015. *The Mulligan Concept of Manual Therapy*. 1st edition. Elsevier. Jull, G., Moore, A., Falla, D., Lewis, J., McCarthy, C., & Sterling, M., 2015. *Grieve's Modern Musculoskeletal Physiotherapy*. 4th edition. Elsevier. Magee, D., 2015. *Orthopedic Physical Assessment*. 6th edition. Elsevier. Petty, N., 2011. *Neuromusculoskeletal Examination and Assessment*. 4th edition. Churchill Livingstone.

Assessment	Examination	90%
	Class participation and Attendance	10%
		100%
Language	Greek & English	

<table>
<tr><td>Course Title</td><td colspan="5">Clinical training</td></tr>
<tr><td>Course Code</td><td colspan="5">PHY450</td></tr>
<tr><td>Course Type</td><td colspan="5">Compulsory</td></tr>
<tr><td>Level</td><td colspan="5">Bachelor (1st cycle)</td></tr>
<tr><td>Year / Semester of study</td><td colspan="5">4th Year/ 2nd Semester</td></tr>
<tr><td>Teacher’s name</td><td colspan="5">Antonis Constantinou, Freund Anne</td></tr>
<tr><td>ECTS</td><td>30</td><td>Lectures / week</td><td>None</td><td>Clinical Training hrs/ week</td><td>40 hrs / week
26 weeks*</td></tr>
<tr><td>Course Purpose and Objectives</td><td colspan="5">Internships form a key component of the Physical Therapy curriculum. They provide students with direct exposure to clinical environments, offering opportunities to apply the knowledge and skills gained throughout their studies. The aim is to bridge theory with practice by addressing real patient needs through clinical reasoning, evidence-based decision-making, and professional conduct. These placements also help students grow in confidence, refine their communication and hands-on skills, and understand the responsibilities of practicing within a healthcare team.</td></tr>
<tr><td>Learning Outcomes</td><td colspan="5">Upon successful completion of this course, students should be able to:
Assess patient problems by gathering both subjective and objective information, evaluating clinical data, and developing rehabilitation plans grounded in evidence-based practice.
Select appropriate tools and techniques tailored to each patient’s condition, monitor progress or stagnation, and apply ergonomic principles to ensure safety for both themselves and the patient.
Communicate effectively with patients, explaining the rehabilitation process, justifying clinical decisions, and obtaining informed consent prior to treatment.
Respect the operational guidelines of each internship setting, adhere to principles of bioethics, maintain confidentiality, and protect patient privacy.
Document clinical findings using specialized evaluation forms for patients with cardio-respiratory, neuro-musculoskeletal, or neurological disorders.</td></tr>
</table>

<table>
<tr><td></td><td colspan="3">Guide and train patients and caregivers in strategies aimed at promoting functional independence.
Reassess the patient's condition, document changes, and modify treatment plans as needed, providing clinical justification and involving the patient in the decision-making process.</td></tr>
<tr><td>Prerequisites</td><td>All previous PHY Courses</td><td>Co-requisites</td><td>None</td></tr>
<tr><td>Course Content</td><td colspan="3">During internships, students are placed in approved hospitals or rehabilitation centres designated by the clinical training committee.

*The duration of clinical training is a minimum of 26 weeks, providing 1,040 hours of clinical training above that accumulated in the Clinical Practice I, II and III. Of this, at least 600 hours are spent in one or more hospitals. The remaining 440 hours are distributed between one or more hospitals, registered physiotherapy establishments, physiotherapy centers, hospitals, or rehabilitation centers.

The number of weeks of clinical training are adjusted according to legislation requirements to be eligible to register. Specifically, the duration of clinical training in Germany will be 28.5 weeks, providing 1,140 hours of clinical training. Of this, at least 600 hours are spent in one or more hospitals. The remaining 540 hours are distributed between one or more hospitals, registered physiotherapy establishments, physiotherapy centers, hospitals, or rehabilitation centers. Including the clinical training hours accumulated in the Clinical Practice I, II and III (462 hours), the total clinical training is 1,602 hours.

The main fields of clinical training are cardio-respiratory, neurological and musculoskeletal physiotherapy, in various populations. Disciplines include: surgery, internal medicine, orthopaedics, neurology, paediatrics, psychiatry, gynaecology, among others.

Under the supervision of licensed Physiotherapists, students conduct detailed evaluations of patients and document their clinical findings and observations daily in a designated practice booklet.

At the end of each placement, the supervising Physiotherapists sign the completed booklet, which is also reviewed and signed by the university's responsible academic supervisor.</td></tr>
<tr><td>Teaching Methodology</td><td colspan="3">Internship in Clinical Frameworks</td></tr>
<tr><td>Bibliography</td><td colspan="3">Shumway-Cook, A. & Woollacott, M., 2017. Motor Control: Translating Research into Clinical Practice. 5th edition. Wolters Kluwer.

Adler, S., Beckers, D. & Buck, M., 2018. PNF in Practice: An Illustrated Guide. 5th edition. Springer.</td></tr>
</table>

	Lennon, S., Ramdharry, G. & Verheyden, G., 2018. Physical Management for Neurological Conditions. 4th edition. Elsevier. Lennon, S., Ramdharry, G. & Verheyden, G., 2018. Physical Management for Neurological Conditions. 4th edition. Elsevier. Shumway-Cook, A. & Woollacott, M., 2017. Motor Control: Translating Research into Clinical Practice. 5th edition. Wolters Kluwer. Adler, S., Beckers, D. & Buck, M., 2018. PNF in Practice: An Illustrated Guide. 5th edition. Springer. Teasell, R. & Hussein, N., 2021. Stroke Rehabilitation Evidence-Based Review. 8th edition. Demos Medical Publishing. Kwakkel, G., 2023. Neurorehabilitation in Stroke: Evidence-Based Approaches. 2nd edition. Oxford University Press. Kisner, C., Colby, L.A. & Borstad, J., 2022. Therapeutic Exercise: Foundations and Techniques. 8th edition. F.A. Davis. Magee, D., 2020. Orthopedic Physical Assessment. 7th edition. Elsevier. Childs, J.D. & Fritz, J.M., 2021. Mobilization and Manual Therapy in Musculoskeletal Practice: Evidence-Based Techniques. 2nd edition. Elsevier. Brukner, P. & Khan, K., 2017. Clinical Sports Medicine. 5th edition. McGraw-Hill. Prentice, W.E., 2018. Rehabilitation Techniques for Sports Medicine and Athletic Training. 6th edition. McGraw-Hill. Polit, D.F. & Beck, C.T., 2021. Nursing Research: Generating and Assessing Evidence for Nursing Practice. 11th edition. Wolters Kluwer. Guyatt, G., Rennie, D., Meade, M.O. & Cook, D.J., 2015. Users' Guides to the Medical Literature: A Manual for Evidence-Based Clinical Practice. 3rd edition. McGraw-Hill Education. McGill, S.M., 2015. Low Back Disorders: Evidence-Based Prevention and Rehabilitation. 3rd edition. Human Kinetics.
Assessment	Internship: 100% 100%
Language	Greek & English

<table>
<tr><td>Course Title</td><td colspan="5">Undergraduate Thesis</td></tr>
<tr><td>Course Code</td><td colspan="5">HLS440</td></tr>
<tr><td>Course Type</td><td colspan="5">Compulsory</td></tr>
<tr><td>Level</td><td colspan="5">Bachelor (1st cycle)</td></tr>
<tr><td>Year / Semester of study</td><td colspan="5">See Table 2 “Course Distribution per Semester” of the specific program of study</td></tr>
<tr><td>Teacher’s name</td><td colspan="5">TBA</td></tr>
<tr><td>ECTS</td><td>6</td><td>Lectures / week</td><td>3 Hours/6 weeks</td><td>Laboratories / week</td><td>None</td></tr>
<tr><td>Course Purpose and Objectives</td><td colspan="5">This course aims to equip students with the essential skills to design, organize, and carry out a scientific study. Students will learn how to analyze, document, and present their research effectively. The ultimate goal is the completion of a scientific paper, which will be supported by an oral presentation. Throughout the process, students will receive guidance and supervision from a two-member advisory committee and the course instructor.</td></tr>
<tr><td>Learning Outcomes</td><td colspan="5">Upon successful completion of the course, students should be able to:
Outline, in logical order, the steps required to organize and carry out a literature review or research project
Identify and evaluate relevant scientific sources through searches in both print and electronic databases, and critically assess the extracted information
Describe the structure of scientific articles, accurately summarize their content, and synthesize findings into a coherent text
Evaluate and discuss issues related to research ethics and bioethics
Design, organize, and implement a descriptive literature review and/or an experimental study in the field of health sciences, following international standards and using validated citation systems
Present the research question, objectives, methodology, and results of an experimental study clearly, and critically compare findings with existing literature
Prepare and deliver a complete scientific project in both written and oral formats, suitable for academic and public presentation</td></tr>
<tr><td>Prerequisites</td><td colspan="2">Please refer to the Undergraduate Thesis Writing Guide for information on</td><td>Co-requisites</td><td colspan="2">None</td></tr>
</table>

	prerequisite courses and the minimum required GPA.		
Course Content	**Course Description:** This course includes lecture attendance, individual supervision sessions, the development of a research proposal, and the writing and oral presentation of an undergraduate thesis. • **Course Attendance:** Students are required to attend scheduled lectures focused on key aspects of thesis development, including scientific documentation, summarizing techniques, and academic presentation standards, as outlined in the *Undergraduate Thesis Writing Guide*. • **Supervision and Guidance:** Weekly meetings are held between the student and their assigned supervisor to provide ongoing guidance, structure the research timeline, and offer feedback on progress. • **Research Proposal Preparation:** Under the supervision of their advisor, students will develop a research proposal related to their chosen topic, which serves as the foundation for their thesis. • **Thesis Writing and Presentation:** After completing their research, students must write their thesis following the format and requirements set in the *Undergraduate Thesis Writing Guide*. Once the final version is approved by the two-member advisory committee, the student is scheduled to present their work before the committee. Upon successful presentation and evaluation, the final thesis is submitted to the Department's Secretariat, and the final course grade is assigned. A full outline of the course structure, requirements, and evaluation criteria can be found in the *Undergraduate Thesis Writing Guide*.		
Teaching Methodology	Face to Face		
Bibliography	Graduate Thesis Guide. Library of European University of Cyprus, Nicosia. Issued (date unknown). Higgins, J.P.T. & Green, S., 2011. Cochrane Handbook for Systematic Reviews of Interventions, version 5.1.0. The Cochrane Collaboration. Marder, P.M., 2011. Research Methods for Science. Cambridge University Press. Bhattacharya, P.K., 2021. Research Methodology in the Health Sciences: A Quick Reference Guide. 1st edition. McGraw-Hill Medical. Cooper, H., 2017. Research Synthesis and Meta-Analysis: A Step-		

<table>
<tr><td></td><td>by-Step Approach. 5th edition. Sage Publications.</td></tr>
<tr><td>Assessment</td><td>
<table>
<tr><td>Written research proposal</td><td>20%</td></tr>
<tr><td>Written research project</td><td>60%</td></tr>
<tr><td>Oral presentation</td><td>20%</td></tr>
<tr><td></td><td>100%</td></tr>
</table>

It is noted that success in the course requires securing the basis for each of the individual assessments.
</td></tr>
<tr><td>Language</td><td>Greek & English</td></tr>
</table>

European University Cyprus

Appendix II

SCHOOL:	**SCIENCES**
DEPARTMENT:	**HEALTH SCIENCES**

COURSE OUTLINE

Course Information		
Course Title: Soft Tissue Techniques		
Mode of Delivery: Conventional		
Course Code & Section: PHY200 ECAB	**Semester: FALL 2025**	
Day and Time: **Theory:** Tuesday 13:10-15:00 **Lab:** Tuesday 17:10-19:00 (ECA) Tuesday 19:10-21:00 (ECB)	**Lecture Room No.:** 105	**Lab Room No.:** 26
Prerequisite(s): none **Co-requisite(s):** none	**ECTS:**6	
Level: Bachelor (1st Cycle)	**Lecture Hours per week:** 2	**Laboratory Hours per week:** 2
Type of Course: Compulsory or Elective		
Instructor Information		
Name: Michail Pantouveris/ Efthymios Karapetsas		
Office Room No.: -	**Office Telephone Number: -**	
E-Mail: m.pantouveris@external.euc.ac.cy e.karapetsas@external.euc.ac.cy	**Office Hours:** by appointment	
Website Link:		
School Information		
School Office Telephone Number: 22559486	**School Office Email:** n.alexandrou@euc.ac.cy	
Website/Links		
University Website: www.euc.ac.cy **Students' Portal:** https://myeuclogin.euc.ac.cy through which you can have access to your University Email Account, as well as the Blackboard Learn Ultra webpage.		
EUC App: https://mobile.euc.ac.cy/		

COURSE DESCRIPTION:

The aim of the course is to educate students on issues related to the evaluation and treatment of soft-tissue damage. In addition, it is important to understand the mechanism by which massage acts on the human body, as well as to apply therapeutic massage techniques with safety while always adhering to the rules of indications and contraindications, depending on the disease entity and the therapeutic objectives.

Students are taught the role and contribution of massage techniques to the improvement of disorders of the skin, the fascia, the myotendinous system, the peripheral circulatory and lymphatic systems. The course also prepares the student for effective, documented, safe and realistic, clinical application of these techniques.

LEARNING OUTCOMES:

Upon successful completion of this course students should be able to:

- Describe the principles, rules and effects of therapeutic massage on human body
- Recognize and select the appropriate technique and be familiar with the physiological and biological effects of the various techniques.
- Determine, with proper clinical justification, the need for application of either single or combined classical massage, myoperitoneal massage, deep tissue massage, massage of reflex zone, connective tissue and lymphatic system.
- Determine with proper clinical justification the need for application to disable pain trigger points
- Identify and justify their choice and the need for application
- Apply the rules and techniques of therapeutic massage application with complete safety, adhering the rules of indications and contraindications.
- Develop the critical thinking required for the safe application of therapeutic massage in pathological conditions

Upon successful completion of the laboratory part of this course students should be able to:

- Evaluate the clinical picture of the patient and determine the site of application
- Choose to apply the appropriate massage technique that is certainly advisable
- Apply therapeutic massage safely in accordance with the rules of
- indications and contraindications and apply therapeutic massage modes by selecting appropriate methods and intervention techniques to address specific problems
- Modify the application according to the expected result and the reaction of the body

- Record the magnitude of the pain and the improvement or not of the condition
- Modify the method and rules of application after re-evaluation
- Perform all manipulations of classic massage, transverse friction massage, connective tissue massage, pain triggering reflex point massage and lymphatic system massage, as well as training the human body for proper posture.

SUGGESTED TEXTBOOK(S):

- Beck, MF., 2010. Theory And Practice Of Therapeutic Massage. Miladys, 5th edition.
- Stillerman, E. 2022. Modalities for massage and bodywork. Elsevier, 2nd edition

RECOMMENDED/ADDITIONAL READINGS:

- Travell, G.J., Simons, D.G., 2018. Travell, Simons & Simons' Myofascial Pain and Dysfunction: The Trigger Point Manual. Lippincott Williams & Wilkins; 3rd edition.
- Hoppenfeld, S., 2013. Physical Examination of the Spine and Extremities. Pearson Education Limited, Pearson New International Edition.
- Holey, E. and Cook, E., 2011. Evidence-Based Therapeutic Massage: A Practical Guide for Therapists. Churchill Livingstone; 3rd edition

Sanderson, M., 2012. Soft Tissue Release: A Practical Handbook For Physical Therapists. Lotus Pub; 3rd edition

WEEKLY BREAKDOWN (Excluding Christmas and Easter Holidays):	
WEEK	**TOPIC**
1	Introduction to soft tissue techniques (07/10)
2	Physiological effects of soft tissue techniques (14/10)
3	Classical massage (21/10)
4	Deep transverse massage (28/10)
5	Test 1, Trigger points techniques (04/11)
6	Lymphatic drainage (11/11)
7	Midterm exams (18/11)
8	Other soft tissue techniques (25/11)
9	Results – indications – contraindications of massage – clinical reasoning (02/12)
10	Massage for special populations 1 (09/12)
11	Test 2, massage for special populations 2 (16/12)
12	Clinical Scenarios (06/01)
13	Revision (13/01)
14	**FINAL EXAMS**

GRADE DISTRIBUTION:	
DESCRIPTION:	**PERCENTAGE**
1. Final examination	40%
2. Midterm examination	30%
3. Test 1	10%
4. Test 2	10%
TOTAL	100%

ADDITIONAL NOTES:

1. The basic textbook(s) and/or the recommended/additional readings listed in this course outline are the responsibility of the student to purchase, as per instructed by the Course Instructor.
2. The final examination for this course will be taking place between **19/01/2026-30/01/2026**. The final date and time will be provided at a later stage.
3. For a student who fails (one time) a course, see the 'Resit of the Final Examination' policy of European University Cyprus (EUC) at the EUC website here https://www.euc.ac.cy/en/current-students/academic-policies--regulations
4. Students with learning difficulties and disabilities are strongly encouraged to contact before the end of the third week of each academic semester the Committee for Students with Special Educational Needs (C.S.S.E.N./E.Φ.E.E.A.) at [e] efeea@euc.ac.cy and [t]+357 22559509], in order to ensure that the appropriate academic accommodations and support will be provided to them throughout the semester, as well as during the final examination.

5. Please remember to evaluate this course electronically, always in alignment to the guidelines that will be provided. The evaluation period will be taking place **15/12/2025-16/01/2026**
6. All course material and assessments on BlackBoard Learn Ultra will remain on the platform for 14 months. Once this time frame expires the course material will be removed from the platform.

Attendance policy

Policy of class attendance and assignment submission

Undergraduate programs

The Department of Life Sciences of the European University Cyprus has determined the following policy with regard to the attendance and assignment submission in order to ensure that maximum teaching efficiency is achieved and actual learning is accomplished.

Absences limit:

1. **Theory:** up to 3 absences or up to 25% of teaching time
2. **Laboratories:** up to 2 absences or up to 16.7% of teaching time
3. **Practice (clinical and other):** The defined by Cyprus legislation and study guides number of hours.

Attendance:

In order to facilitate the smooth conduction of lectures during the semester, students should attend the class on time, otherwise they will not be accepted until the next teaching period (after the break) while their absence will be recorded accordingly.

The absences limit will be reached when the maximum allowed number of absences has been recorded. Indicatively, three (3) absences could correspond to either 3 absences on 3 different dates that a three-hour course is being taught or to absence from 9 teaching hours on different dates (including being late or leaving early).

Regarding the clinical or other practice, the respective study guides provide appropriate guidelines. In the unlikely event that a student does not attend his/her practice facility but his/her absence is properly justified and documented, he/she will be required to extend the practice period by the number of hours/days that were lost. Even during practice, students are expected to attend their placement facility on time and leave at the designated time. Failure to do so will result in absence, as described above.

Absence justification is allowed only in cases where the maximum number of absences (as defined by the respective study guide) is not reached. Otherwise, the student has to repeat the course.

Class participation:

Class participation and the respective grading, does not only correspond to the physical presence of students in class but rather to their active participation during the lecture. Asking and answering questions, making arguments, defending a view or articulating a thought and participating in the dialogue generated in class, are a few examples of what is considered as active participation. The instructor of each course is responsible to determine and evaluate each student's participation.

Absence justification:

In order to evaluate the justification provided for a student's absence in a lecture or exam, the following criteria must be met:

1. The instructor should have been informed of the prospective absence prior to it or 48h after it, the latest.
2. Proper documentation should be provided to the course instructor by e-mail along with a written explanation of the reasons that prevented him/her from attending class/exam. This documentation has to be received within one (1) week from the date when the student did not attend the class (the latest).

It goes without saying that failure to conform to one of the two criteria will result in denial to reconsider justification of the respective absence. Moreover, it should also be noted that presenting the documentation as described above does not by itself mean that the absence is justified as this has to be considered by the Departmental Council whose decisions will be made clear to the instructor and student.

The following are considered as possible reasons for justification of an absence following proper documentation:

1. Sickness /injury
2. Military service
3. Court service
4. Participation in an international sports event/race
5. Other significant reasons (to be judged by the Departmental Council)

Absence justification should, by no means, result in "loss" of more than **50%** of theory or **30%** of laboratory classes (regardless of the underlying reason).

Hybrid courses:

Attendance policy in hybrid courses (with regard to the distance learning part of the course) is determined by the instructor and is monitored through the respective electronic platform.

Submission of assignments/projects:

In order to ensure that no discrimination takes place among students, deadlines are strictly followed. Thus, late submission of an assignment/project will result in either its rejection (no grade given for it), or in grade reduction, as the instructor deems necessary.

GRADING SYSTEM:								
UNDERGRADUATE					**GRADUATE**			
Letter Grade	**Grade Meaning**	**Grade Points**	**Percentage Grade**		**Letter Grade**	**Grade Meaning**	**Grade Points**	**Percentage Grade**
A	Excellent	4.0	90 and above		A	Excellent	4.0	90 and above
B+	Very Good	3.5	85-89		B+	Very Good	3.5	85-89

B	Good	3.0	80-84		B	Good	3.0	80-84
C+	Above Average	2.5	75-79		C+	Above Average	2.5	75-79
C	Average	2.0	70-74		C	Average	2.0	70-74
D+	Below Average	1.5	65-69					
D	Poor	1.0	60-64					
F	Failure	0			F	Failure	0	
I	Incomplete	0			I	Incomplete	0	
W	Withdrawal	0			W	Withdrawal	0	
P	Pass	0			P	Pass	0	
AU	Audit	0			AU	Audit	0	

(a) The grade "I" is awarded to a student who has maintained satisfactory performance in a course but was unable to complete a major portion of course work (e.g. assignment/paper or final exam) and the reasons given are acceptable to the instructor. It is the responsibility of the student to bring pertinent information to the instructor to justify the reasons for the missing work and to reach an agreement on the means by which the remaining course requirements will be satisfied. A student is responsible, after consulting with the instructor, for fulfilling the remaining course requirements within the first four weeks of the following semester for which an "I was awarded. In very special cases, the instructor may extend the existing incomplete grade to the next semester. Failure of the student to complete work within this specific time-limit will result in an "F" which will be recorded as the final grade.
(b) The grade "W" indicates withdrawal from the course before the specified time as explained in the withdrawal policy.
(c) Grades of "P" will not be computed into a student's cumulative grade point average but will count towards graduation credits.
(d) Grades of "F" will be computed into the student's cumulative grade point average.
(e) Students enrolling for an Audit must designate their intent to enrol on an Audit basis at the time of registration. Students registering for a course on an Audit basis receive no credit.

Final Exams Appeals Procedure:

In the case where a student believes that the grade received in the Final Exam is different from what was expected, he/she must exhaust all possibilities of resolving the problem with the pertinent instructor first. If this does not lead to a resolution, the student may appeal against the Final Exam grade by filing a petition with the Office of the Registrar (Petition Fee €34).

The Registrar will forward a copy of the petition to the pertinent Chairperson of Department, who will first ascertain that no error was made by the instructor, and if so will assign an anonymous re-evaluation of the final examination/project to another instructor. In the case of major discrepancy between the instructor's evaluation and the re-evaluation that will require change of grade, the average of the two evaluations will be assigned as the final grade to the final examination/project. Changes of grades resulting from an appeal require the endorsement of the Dean of School.

For a petition to be reviewed, a student must appeal within four (4) weeks from the date the results are announced.

UNIVERSITY EMAILS:

The University has taken the decision that all students, attending any University program of study, make use of the EUC email addresses when corresponding with EUC academic and administration staff, as well as all scientific collaborators and special scientists. It should be noted that the EUC staff will not be replying to any non-official EUC University email addresses.

UNIVERSITY EMAIL SUPPORT:

Kindly contact support@euc.ac.cy in case you do not know your University email address or face any difficulty in using it.

LIBRARY:

The library's **OPAC** (Online Access Public Catalogue) is located at https://onlinelibrary.euc.ac.cy/ and can be freely accessed. Current students, faculty and personnel can make reservations of books and other material.

For accessing electronic resources and databases off-campus, students can use **OpenAthens http://openathens.euc.ac.cy/**. You can access OpenAthens from the library webpage https://library.euc.ac.cy/ or alternatively you will see the OpenAthens logo when you first login through **My EUC Login** located on the upper right side of EUC's webpage. **It is strongly recommended to begin your research by signing first to OpenAthens and then visiting the databases of your interest rather than the other way around**. For a more detailed description of all databases visit **EUC E-Journals and Databases** https://library.euc.ac.cy/euc-e-journals-and-databases/.

Plemochoe is EUC's institutional repository established for the sole purpose of gathering, preserving and distributing original research material produced by the EUC faculty, students and researchers. Plemochoe aims to validate the intellectual life of the University by promoting scientific research to the local and international communities https://repo.euc.ac.cy/.

Visit the **Library Guides** https://library.euc.ac.cy/library-guides/ page to download and print manuals, guides, flyers on a number of services, like Turnitin, Mendeley, Refworks, EBSCO EDS, DynaMed, etc.

IMPORTANT UNIVERSITY INTERNAL REGULATIONS:

INTERNAL REGULATIONS ON "ACADEMIC ETHICS AND STUDENTS' DISCIPLINE"
https://euc.ac.cy/en/academics/academic-regulations/

INTERNAL REGULATIONS ON "PROCEDURES FOR THE MANAGEMENT OF COMPLAINTS/GRIEVANCES"
Procedures for the Management of Complaints Grievances

INTERNAL REGULATIONS ON "HARASSMENT AND BULLYING"
Harassment and Bullying Policy

INTERNAL REGULATIONS ON "SEXUAL HARASSMENT"
Sexual Harassment Policy

European University Cyprus

Appendix III

Theoretical and Practical Training Contact Hours

Semester 1

Course Title	Course Code	Theory hrs/w	Theory Total hrs/sem	Lab_practical hrs/w	Lab_practical total hrs/sem
Health Psychology	PSY105	3	42	0	0
FREE ELECTIVE*					
Anatomy 1	HEA120	2	28	2	28
Kinesiology 1	HEA135	2	28	2	28
First Aid	HEA122	0	0	3	42
*Academic Skills for Physiotherapists	HEA101	1	14	2	28

Semester 2

Physiology	HEA130	2	28	1	14
Anatomy II	HEA125	2	28	2	28
Kinesiology II	HEA140	2	28	2	28
Orthopeadics and Orthopeadic Surgery	PTH170	2	28	0	0
Neurology	PHY150	2	28	0	0
FREE ELECTIVE*					

Semester 3

Soft tissue Techniques	PHY202	2	28	2	28
Kinesiotherapy	PHY204	2	28	2	28
Neuromuscular Re-education	PHY205	2	28	2	28
Physical Modalities & Electrotherapy	PHY208	2	28	2	28
nternal Medicine - Rheumatology-Nosolog	HEA212	2	28	0	0
Legal, Bioethical and Ethical Issues in Physiotherapy	PHY215	2	28	0	0

Semester 4

Physiotherapy in Neurological Conditions	PHY222	2	28	2	28
Pulmonary Physiotherapy	PHY232	2	28	2	28
Physiotherapy of the Circulatory System	PHY235	2	28	2	28
Manual Therapy	PHY240	2	28	2	28
Communication Skills in Physiotherapy	PHY245	1	14	2	28
Inter-professional Practice in Healthcare	PHY250	2	28	0	0

Semester 5

Research Methodology and Biostatistics	HEA115	3	42	0	0
Physiotherapy in Neurological Conditions I	PHY322	2	28	2	28
Ergophysiology	PHY304	2	28	1	14
ysiotherapy of the Musculoskeletal Syster	PHY312	2	28	2	28
Clinical Practice I	PHY315	2	28	11	154

Semester 6

Pharmacology in Physiotherapy	PHY320	2	28	0	0
hysiotherapy of Special Population Group	PHY350	2	28	2	28
ysiotherapy of the Musculoskeletal Syster	PHY332	2	28	2	28
Biomechanics and Ergonomy	PHY335	2	28	1	14
Diagnostic Imaging	PHY340	2	28	0	0
Clinical Practice II	PHY345	2	28	11	154

Semester 7

Undergraduate Thesis	HLS440	3	42	0	0
Physiotherapy Assessment	PHY400	2	28	2	28
Sport Physiotherapy	PHY405	2	28	2	28
ysiotherapy of the Musculoskeletal System	PHY432	2	28	2	28
Clinical Practice III	PHY415	2	28	11	154

Semester 8

Clinical Training	PHY450	0	0		1040MC /1140FB	30

European University Cyprus

Appendix IV

European University Cyprus

Physiotherapy Clinical Training Manual

4th Edition, 2025

CLINICAL TRAINING

PHY420 - PHY450

Clinical training is part of the Physiotherapy program and an integral part of the education. It allows the development of specialized and general competencies of the profession of physiotherapist within the context of practice and is designed to promote the process of clinical reasoning and the treatment of patients' health problems based on scientific documentation.

It offers experience in physiotherapy practice in a variety of clinical, public and private settings, where the student can manage different groups of patients with different problems and at different stages of rehabilitation. In this way, the student becomes flexible, and can take a holistic approach to patient management. Students can promote their skills, knowledge of physiotherapy, with initiative, creativity, vision and imagination independently in the environments of rehabilitation.

OBJECTIVE

The Clinical Training aims to inform and educate students about the manner of Physiotherapy, the structure and operation of Physical Therapy Centers, and the rules and procedures governing the provision of Physiotherapy. The student assesses his / her own ability to evaluate and remedy a problem, understands the term "practicing the profession with safety and responsibility", realizes that the patient's performance in society in the shortest time and with the least functional loss is his / her duty.

Procedure for training – certification of practicing the profession

The student is placed in specific areas of practice after the completion of his/her 7th semester of studies after the coordination of the Course Supervisor.

The student must submit to the Course Supervisor within the timeframe specified the following documents in order to initiate the Clinical Training:

A) Application for the initiation of Clinical Training in the clinical centers concerned

B) Health Certificate along with the attached copies of the Health Booklet or Health Certificate where Hepatitis B, MMR vaccines and the Mantoux test appear to have been made.

After submitting the documents by the course Supervisor to the hospitals of concerned and being approved by the Public Sector Hospital Authority, the student may be placed in appropriate clinical settings for the commencement of the Clinical Training. The Clinical Training takes place in selected hospitals and other rehabilitation sites that have been selected as employment institutions and approved by the Department of Health Sciences of the European University of Cyprus.

The student is informed about his / her program by the Supervisor of the Clinical Training.

Students put in to practice the theoretical background and clinical practice of the 3 semesters (5th, 6th, and 7th) of clinical practice I, II, and III with the supervision of clinical instructors. In the setting where the clinical training takes place, they thoroughly evaluate the patients they are dealing with, under the supervision of the Physiotherapist of the Hospital or Rehabilitation Center, and complete in a daily basis the clinical evaluation and physiotherapeutic rehabilitation of the patient and their observations in their practice booklet.

Students work in the clinic in real-life Physical Therapy conditions, subjectively and objectively evaluate patients, take into account all findings through the process of clinical reasoning, and organize and implement a physiotherapeutic rehabilitation plan with the consent of the hospital's Physiotherapist in charge, based on scientifically substantiated practices.

Any trainee student can contact the Supervisor of Clinical Training for any settlement, issue resolution, and assistance in completing his Practice.

At the end of the six-month clinical training, the booklet is signed by the Physical Therapists in which the student was trained, by the Supervisor of the Institution, the Supervisor of the Clinical Training, and finally approved by the Department of Health Sciences of the University.

Learning outcome of clinical training in the profession

Upon completion of the six-month clinical training at selected Hospitals and Rehabilitation Centers the student should be able to:

- Have appropriate professional behavior with awareness of the fundamental legal and ethical boundaries of professional practice
- Comply with the rules of operation and safety of the Hospital and Private Centers
- Be responsible for his work by showing the necessary professionalism
- Prepare and adapt the space and any equipment for the application of physiotherapeutic intervention
- Develop the ability to communicate and collaborate with staff and others involved in the treatment of patients.
- Demonstrate the ability to discuss with Physiotherapists, other students, or other health professionals to manage incidents or other issues for clinical setting.
- Demonstrate skills for reflection and initiative in personal and professional practice
- Develop the ability of clinical reasoning
- Capable of subjectively evaluating the patient. Able to gather the necessary information through the interview of each patient, be able to modify it according to the situation and be able to create subjective solutions and assumptions to proceed with the objective assessment process of the patient
- Capable of objectively evaluate the patient. Be able to perform the physical examination correctly and smoothly, analyze any laboratory tests to obtain the necessary information and be able to draw conclusions as to the causes and possible outcome of the intervention for the patient's problems

- Summarize the findings of the Physiotherapeutic Assessment by creating an appropriate treatment plan with specific goals and be able to identify, when possible, the likely outcome in rehabilitation.
- Organize physiotherapeutic rehabilitation by properly selecting and applying the appropriate physiotherapeutic practice to meet patient rehabilitation goals
- Have developed the ability to communicate with patients
- Inform the patient about how to proceed with rehabilitation, justify their decision and have their full consent before starting treatment.
- Provide guidance and training to the patient or his / her environment to achieve functional independence
- Record the progress or stagnation of the incident
- Re-evaluate the patient. Reassess the clinical picture of the patient, record the findings and modify their intervention where necessary, after reasoning, disclosure and consent by the patient.
- Offer the highest quality in his work.

Clinical Training Timetable

Clinical Training Program

To schedule the training in the profession and place students in Public, Private Hospitals and Private physiotherapy rehabilitation centers, all specialty courses must have been successfully completed.

The Program is defined by the Clinical Training Supervisor in cooperation with the Employment Institutions with whom the Department of Health Sciences cooperates.

The clinical training is continuous, within the time limits specified, unless there is a change after informing the Supervisor of the course and examination of the case by the Department of Health Sciences.

Attendance

Students follow the rules of procedure that apply to the Physiotherapists in the department they work, sign the time of arrival and departure in the attendance form at each clinic.

Permission of Absence

During his training, the student may take a leave of absence for 5 consecutive working days (40 hours), after scheduling the time provided by the training facility. These days are documented in the internship booklet and the student must compensate the lost hours.

Absences

In the absence of the trainee is due to health reasons, the student is required to provide the Training facility with the necessary supporting documents within the week of absence, certifying the serious reasons stated.

The Body shall deposit them with the Intern and shall inform him / her of his / her absence up to one week after the settlement to make up for the absence. The possibility of replacing these days is evaluated by the Department of Health Sciences.

The Training Facility shall deposit them to the Supervisor of the Clinical Training and shall inform him / her of his / her absence up to one week after the settlement to

make up for the absence. The possibility of replacing these days is evaluated by the Department of Health Sciences.

The student compensated for these days at the end of the six-month internship if approved, with the agreement of the affiliated bodies and arranged by the Supervisor of the practice. Absences are recorded in the Clinical training booklet on the dates they were made and then the dates of the replacements are added.

In case of unjustified absence of the student and failure to pay necessary documentation there is a failure in the course.

STUDENT ROLE AND INFORMATION

Preparation for Clinical Training

Student Security

The student, while performing the clinical training, especially in the Hospitals, working in the health profession, is likely to be exposed to various infectious and infectious agents. To ensure the student's health from dangerous infections and illnesses and others in the service area during the practice, he / she should have the necessary vaccines and be certified, specifically for Hepatitis B, MMR (measles, mumps, rubella). and Mantoux test. In the case where a vaccine or dose is missing, the vaccination procedure should be started immediately. The student can be informed by the course supervisor about the process.

The student completes the Health Certificate sent by the Course Supervisor and encloses a copy of a booklet or doctor's certificate with the exams and vaccines (MMR, Hepatitis B, Mantoux). It shall be deposited with the Course Supervisor in writing within the specific timeframes given.

The European University of Cyprus ensures the Student's Insurance Coverage during the Clinical training.

Provincial Preference Request

After enrolling in the Course of Clinical Training, the student will contact the Course Supervisor. He must submit to the Officer, in electronic form, the province preference request for Public and Private Sector.

Request for Practical Training

In addition, the Practitioner Application Form for the Public Sector should be submitted to the Course Supervisor, in writing, within the specific timeframes given.

Student Program

The student is notified via the Blackboard platform and / or by the University email one week prior to the start of the Clinical Training for his or her placement in the Public and Private Sector. He/she is specifically informed of the dates of each Placement Site, of the Placement Site details, of the required clothing, and of the working hours. In case of any change or announcement there will be immediate update on the course platform.

Information - Communication

The student can contact the Course supervisor if there are any questions, difficulties or need any information regarding the training, in order to keep informed and arrange the subject accordingly. For any announcements, the student must check his/her mail and the course info on the Blackboard platform.

Case of Interruption of Clinical Training

If a student cannot attend the Training due to an unforeseen event (e.g. pregnancy, illness, injury, psychological problem, etc.), it is the student's responsibility to contact immediately the Course Supervisor to manage the issue in order to arrange how to continue or discontinue the training.

Travel costs

The costs associated with moving the student to and from the clinics where he / she works will be his / her own responsibility. Students must be certain before starting the internship that can respond financially to it.

Clinical Preparation for Clinical Training

The student may study the Clinical Practice Guide (I, II, III) for preparation for clinical applications. He/she can also study any material taught by the University in the fields of physiotherapy and in particular in the courses of Clinical Practice. It is useful to

practice clinical reasoning and clinical applications in small groups with fellow students.

The student in each area that he / she visits will contact the Employer and be informed about the patients, areas of physiotherapy and any other clinical matter. It is the responsibility of the student to have sufficient knowledge of clinical objects in any site visited. Students should set their own goals and expectations from each clinical setting and discuss them with the Employer at the start of their placement in each department.

Conducting the Clinical Training

Prior to the start of the Clinical Training, students need to be informed about the Public Sector Policy regarding the operation of Clinical Training and to sign the Hospital Policy for the clinical training in accordance with these principles. In the Private Sector, they are also required to follow the business hours of operation, safety and work regulations, as well as any other rules or regulations applicable to business personnel, and to sign if there is a corresponding document from the Institution.

The placement hours are 8 hours daily according to the timetable and schedule already agreed. Should there be any change, the Clinical placement site should be informed by the course supervisor to arrange the matter accordingly.

The 5 days of leave that the student is entitled to, should be recorded in the Practice Booklet after informing and getting permission by the Employer. It is also entitled to 5 days of sick leave, which must be substituted. In order to be substituted the student must submit the necessary supporting documents to the Employer.

There should be copies in the Clinical Training booklet. If there is an emergency where the student should be absent for some time, he/she will need to substitute the hours within the same week after consulting with the Employer and informing the Course supervisor.

Students are accountable to the Placement’s site responsible physiotherapist for the therapeutic approach of their patients and any clinical application.

Student Obligations

The student must know that he is responsible for the clinical management of his/her patients. He / she should be responsible for the patient's progress by applying appropriate physiotherapeutic intervention. They need to be aware that they can often share and have workloads according to the Physiotherapist of the placement.
Students should communicate with the staff and patients of the Clinical Placement. They should have the skills to organize and make the necessary adjustments and cleanliness of the place where the treatment and rehabilitation of patients are carried out.

Patients are people, not cases, who receive treatment. Therefore, students should be careful and let the patients know their identity, that they are graduate students of Physiotherapy, and if not themselves, then the responsible physiotherapist should introduce them. They should seek permission for questions during the interview, physical examination, as well as the treatment that will follow. It is also proprer to always justify clinical applications. The evaluation and clinical application of physiotherapeutic interventions is appropriate to be discussed and monitored by the physiotherapist and especially for any new activity performed by the trainee. The student informs the physiotherapist of the patient's progress and treatment.

Students take responsibility for their actions and are expected to make personal progress in the profession. The responsible physiotherapist helps develop and apply the knowledge of students in the field of their studies. Students, however, are responsible for determining their learning needs and discussing with physiotherapists the incidents they are dealing with and any information on physiotherapy issues.

Student appearance and clothing

Students must wear the uniform and badge that identifies them, which have been given to them by the physiotherapy Program, unless otherwise specified in the Private Sector in accordance with the operating rules of each physiotherapist. They should always be well-groomed. In case they have long hair they should be tied back. Long nails (farther than the fingertips) and any accessory to the hands that impede the proper application of physiotherapeutic practices and are dangerous to patients are not permitted. Therefore, there should be no jewelry in the hands.

Additionally, long earrings or anything else on the neck that can be pulled during treatment are not allowed.

Personal development of student in the profession

Students should be informed by the responsible physiotherapist about their process in the clinical area they are placed, in the middle and at the end of their time there. Thus, strategies can be developed to help the student improve his performance.
According to adult health education, students are responsible for their performance and should receive adequate information from the Institutions about it.

Professional behavior

Students completing their clinical training of the European University of Cyprus are ambassadors of the School when they are in the clinical setting. They have a responsibility to act in a responsible and professional manner at all times. Any form of conduct that violates these standards is considered a misdemeanor for which the Department may impose sanctions after the case has been examined. They must always adhere to the rules and principles of operation and safety in each clinical setting. Practice in a clinical setting is important and this privilege should never be abused. Students should respect patients' privacy and maintain confidentiality.

Student Rights

The student, through his/her work in the clinical settings, expects his/her independence and encouragement in the application of assessment and physiotherapy rehabilitation, in patients with different problems and difficulties affecting various systems such as musculoskeletal, cardiopulmonary and neurological etc.
The student expects from the physiotherapist of the Placement Site to be appropriately qualified, to be flexible, fair and consistent, to guide the student where needed and to encourage personal development in the profession, to be responsible for the organization and management of the student. The student is instantly informed by physiotherapists of his performance with positive comments on areas that he/she has developed abilities and with suggestions for any improvements that may be needed. During the clinical training, the student has the right to evaluate the

employers through a questionnaire that he / she fills in to improve the quality of the course. The student may contact the Course Supervisor if there are any questions, difficulties, or need any information or assistance to resolve the issue immediately. At the end of the placement, the student will have applied and acquired the learning outcomes and physiotherapeutic abilities as detailed in the corresponding section.

ROLE OF EMPLOYEES IN CLINICAL TRAINING

Public Sector Employers are Public Hospitals, Nicosia General Hospital, Makarios Hospital, and the General Hospitals of Larnaca, Limassol, Paphos, Famagusta and Kyperounda. Private Sector Employment Agencies are Physical Therapy Centers, Private Rehabilitation Centers, Private Clinics in all the provinces that have been approved by the University in accordance with the framework for the highest quality in Student Practice. There is collaboration between them and the Department of Health Sciences. In the Employment Settings the student can meet a large number of patients in different fields of physiotherapy.

Criteria and Employer Role

The Physical Therapy Centers meet the necessary criteria for cooperation with the Department of Health Sciences in conducting Student's Clinical Training. The employer must be a Physiotherapist or Rehabilitation Center managed by a Physiotherapist or a Nursing Home having a Physiotherapeutic Department with a responsible Physiotherapist. The Responsible Physiotherapist should be registered with the Physical Therapists Association with a renewed subscription and a renewed license to practice and have 5-years experience in physiotherapy. The clinical setting should be suitable to provide physiotherapy services. The physiotherapist is willing and responsible for the improvement and application of students' knowledge. Must be a role model in the profession. Must be capable of assisting and guiding students when needed during the evaluation and physiotherapeutic intervention of patients. He/she provides the student with the opportunity to develop and apply their knowledge in the treatment of patients, offers the appropriate environment by providing the student with the experience of practicing the profession. In the clinical setting the student is given the opportunity to monitor and manage several patients

a day. There is time to supervise and inform the student for his / her progress and performance, resolve questions for the student and provide feedback to improve his / her practice. The responsible physiotherapist must be able to manage and promote patient-student collaboration. There must be a holistic approach to the patient so that the student can develop clinical reasoning and apply appropriate therapies. Finally, the clinical setting must be able to promote learning outcomes as reported.

Placement Sites and Students

Prior to the beginning of the Clinical Training, the Employment Institution with whom the Department cooperates shall be duly informed about the necessary documents (Booklet, Assessment, Presentation), and any other information needed by the course supervisor. The Institution determines the timetable and the number of students it can accept. The responsible physiotherapist, in whom the Clinical Training is conducted, is responsible for the student on site. On the first day, he/she must inform the student regarding the rules of operation and safety, time and clothing so that they can be followed. The trainee should be monitored and sign the time of arrival and departure so as to complete in the Attendance form the hours agreed. The physiotherapist is responsible for performing the exercise on site and should constantly discuss with the student the clinical reasoning, communication and rehabilitation of the patients he manages. He / she should also give initiatives to the student, control the quality of his / her work as well as promote the ability of organization and management. Moreover, the responsible physiotherapist should create an environment in which there is communication between the student and the staff on site. The institution is obliged, within its capabilities, to contribute to the better education of the trainee student.

Absences

The Employer is responsible for the attendance form that students sign daily. The student is entitled to a total of 5 days of semester leave after discussion with the employer for that period of time. The trainee is also entitled to 5 days sick leave. These missed days/hours must be compensated. If a student is absent due to illness or serious reason then he / she informs the Course Supervisor within the week. The

student must bring the necessary supporting documents to the employer, then provide them to the Course Supervisor and attach copies to the Booklet. After consultation with the Supervisor and the Employer, the date of substitution shall be determined if there is approval by the Department. For any unjustified absence the institution must immediately inform the course supervisor.

Employer and Clinical Training Booklet

The placement's responsible physiotherapist monitors and checks each weekly form of the training booklet. There the trainee records the date, the department in which he/she did the placement, a brief description of the cases he has seen, their goals and treatment plan followed. At the end of each weekly sheet the responsible physiotherapist of each department in the placement setting, signs.

Student Assessment and Evaluation

The responsible physiotherapist of the employment institution evaluates the student's abilities and briefly presents his observations in a separate form that is sent to him electronically by the Course Supervisor. This form can be completed electronically or printed and completed. Once completed it should be sent by email or mail or handed manually to the Course Supervisor. Students should not be given the evaluation form.

Contact with the Course Supervisor

The Employer is in contact with the Clinical Training course Supervisor for any assistance, problem solving, coordination and ongoing updates on any information about the clinical training and through visits made during the placement.

Role of Supervisor - Head of Clinical Training

Start of Clinical Training

For the smooth operation of the clinical training, the coordination of the whole effort for the effective practice of students to the profession is managed by the Head of Clinical Training. The supervisor informs the students about the necessary actions and gathering of documents related to the beginning of the Clinical Training. The supervisor is looking for positions in the Public and Private Employment Agency to prepare students for clinical training in order to achieve the learning outcomes of the course. He/she comes into contact with physiotherapists in the private sector who meet the eligibility framework for the provision of services for Clinical Training and an agreement is conducted between them and the Department of Health Sciences to initiate or continue the cooperation. The supervisor will consult with them before the beginning of the clinical training to form the program, to the ideal number of students. Additionally, he/she informs them and sends the necessary documents (Attendance form, booklet, program, any update).

The supervisor informs students of the Program of Clinical training, for the timetable and any information needed via the course platform on Blackboard and / or via the university email.

Clinical Training Duration

The clinical training duration is determined by the registration laws of the country in which the program is offered.

The duration of clinical training is a minimum of 26 weeks, providing 1,040 hours of clinical training above that accumulated in the Clinical Practice I, II and III. Of this, at least 600 hours are spent in one or more hospitals. The remaining 440 hours are distributed between one or more hospitals, registered physiotherapy establishments, physiotherapy centers, hospitals, or rehabilitation centers.

This is compliant with Cypriot regulations, as per - Ο περί Εγγραφής Φυσιοθεραπευτών (Τροποποιητικός) Νόμος του 2021 (Ν. 52(Ι)/2021) Ε.Ε., Παρ.Ι(Ι), Αρ.4829, 14/4/2021

The number of weeks of clinical training are adjusted according to legislation requirements to be eligible to register. Specifically, the duration of clinical training in Germany will be 28.5 weeks, providing 1,140 hours of clinical training. Of this, at least 600 hours are spent in one or more hospitals. The remaining 540 hours are distributed between one or more hospitals, registered physiotherapy establishments, physiotherapy centers, hospitals, or rehabilitation centers. Including the clinical training hours accumulated in the Clinical Practice I, II and III (462 hours), the total clinical training is 1,602 hours.

The main fields of clinical training are cardio-respiratory, neurological and musculoskeletal physiotherapy, in various populations. Disciplines include: surgery, internal medicine, orthopaedics, neurology, paediatrics, psychiatry, gynaecology, among others.

This is compliant with German regulations, as per – Ausbildungs - und Prüfungsverordnung für Physiotherapeuten vom 6. Dezember 1994 (BGBl. I S. 3786), die zuletzt durch Artikel 10 der Verordnung vom 7. Juni 2023 (BGBl. 2023 I Nr. 148) geändert worden ist.

Visits

Clinical Training is supervised during the placement. Employers are visited to check the suitability of the clinic, the services provided, the student's performance in line with the learning outcomes and the course of their performance. The supervisor communicates with the employer about everything related to conducting student's training to improve any point needed and resolve any situation. He/she informs the Department of Health Sciences about the process of the training and reports on the supervision for each clinical area separately. He/she still communicates with the trainees about the course progression.

Absences – Schedule

For any difficulty of a student for the continuous execution of the training, he / she must inform the Supervisor to arrange the issue accordingly.

Students' absences are informed by the Employment Agency and the necessary supporting documents are provided, up to one week after the absence, for coordination between the institutions so that they can be substituted after the Department has examined the cases.

Communication

The Clinical Training Supervisor is in contact with students and employment institutions for any assistance, problem solving, coordination and ongoing information. He/she informs the Department of Health Sciences for examination in case specific issues arise.

Checking the Clinical Training and Certificate Booklet

At the end of the clinical training semester, students submit to the Course Supervisor the completed Practical Booklet for examination and recording of grades. Alongside, students must submit Certificates of Practice in each clinical setting indicating the specific dates of each practice. Once checked, the course leader signs it. Finally, the course supervisor delivers the book to the President of the Department for review and final approval. Upon the successful completion of the course and the approval of the Booklet for completing the training, the Department of Health Sciences will deliver a Certificate for completing Clinical training. This certificate is required for further use by the student for the purpose of registering with the Physical Therapists Association and the Registration Council in order to be approved for the Professional License.

Student Grade

The rating is summarized, using the 100 scale, by the evaluation sheets of all the institutions in which the student completed his / her clinical training. The final grade correspondence is detailed in the course's outline.

INSTRUCTIONS FOR COMPLETING AND SUBMITTING THE BOOKLET OF CLINICAL TRAINING AND NECESSARY DOCUMENTS AT THE END OF THE TRAINING

Upon completion of the clinical training, each trainee must complete and submit the internship book to the Course Supervisor. The content of the clinical training booklet confirms and briefly presents the student's practice in the clinical setting. It is very important to correctly and accurately complete the book (with a pen), as it will be the written certificate of training. This guide highlights the main points of the book that need to be completed and provides instructions on how to complete it correctly.

In summary, the student is required to complete the following sections:

1. Details of trainee and field of study

The individual details of the student and the details of the institutions in which the Internship took place should be given.

2. Weekly Form of Clinical Training

Each sheet corresponds to a week of placement. The student should fill in as many sheets as the weeks in the placement setting. Each sheet should clearly indicate the beginning and the end of the week, the part where the student practiced and the physiotherapeutic interventions performed. A brief description of the incidents the student has seen, the goals, and the treatment plan followed should also be listed. At the end of each weekly sheet there should be signatures of the trainee and the supervisor of each department.

This Certificate will be given to the student by each employment institution at the end of his/her internship in the specific department/placemnt.

3. Certificates from each Employment Institution

The student must provide a formal certificate from each employer for the completion of the training timetable in the departments where the student has been practiced

each time period along with the Practice Booklet. This Certificate will be delivered to the student by each employer at the end of his/her placement in the clinical setting.

4. Record of Absences

Leave days and days of absence due to illness or other serious reason should be recorded. The placement site from which there was leave or absence signs a form. The days of the replacements are also recorded and signed by the respective entity where the substitution took place. The relevant supporting documents can be attached here.

5. Clinical Training Booklet Delivery

As for the Public Sector, at the end of the training at the Regional Hospitals and the Nicosia Hospital wards, the booklet is delivered to the Nicosia Hospital Manager for final inspection and signature.

In the Private Sector, at the end of the training at each Physical Therapy Center, the booklet is delivered to the Responsible institution for final inspection and signature.

The book must be accompanied by the documents of the institutions certifying that he/she has completed his/her training in the profession - Certificate from each employer indicating the exact date of the clinical training

Upon completion of the modules the student submits the clinical training booklet and is checked by the Course Supervisor for the completeness and correctness of the entries.

In the end, the booklet is monitored and approved by the Department of Health Sciences.

Language courses:

Medical German

The intensive Medical German program has been designed by European University Cyprus Language Center so that students can achieve German competency as required by the German Medical Law.

CLINICAL TRAINING DATA

Student's Full name:

_____

Registration Number :

_____

Student's Signature :

_____

Public Sector

HOSPITAL	DEPARTMENT	MONITORING WEEK/ DATE	DEPARTMENT'S SUPERVISOR SIGNATURE

Private sector

PHYSIOTHERAPY CENTER/ INSTITUTION	MONITORING WEEK / DATE	CENTER'S SUPERVISOR SIGNATURE

Date: : _____

CERTIFICATION
CLINICAL TRAINING

This certifies that: _____
With Registration Number :
_____
Of the Physiotherapy course, has successfully completed the six-month clinical training in the following areas:

- Public Sector - from the period _____ to _____
  at the following Hospitals – Departments

HOSPITALS

- Private Sector - from the period _____ to _____
  at the following Physiotherapy centers/institutions

PHYSIOTHERAPY CENTERS/INSTITUTIONS

Clinical Training Supervisor / Signature

_____

Chairman of Department of Health Sciences / Signature

_____

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Monday			
Tuesday			
Wednesday			
Weekly Schedule of Clinical Training			
Thursday			

Friday			
Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Monday			

Tuesday			
Wednesday			
Weekly Schedule of Clinical Training			
Thursday			
Friday			

Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Monday			
Tuesday			

Wednesday			
Weekly Schedule of Clinical Training			
Thursday			
Friday			
Supervisor Physiotherapist - Employment institution			

Clinic : Date: : Full name : Signature :

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Monday			
Tuesday			
Wednesday			

Weekly Schedule of Clinical Training			
Thursday			
Friday			
Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Monday			
Tuesday			
Wednesday			
Weekly Schedule of Clinical Training			
Thu			

Friday			
Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Mo			

Tuesday			
Wednesday			
Weekly Schedule of Clinical Training			
Thursday			
Friday			

Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Monday			
Tuesday			

Wednesday			
Weekly Schedule of Clinical Training			
Thursday			
Friday			
Supervisor Physiotherapist - Employment institution			

Clinic : Date: : Full name : Signature :

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Monday			
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Wednesday			

Weekly Schedule of Clinical Training			
Thursday			
Friday			
Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
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Weekly Schedule of Clinical Training			
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Friday			
Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Mo			

Tuesday			
Wednesday			
Weekly Schedule of Clinical Training			
Thursday			
Friday			

Supervisor Physiotherapist - Employment institution

Clinic :

Date: :

Full name :

Signature :

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Monday			
Tuesday			

Wednesday			
Weekly Schedule of Clinical Training			
Thursday			
Friday			
Supervisor Physiotherapist - Employment institution			

Clinic :

Date: :

Full name :

Signature :

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
Monday			
Tuesday			
Wednesday			

Weekly Schedule of Clinical Training			
Thursday			
Friday			
Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
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Weekly Schedule of Clinical Training			
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Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
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Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
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Day	Department of training	Clinic	Brief description of patients treated
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Supervisor Physiotherapist - Employment institution			

Clinic : Date: : Full name : Signature :

Weekly Schedule of Clinical Training			
Week ( )			From : To :
Day	Department of training	Clinic	Brief description of patients treated
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Weekly Schedule of Clinical Training			
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Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

Weekly Schedule of Clinical Training			
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Day	Department of training	Clinic	Brief description of patients treated
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Supervisor Physiotherapist - Employment institution			

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Weekly Schedule of Clinical Training			
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Weekly Schedule of Clinical Training			
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Day	Department of training	Clinic	Brief description of patients treated
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Supervisor Physiotherapist - Employment institution

Clinic :

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Signature :

Weekly Schedule of Clinical Training			
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Day	Department of training	Clinic	Brief description of patients treated
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Supervisor Physiotherapist - Employment institution			

Clinic : Date: : Full name : Signature :

Weekly Schedule of Clinical Training			
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Day	Department of training	Clinic	Brief description of patients treated
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Clinic : Date: : Full name : Signature :			

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Day	Department of training	Clinic	Brief description of patients treated
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Weekly Schedule of Clinical Training			
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Supervisor Physiotherapist - Employment institution			
Clinic : Date: : Full name : Signature :			

RECORDING OF ABSENCE IN CLINICAL TRAINING

Dates of Absence

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……
Supervisor of Employment Institution
Full name και Signature
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Dates of Absence from Work due to Illness or Other Serious Reason with the necessary supporting documents attached

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Dates of Replacement of Absences

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Supervisor
Full name and Signature
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ΕΠΙΣΗΜΗ ΕΦΗΜΕΡΙΔΑ
ΤΗΣ ΚΥΠΡΙΑΚΗΣ ΔΗΜΟΚΡΑΤΙΑΣ
ΠΑΡΑΡΤΗΜΑ ΠΡΩΤΟ
ΝΟΜΟΘΕΣΙΑ - ΜΕΡΟΣ Ι

Αριθμός 4829	**Τετάρτη, 14 Απριλίου 2021**	**271**

Ο περί Εγγραφής Φυσιοθεραπευτών (Τροποποιητικός) Νόμος του 2021 εκδίδεται με δημοσίευση στην Επίσημη Εφημερίδα της Κυπριακής Δημοκρατίας σύμφωνα με το Άρθρο 52 του Συντάγματος.

Αριθμός 52(Ι) του 2021

ΝΟΜΟΣ ΠΟΥ ΤΡΟΠΟΠΟΙΕΙ ΤΟΥΣ ΠΕΡΙ ΕΓΓΡΑΦΗΣ ΦΥΣΙΟΘΕΡΑΠΕΥΤΩΝ ΝΟΜΟΥΣ ΤΟΥ 1989 ΕΩΣ 2005

	Η Βουλή των Αντιπροσώπων ψηφίζει ως ακολούθως:	
Συνοπτικός τίτλος. 140 του 1989 36(Ι) του 1998 76(Ι) του 2004 101(Ι) του 2005.	**1.** Ο παρών Νόμος θα αναφέρεται ως ο περί Εγγραφής Φυσιοθεραπευτών (Τροποποιητικός) Νόμος του 2021 και θα διαβάζεται μαζί με τους περί Εγγραφής Φυσιοθεραπευτών Νόμους του 1989 έως 2005 (που στο εξής θα αναφέρονται ως «ο βασικός νόμος») και ο βασικός νόμος και ο παρών Νόμος θα αναφέρονται μαζί ως οι περί Εγγραφής Φυσιοθεραπευτών Νόμοι του 1989 έως 2021.	
Τροποποίηση του άρθρου 2 του βασικού νόμου.	**2.** Το άρθρο 2 του βασικού νόμου τροποποιείται με την προσθήκη, στην κατάλληλη αλφαβητική σειρά, του ακόλουθου νέου όρου και του ορισμού αυτού:	
	136(Ι) του 2015 47(Ι) του 2016 35(Ι) του 2019 54(Ι) του 2020 138(Ι) του 2020 208(Ι) του 2020.	«“Φορέας” σημαίνει το Φορέα Διασφάλισης και Πιστοποίησης της Ποιότητας της Ανώτερης Εκπαίδευσης, ο οποίος ιδρύθηκε με βάση τις διατάξεις του περί της Διασφάλισης και Πιστοποίησης της Ποιότητας της Ανώτερης Εκπαίδευσης και της Ίδρυσης και Λειτουργίας Φορέα για Συναφή Θέματα Νόμου·».
Τροποποίηση του άρθρου 6	**3.** Το εδάφιο (1) του άρθρου 6 του βασικού νόμου τροποποιείται ως ακολούθως:	

του βασικού νόμου.		
	(α)	Με την αντικατάσταση της παραγράφου (α) αυτού με την ακόλουθη παράγραφο:
		«(α) είναι πολίτης της Δημοκρατίας ή κατά την υποβολή της αίτησής του είναι σύζυγος ή τέκνο πολίτη της Δημοκρατίας που έχει τη συνήθη διαμονή του στη Δημοκρατία ή είναι πολίτης κράτους μέλους ή κατά την υποβολή της αίτησής του είναι σύζυγος ή τέκνο πολίτη κράτους μέλους που έχει τη συνήθη διαμονή του στη Δημοκρατία·» και
	(β)	με την αντικατάσταση της επιφύλαξης αυτού με τις ακόλουθες επιφυλάξεις:
	52(Ι) του 2021. Τρίτο Παράρτημα.	«Νοείται ότι, ανεξαρτήτως των προβλεπόμενων στον Γ. Τομέα του Τρίτου Παραρτήματος προϋποθέσεων, δύναται να εγγραφεί στο Μητρώο πρόσωπο, το οποίο έχει συμπληρώσει τουλάχιστον χίλιες (1000) ώρες πρακτικής άσκησης στους τρεις κύριους τομείς της φυσιοθεραπείας, ήτοι της μυοσκελετικής, της νευρολογικής και της καρδιοαναπνευστικής ή έχει αρχίσει την πρακτική του άσκηση πριν από την έναρξη της ισχύος του περί Εγγραφής Φυσιοθεραπευτών (Τροποποιητικού) Νόμου του 2021 σε εγγεγραμμένο φυσιοθεραπευτήριο, κέντρο φυσιοθεραπείας, νοσηλευτήριο ή κέντρο αποκατάστασης, σύμφωνα με τις διατάξεις της υποπαραγράφου (δ) της παραγράφου 1 του Γ. Τομέα του Τρίτου Παραρτήματος:
		Νοείται περαιτέρω ότι, η πρακτική άσκηση, συμπεριλαμβανομένων του περιεχομένου αυτής, των προσώπων που εποπτεύουν και των υποδομών ιδρύματος ανώτερης εκπαίδευσης της Δημοκρατίας, αξιολογείται και πιστοποιείται από το Φορέα κατά τη διάρκεια εξωτερικής αξιολόγησης του προγράμματος σπουδών, όπως προβλέπεται στον περί της Διασφάλισης και Πιστοποίησης της Ποιότητας της Ανώτερης Εκπαίδευσης και της Ίδρυσης και Λειτουργίας Φορέα για Συναφή Θέματα Νόμο.».
Τροποποίηση του Τρίτου Παραρτήματος του βασικού νόμου.	**4.** Το Τρίτο Παράρτημα του βασικού νόμου τροποποιείται με την αντικατάσταση του Γ. Τομέα - Πρακτική Άσκηση με τον ακόλουθο Γ. Τομέα - Πρακτική Άσκηση: «Γ. Τομέας - Πρακτική άσκηση: 1. Πρακτική άσκηση στο επάγγελμα, η οποία-	
	(α) πραγματοποιείται είτε μερικώς είτε εξ ολοκλήρου σε οποιαδήποτε από τα αναφερόμενα στην υποπαράγραφο (δ) εγγεγραμμένα φυσιοθεραπευτήρια, κέντρα φυσιοθεραπείας, νοσηλευτήρια ή κέντρα αποκατάστασης· (β) είναι ενσωματωμένη στο πρόγραμμα σπουδών και διεξάγεται κατά το τελευταίο έτος σπουδών υπό την εποπτεία εγγεγραμμένου φυσιοθεραπευτή, ο οποίος ασκεί το επάγγελμα για τουλάχιστον πέντε (5) έτη και εργοδοτείται στις εν λόγω εγκαταστάσεις· (γ) καλύπτει χρονική περίοδο τουλάχιστον χιλίων (1000) ωρών, οι οποίες κατανέμονται ως ακολούθως: (i) Εξακόσιες (600) ώρες σε ένα ή περισσότερα νοσηλευτήρια· και (ii) τετρακόσιες (400) ώρες σε ένα ή περισσότερα εγγεγραμμένα φυσιοθεραπευτήρια, κέντρα φυσιοθεραπείας, νοσηλευτήρια ή κέντρα αποκατάστασης, σύμφωνα με τις διατάξεις της υποπαραγράφου (δ)· και
	(δ) αποδεικνύεται με πιστοποιητικό ή βεβαίωση, τα οποία εκδίδονται από εγγεγραμμένο φυσιοθεραπευτή που εργοδοτείται σε εγγεγραμμένο φυσιοθεραπευτήριο, κέντρο φυσιοθεραπείας, νοσηλευτήριο ή κέντρο αποκατάστασης, στο οποίο έχει πραγματοποιηθεί η πρακτική άσκηση.	
	2. Τα αναφερόμενα στην υποπαράγραφο (δ) της παραγράφου 1 εγγεγραμμένα φυσιοθεραπευτήρια, κέντρα φυσιοθεραπείας, νοσηλευτήρια ή κέντρα αποκατάστασης, στα	

	οποία έχει πραγματοποιηθεί η πρακτική άσκηση, δύναται να είναι δημοσίου ή ιδιωτικού δικαίου.».

Appendix VI

Ausbildungs- und Prüfungsverordnung für Physiotherapeuten (PhysTh-APrV)

PhysTh-APrV

Ausfertigungsdatum: 06.12.1994

Vollzitat:

"Ausbildungs- und Prüfungsverordnung für Physiotherapeuten vom 6. Dezember 1994 (BGBl. I S. 3786), die zuletzt durch Artikel 10 der Verordnung vom 7. Juni 2023 (BGBl. 2023 I Nr. 148) geändert worden ist"

Stand: Zuletzt geändert durch Art. 10 V v. 7.6.2023 I Nr. 148

Fußnote

(+++ Textnachweis ab: 21.12.1994 +++)

Eingangsformel

Auf Grund des § 13 Abs. 2 und 3 in Verbindung mit § 12 Abs. 1 Satz 8 und 9 des Masseur- und Physiotherapeutengesetzes vom 26. Mai 1994 (BGBl. I S. 1084) verordnet das Bundesministerium für Gesundheit im Benehmen mit dem Bundesministerium für Bildung und Wissenschaft:

Abschnitt 1
Allgemeine Vorschriften

§ 1 Ausbildung

(1) Die dreijährige Ausbildung der Physiotherapeuten umfaßt mindestens den in der Anlage 1 aufgeführten theoretischen und praktischen Unterricht von 2 900 Stunden und die aufgeführte praktische Ausbildung von 1 600 Stunden. In den Fällen des § 12 Abs. 2 des Masseur- und Physiotherapeutengesetzes und für Umschüler nach § 18 Satz 2 des Gesetzes sind die Stundenzahlen entsprechend zu verringern, wobei sich der Unterricht auf alle Fächer der Anlage 1 erstrecken muß.

(2) Die nach § 12 Abs. 1 Satz 1 und 2 des Masseur- und Physiotherapeutengesetzes verkürzte Ausbildung zum Physiotherapeuten umfaßt mindestens den in der Anlage 2 aufgeführten theoretischen und praktischen Unterricht von 1 400 Stunden und die aufgeführte praktische Ausbildung von 700 Stunden. Die nach § 12 Abs. 1 Satz 3 des Gesetzes verkürzte Ausbildung umfaßt mindestens den in der Anlage 3 aufgeführten theoretischen und praktischen Unterricht von 1 000 Stunden und die aufgeführte praktische Ausbildung von 400 Stunden. Der theoretische Unterricht kann in dem in Anlage 2 und 3 vorgeschriebenen Umfang auch in Form von Fernunterricht, der unter der Verantwortung der Schule steht, durchgeführt werden. Soweit der Fernunterricht von einem Dritten durchgeführt wird, ist er mit der Schule abzustimmen.

(3) Im Unterricht muß den Schülern ausreichende Möglichkeit gegeben werden, die erforderlichen praktischen Fähigkeiten und Fertigkeiten zu entwickeln und einzuüben. Die praktische Ausbildung findet am Patienten statt.

(4) Die regelmäßige und erfolgreiche Teilnahme an den Ausbildungsveranstaltungen nach Absatz 1 oder 2 ist durch eine Bescheinigung nach dem Muster der Anlage 4 nachzuweisen. Im Falle des Fernunterrichts nach Absatz 2 Satz 4 ist der Bescheinigung nach Satz 1 eine Bescheinigung des Fernlehrinstituts beizufügen, aus der sich die erfolgreiche Teilnahme am Fernunterricht ergibt.

(5) Lehrformate, die selbstgesteuertes Lernen oder E-Learning beinhalten, können zielgerichtet bei der Konzeption des theoretischen und praktischen Unterrichts in einem angemessenen Umfang berücksichtigt werden. Die Teilnahme an den Lehrformaten nach Satz 1 ist von den Auszubildenden gegenüber der Schule nachzuweisen. Das Nähere regeln die Länder.

§ 2 Staatliche Prüfung

(1) Die staatliche Prüfung für die Ausbildungen nach § 9 und § 12 Abs. 1 des Masseur- und Physiotherapeutengesetzes umfaßt jeweils einen schriftlichen, einen mündlichen und einen praktischen Teil. Die

Prüfung für die Ausbildungen nach § 12 Abs. 1 des Gesetzes besteht aus einer Ergänzungsprüfung, die in zwei Teilabschnitten abgelegt werden kann.

(2) Der Prüfling legt die Prüfung bei der Schule für Physiotherapeuten (Schule) ab, an der er die Ausbildung abschließt. Die zuständige Behörde, in deren Bereich die Prüfung oder ein Teil der Prüfung abgelegt werden soll, kann aus wichtigem Grund Ausnahmen zulassen. Die Vorsitzenden der beteiligten Prüfungsausschüsse sind vorher zu hören.

§ 3 Prüfungsausschuß

(1) Bei jeder Schule wird ein Prüfungsausschuß gebildet, der aus folgenden Mitgliedern besteht:

1. einem fachlich geeigneten Vertreter der zuständigen Behörde oder einer von der zuständigen Behörde mit der Wahrnehmung dieser Aufgabe betrauten fachlich geeigneten Person als Vorsitzender,
2. einem Beauftragten der Schulverwaltung, wenn die Schule nach den Schulgesetzen eines Landes der staatlichen Aufsicht durch die Schulverwaltung untersteht,
3. folgenden Fachprüfern:
   a) mindestens einem Arzt,
   b) mindestens einem an der Schule unterrichtenden Physiotherapeuten oder Krankengymnasten oder einem Diplom-Medizinpädagogen oder Medizinpädagogen mit einer abgeschlossenen Ausbildung als Physiotherapeut,
   c) weiteren an der Schule tätigen Unterrichtskräften entsprechend den zu prüfenden Fächern;

   dem Prüfungsausschuß sollen diejenigen Fachprüfer angehören, die den Prüfling in dem Prüfungsfach überwiegend ausgebildet haben.

(2) Die zuständige Behörde kann abweichend von Absatz 1 Nr. 1 einen dem Prüfungsausschuß angehörenden Beauftragten der Schulverwaltung zum Vorsitzenden bestellen.

(3) Jedes Mitglied des Prüfungsausschusses hat einen oder mehrere Stellvertreter. Die zuständige Behörde bestellt den Vorsitzenden des Prüfungsausschusses und nach Anhörung der Schulleitung die Fachprüfer und deren Stellvertreter für die einzelnen Fächer.

(4) Die zuständige Behörde kann Sachverständige und Beobachter zur Teilnahme an allen Prüfungsvorgängen entsenden.

§ 4 Zulassung zur Prüfung

(1) Der Vorsitzende entscheidet auf Antrag des Prüflings über die Zulassung zur Prüfung und setzt die Prüfungstermine im Benehmen mit der Schulleitung fest. Der Prüfungsbeginn soll nicht früher als zwei Monate vor dem Ende der Ausbildung liegen. Wird die Prüfung als Ergänzungsprüfung und in Teilabschnitten abgelegt, darf der Termin für den ersten Abschnitt der Prüfung nicht vor dem Abschluß des theoretischen und praktischen Unterrichts liegen. Der zweite Abschnitt der Prüfung darf erst nach dem Abschluß der praktischen Ausbildung durchgeführt werden.

(2) Die Zulassung zur Prüfung wird erteilt, wenn folgende Nachweise vorliegen:

1. der Personalausweis oder Reisepass in amtlich beglaubigter Abschrift,
2. die Bescheinigung nach § 1 Abs. 4 über die Teilnahme an den Ausbildungsveranstaltungen. Aus der Bescheinigung muß sich für die Prüflinge, die die Ergänzungsprüfung in Teilabschnitten ablegen wollen, ergeben, daß sie die nach Absatz 1 Satz 3 und 4 erforderlichen Voraussetzungen für die Teilnahme an dem jeweiligen Abschnitt erfüllen.

(3) Die Zulassung sowie die Prüfungstermine sollen dem Prüfling spätestens zwei Wochen vor Prüfungsbeginn schriftlich mitgeteilt werden.

(4) Die besonderen Belange behinderter Prüflinge sind zur Wahrung ihrer Chancengleichheit bei Durchführung der Prüfungen zu berücksichtigen.

§ 5 Niederschrift

Über die Prüfung ist eine Niederschrift zu fertigen, aus der Gegenstand, Ablauf und Ergebnisse der Prüfung und etwa vorkommende Unregelmäßigkeiten hervorgehen.

§ 6 Benotung von Leistungen in der staatlichen Prüfung

Die in der staatlichen Prüfung erbrachten Leistungen werden wie folgt benotet:

Berechneter Zahlenwert	Note in Worten (Zahlenwert)	Notendefinition
1,00 bis 1,49	sehr gut (1)	eine Leistung, die den Anforderungen in besonderem Maß entspricht
1,50 bis 2,49	gut (2)	eine Leistung, die den Anforderungen voll entspricht
2,50 bis 3,49	befriedigend (3)	eine Leistung, die im Allgemeinen den Anforderungen entspricht
3,50 bis 4,49	ausreichend (4)	eine Leistung, die zwar Mängel aufweist, aber im Ganzen den Anforderungen noch entspricht
4,50 bis 5,49	mangelhaft (5)	eine Leistung, die den Anforderungen nicht entspricht, jedoch erkennen lässt, dass die notwendigen Grundkenntnisse vorhanden sind und die Mängel in absehbarer Zeit behoben werden können
5,50 bis 6,00	ungenügend (6)	eine Leistung, die den Anforderungen nicht entspricht und bei der selbst die Grundkenntnisse so lückenhaft sind, dass die Mängel in absehbarer Zeit nicht behoben werden können

§ 7 Bestehen und Wiederholung der Prüfung

(1) Die Prüfung ist bestanden, wenn jeder der nach § 2 Abs. 1 vorgeschriebenen Prüfungsteile bestanden ist.

(2) Über die bestandene staatliche Prüfung wird ein Zeugnis nach dem Muster der Anlage 5 erteilt. Über das Nichtbestehen erhält der Prüfling vom Vorsitzenden des Prüfungsausschusses eine schriftliche Mitteilung, in der die Prüfungsnoten anzugeben sind.

(3) Der Prüfling kann jede Aufsichtsarbeit der schriftlichen Prüfung, jedes Fach der mündlichen Prüfung und jede Fächergruppe der praktischen Prüfung einmal wiederholen, wenn er die Note "mangelhaft" oder "ungenügend" erhalten hat.

(4) Hat der Prüfling eine Fächergruppe der praktischen Prüfung oder die gesamte praktische Prüfung zu wiederholen, so darf er zur Prüfung nur zugelassen werden, wenn er an einer weiteren Ausbildung teilgenommen hat, deren Dauer und Inhalt vom Vorsitzenden des Prüfungsausschusses im Benehmen mit den Fachprüfern bestimmt werden. Die weitere Ausbildung darf einschließlich der für die Prüfung erforderlichen Zeit die Dauer von einem Jahr nicht überschreiten. Ein Nachweis über die Teilnahme an der weiteren Ausbildung ist dem Antrag des Prüflings auf Zulassung zur Wiederholungsprüfung beizufügen. Die Wiederholungsprüfung muß spätestens zwölf Monate nach der letzten Prüfung abgeschlossen sein; Ausnahmen kann die zuständige Behörde in begründeten Fällen zulassen.

§ 8 Rücktritt von der Prüfung

(1) Tritt ein Prüfling nach seiner Zulassung von der Prüfung zurück, so hat er die Gründe für seinen Rücktritt unverzüglich dem Vorsitzenden des Prüfungsausschusses schriftlich mitzuteilen. Genehmigt der Vorsitzende den Rücktritt, so gilt die Prüfung als nicht unternommen. Die Genehmigung ist zu erteilen, wenn wichtige Gründe vorliegen. Im Falle einer Krankheit kann die Vorlage einer ärztlichen Bescheinigung verlangt werden.

(2) Wird die Genehmigung für den Rücktritt nicht erteilt oder unterläßt es der Prüfling, die Gründe für seinen Rücktritt unverzüglich mitzuteilen, so gilt die Prüfung als nicht bestanden. § 7 Abs. 3 gilt entsprechend.

§ 9 Versäumnisfolgen

(1) Versäumt ein Prüfling einen Prüfungstermin oder gibt er eine Aufsichtsarbeit nicht oder nicht rechtzeitig ab oder unterbricht er die Prüfung, so gilt die Prüfung als nicht bestanden, wenn nicht ein wichtiger Grund vorliegt; § 7 Abs. 3 gilt entsprechend. Liegt ein wichtiger Grund vor, so gilt die Prüfung als nicht unternommen.

(2) Die Entscheidung darüber, ob ein wichtiger Grund vorliegt, trifft der Vorsitzende des Prüfungsausschusses. § 8 Abs. 1 Satz 1 und 4 gilt entsprechend.

§ 10 Ordnungsverstöße und Täuschungsversuche

Der Vorsitzende des Prüfungsausschusses kann bei Prüflingen, die die ordnungsgemäße Durchführung der Prüfung in erheblichem Maße gestört oder sich eines Täuschungsversuchs schuldig gemacht haben, den betreffenden Teil der Prüfung für "nicht bestanden" erklären; § 7 Abs. 3 gilt entsprechend. Eine solche Entscheidung ist im Falle der Störung der Prüfung nur bis zum Abschluß der gesamten Prüfung, im Falle eines Täuschungsversuchs nur innerhalb von drei Jahren nach Abschluß der Prüfung zulässig.

§ 11 Prüfungsunterlagen

Auf Antrag ist dem Prüfungsteilnehmer nach Abschluß der Prüfung Einsicht in seine Prüfungsunterlagen zu gewähren. Schriftliche Aufsichtsarbeiten sind drei, Anträge auf Zulassung zur Prüfung und Prüfungsniederschriften zehn Jahre aufzubewahren.

Abschnitt 2
Prüfungsbestimmungen für die Ausbildung zum Physiotherapeuten nach § 1 Abs. 1

§ 12 Schriftlicher Teil der Prüfung

(1) Der schriftliche Teil der Prüfung erstreckt sich auf folgende Fächergruppen:

1. Berufs-, Gesetzes- und Staatskunde; Psychologie/Pädagogik/Soziologie;
2. Angewandte Physik und Biomechanik; Trainingslehre; Bewegungslehre;
3. Prävention und Rehabilitation; Methodische Anwendung der Physiotherapie in den medizinischen Fachgebieten;
4. Spezielle Krankheitslehre.

Der Prüfling hat in den vier Fächergruppen in jeweils einer Aufsichtsarbeit schriftlich gestellte Fragen zu beantworten. Die Aufsichtsarbeit in der Fächergruppe 1 dauert 45 Minuten, in der Fächergruppe 2 90 Minuten, in der Fächergruppe 3 180 Minuten und in der Fächergruppe 4 90 Minuten. Der schriftliche Teil der Prüfung ist an zwei Tagen durchzuführen. Die Aufsichtsführenden werden von der Schulleitung bestellt.

(2) Die Aufgaben für die Aufsichtsarbeiten werden von dem Vorsitzenden des Prüfungsausschusses auf Vorschlag der Schule ausgewählt. Jede Aufsichtsarbeit ist von zwei Fachprüfern zu benoten. Aus den Noten der Fachprüfer bildet der Vorsitzende des Prüfungsausschusses die Note für die einzelne Aufsichtsarbeit als das arithmetische Mittel der Noten der einzelnen Fachprüfer sowie aus den Noten der vier Aufsichtsarbeiten die Prüfungsnote für den schriftlichen Teil der Prüfung als das arithmetische Mittel der Noten der einzelnen Aufsichtsarbeiten unter Berücksichtigung ihres zeitlichen Umfangs. Die Berechnung erfolgt auf zwei Stellen nach dem Komma ohne Rundung. Dem berechneten Zahlenwert ist die entsprechende Note nach § 6 zuzuordnen. Der schriftliche Teil der Prüfung ist bestanden, wenn jede der vier Aufsichtsarbeiten mindestens mit "ausreichend" benotet wird.

§ 13 Mündlicher Teil der Prüfung

(1) Der mündliche Teil der Prüfung erstreckt sich auf folgende Fächer:

1. Anatomie,
2. Physiologie,
3. Spezielle Krankheitslehre.

Die Prüflinge werden einzeln oder in Gruppen bis zu fünf geprüft. In den Fächern Nummer 1 und 3 soll der Prüfling nicht länger als dreißig Minuten, in Fach Nummer 2 nicht länger als fünfzehn Minuten geprüft werden.

(2) Jedes Fach wird von zwei Fachprüfern abgenommen und benotet. Der Vorsitzende ist berechtigt, am mündlichen Teil der Prüfung teilzunehmen; ihm steht kein Fragerecht zu. Aus den Noten der Fachprüfer bildet der Vorsitzende die Note für jedes Fach als das arithmetische Mittel der Noten der beiden Fachprüfer sowie die

Prüfungsnote für den mündlichen Teil der Prüfung als das arithmetische Mittel der Noten der einzelnen Fächer. Die Berechnung erfolgt auf zwei Stellen nach dem Komma ohne Rundung. Dem berechneten Zahlenwert ist die entsprechende Note nach § 6 zuzuordnen. Der mündliche Teil der Prüfung ist bestanden, wenn jedes Fach mindestens mit "ausreichend" benotet wird.

(3) Der Vorsitzende des Prüfungsausschusses kann auf begründeten Antrag die Anwesenheit von Zuhörern beim mündlichen Teil der Prüfung gestatten.

§ 14 Praktischer Teil der Prüfung

(1) Der praktische Teil der Prüfung erstreckt sich auf folgende Fächergruppen:

1.
   a) Krankengymnastische Behandlungstechniken: der Prüfling hat mindestens drei spezifische krankengymnastische Behandlungstechniken am Probanden auszuführen und zu erklären;
   b) Bewegungserziehung: der Prüfling hat eine krankengymnastische Gruppenbehandlung mit mindestens sechs Teilnehmern diagnosebezogen anzuleiten;

2.
   a) Massagetherapie: der Prüfling hat aufgrund der Vorgaben des Fachprüfers mindestens eine Behandlungstechnik am Probanden auszuführen und zu erklären;
   b) Elektro-, Licht- und Strahlentherapie: der Prüfling hat aufgrund der Vorgaben des Fachprüfers mindestens eine Behandlungstechnik am Probanden auszuführen und zu erklären;
   c) Hydro-, Balneo-, Thermo- und Inhalationstherapie: der Prüfling hat aufgrund der Vorgaben des Fachprüfers mindestens eine Behandlungstechnik am Probanden auszuführen und zu erklären;

3. Methodische Anwendung der Physiotherapie in den medizinischen Fachgebieten:
   der Prüfling hat an einem Patienten aus den medizinischen Fachgebieten Chirurgie oder Orthopädie sowie an einem Patienten aus den medizinischen Fachgebieten Innere Medizin, Neurologie, Gynäkologie oder Pädiatrie je eine Befunderhebung durchzuführen, zu bewerten, zu dokumentieren und den Therapieplan mit Behandlungsziel und Behandlungsschwerpunkt zu erstellen sowie auf dieser Grundlage geeignete Behandlungstechniken durchzuführen.

(2) Der praktische Teil der Prüfung wird in jedem einzelnen Fach von zwei Fachprüfern, darunter mindestens einem Fachprüfer nach § 3 Abs. 1 Nr. 3 Buchstabe b, abgenommen und benotet. Der Vorsitzende ist berechtigt, an der Prüfung teilzunehmen; ihm steht kein Fragerecht zu. Aus den Noten der Fachprüfer bildet der Vorsitzende des Prüfungsausschusses die Note für jedes Fach als das arithmetische Mittel der Noten der einzelnen Fachprüfer. Aus den Noten der Fächer bildet der Vorsitzende des Prüfungsausschusses die Note für die jeweilige Fächergruppe als das arithmetische Mittel der Noten der einzelnen Fächer sowie aus den Noten der drei Fächergruppen die Prüfungsnote für den praktischen Teil der Prüfung als das arithmetische Mittel der Noten der drei Fächergruppen. Die Berechnung erfolgt auf zwei Stellen nach dem Komma ohne Rundung. Dem berechneten Zahlenwert ist die entsprechende Note nach § 6 zuzuordnen. Der praktische Teil der Prüfung ist bestanden, wenn jede Fächergruppe mindestens mit "ausreichend" und dabei kein Fach schlechter als "mangelhaft" benotet wird.

(3) Der praktische Teil der Prüfung soll innerhalb von vier Wochen abgeschlossen sein.

Abschnitt 3
Bestimmungen für die Ergänzungsprüfung nach § 1 Abs. 2 Satz 1

§ 15 Schriftlicher Teil der Prüfung

(1) Der schriftliche Teil der Prüfung erstreckt sich auf folgende Fächergruppen:

1. Angewandte Physik und Biomechanik; Trainingslehre; Bewegungslehre;
2. Methodische Anwendung der Physiotherapie in den medizinischen Fachgebieten.

Der Prüfling hat in beiden Fächergruppen in jeweils einer Aufsichtsarbeit schriftlich gestellte Fragen zu beantworten. Die Aufsichtsarbeit in der Fächergruppe 1 dauert 90 Minuten, in der Fächergruppe 2 180 Minuten. Die Aufsichtführenden werden von der Schulleitung bestellt.

(2) Legt der Prüfling die Prüfung in Teilabschnitten ab, ist die Aufsichtsarbeit für die Fächergruppe 1 nach Beendigung des theoretischen und praktischen Unterrichts im ersten Abschnitt der Prüfung zu schreiben. Die

Aufsichtsarbeit für die Fächergruppe 2 ist nach Beendigung der praktischen Ausbildung im zweiten Abschnitt der Prüfung zu schreiben.

(3) § 12 Abs. 2 gilt entsprechend.

§ 16 Mündlicher Teil der Prüfung

(1) Für Prüflinge, die die staatliche Prüfung nach § 4 Abs. 2 des Masseur- und Physiotherapeutengesetzes bestanden haben, erstreckt sich der mündliche Teil der Prüfung auf das Fach Physiologie. Die Prüflinge werden einzeln oder in Gruppen bis zu fünf geprüft. Die Prüfung soll für den Prüfling nicht länger als zehn Minuten dauern.

(2) Für Prüflinge, die die in § 1 Nr. 1 des Masseur- und Physiotherapeutengesetzes genannte Berufsbezeichnung führen dürfen, erstreckt sich der mündliche Teil der Prüfung auf die Fächer:

1. Anatomie,
2. Physiologie,
3. Spezielle Krankheitslehre.

Die Prüflinge werden einzeln oder in Gruppen bis zu fünf geprüft. In den Fächern Nummer 1 und 3 soll der Prüfling nicht länger als fünfzehn Minuten, im Fach Nummer 2 nicht länger als zehn Minuten geprüft werden.

(3) Wird die Prüfung in Teilabschnitten abgelegt, findet der mündliche Teil der Prüfung nach Beendigung des theoretischen und praktischen Unterrichts im ersten Abschnitt der Prüfung statt.

(4) § 13 Abs. 2 und 3 gilt entsprechend.

§ 17 Praktischer Teil der Prüfung

(1) Der praktische Teil der Prüfung erstreckt sich auf die in § 14 Abs. 1 Nr. 1 und 3 genannten Fächergruppen.

(2) Wird die Prüfung in Teilabschnitten abgelegt, findet der praktische Teil der Prüfung nach Beendigung der praktischen Ausbildung im zweiten Abschnitt der Prüfung statt.

(3) § 14 Abs. 2 und 3 gilt entsprechend.

Abschnitt 4
Bestimmungen für die Ergänzungsprüfung nach § 1 Abs. 2 Satz 2

§ 18 Schriftlicher Teil der Prüfung

(1) Der schriftliche Teil der Prüfung erstreckt sich auf das Fach Methodische Anwendung der Physiotherapie in den medizinischen Fachgebieten. Der Prüfling hat in einer Aufsichtsarbeit, für die 180 Minuten zur Verfügung stehen, schriftlich gestellte Fragen zu beantworten. Die Aufsichtsführenden werden von der Schulleitung bestellt.

(2) Wird die Prüfung in Teilabschnitten abgelegt, findet der schriftliche Teil der Prüfung nach Beendigung der praktischen Ausbildung im zweiten Abschnitt der Prüfung statt.

(3) § 12 Abs. 2 gilt entsprechend.

§ 19 Mündlicher und praktischer Teil der Prüfung

(1) Für den mündlichen Teil der Prüfung gilt § 16 entsprechend.

(2) Für den praktischen Teil der Prüfung gilt § 17 entsprechend.

Abschnitt 5
Erlaubniserteilung

§ 20 Erlaubnisurkunde

Liegen die Voraussetzungen nach § 2 Abs. 1 des Masseur- und Physiotherapeutengesetzes für die Erteilung der Erlaubnis zur Führung der Berufsbezeichnung nach § 1 Nr. 2 des Gesetzes vor, so stellt die zuständige Behörde die Erlaubnisurkunde nach dem Muster der Anlage 6 aus.

Abschnitt 5a
Sonderregelungen für Inhaber von Ausbildungsnachweisen aus einem Mitgliedstaat der Europäischen Union oder einem anderen Vertragsstaat des Abkommens über den Europäischen Wirtschaftsraum oder einem Drittstaat

§ 21 Sonderregelungen für Inhaber von Ausbildungsnachweisen aus einem anderen Vertragsstaat des Europäischen Wirtschaftsraumes

(1) Antragsteller, die eine Erlaubnis nach § 1 Nr. 2 des Masseur- und Physiotherapeutengesetzes beantragen, können zum Nachweis, daß die Voraussetzungen nach § 2 Abs. 1 Nr. 2 dieses Gesetzes vorliegen, eine von der zuständigen Behörde des Herkunftsmitgliedstaats ausgestellte entsprechende Bescheinigung oder einen von einer solchen Behörde ausgestellten Strafregisterauszug oder, wenn ein solcher nicht beigebracht werden kann, einen gleichwertigen Nachweis vorlegen. Hat die für die Erteilung der Erlaubnis zuständige Behörde berechtigte Zweifel, kann sie von der zuständigen Behörde eines Mitgliedstaates eine Bestätigung verlangen, aus der sich ergibt, dass dem Antragsteller die Ausübung des Berufs, der dem des Physiotherapeuten entspricht, nicht auf Grund eines schwerwiegenden standeswidrigen Verhaltens oder einer Verurteilung wegen strafbarer Handlungen dauerhaft oder vorübergehend untersagt worden ist. Hat die für die Erteilung der Erlaubnis zuständige Behörde in den Fällen des Satzes 1 oder 2 von Tatbeständen Kenntnis, die außerhalb des Geltungsbereichs des Masseur- und Physiotherapeutengesetzes eingetreten sind und im Hinblick auf die Voraussetzungen des § 2 Abs. 1 Nr. 2 dieses Gesetzes von Bedeutung sein können, so hat sie die zuständige Stelle des Herkunftsmitgliedstaats zu unterrichten und sie zu bitten, diese Tatbestände zu überprüfen und ihr das Ergebnis und die Folgerungen, die sie hinsichtlich der von ihr ausgestellten Bescheinigungen und Nachweise daraus zieht, mitzuteilen. Die in den Sätzen 1 bis 3 genannten Bescheinigungen und Mitteilungen sind vertraulich zu behandeln. Sie dürfen der Beurteilung nur zugrunde gelegt werden, wenn bei der Vorlage die Ausstellung nicht mehr als drei Monate zurückliegt.

(2) Antragsteller, die eine Erlaubnis nach § 1 Abs. 1 Nr. 2 des Masseur- und Physiotherapeutengesetzes beantragen, können zum Nachweis, dass die Voraussetzungen nach § 2 Abs. 1 Nr. 3 dieses Gesetzes vorliegen, einen entsprechenden Nachweis ihres Herkunftsmitgliedstaats vorlegen. Wird im Herkunftsmitgliedstaat ein solcher Nachweis nicht verlangt, ist eine von einer zuständigen Behörde dieses Staates ausgestellte Bescheinigung anzuerkennen, aus der sich ergibt, dass die Voraussetzungen des § 2 Abs. 1 Nr. 3 des Masseur- und Physiotherapeutengesetzes erfüllt sind. Absatz 1 Satz 4 und 5 gilt entsprechend.

(3) Antragsteller, die über einen Ausbildungsnachweis im Beruf des Physiotherapeuten verfügen, der in einem anderen Vertragsstaat des Europäischen Wirtschaftsraumes erworben worden ist, führen nach der Anerkennung ihrer Berufsqualifikation die Berufsbezeichnung „Physiotherapeutin“ oder „Physiotherapeut“.

(4) Werden von der zuständigen Stelle des Herkunftsmitgliedstaats die in Absatz 1 Satz 1 genannten Bescheinigungen nicht ausgestellt oder die nach Absatz 1 Satz 2 oder Satz 3 nachgefragten Mitteilungen innerhalb von zwei Monaten nicht gemacht, kann der Antragsteller sie durch Vorlage einer Bescheinigung über die Abgabe einer eidesstattlichen Erklärung gegenüber der zuständigen Behörde des Herkunftsmitgliedstaats ersetzen.

(5) Die zuständige Behörde hat den Dienstleistungserbringer bei der erstmaligen Anzeige einer Dienstleistungserbringung im Sinne des § 13a des Masseur- und Physiotherapeutengesetzes binnen eines Monats nach Eingang der Meldung und der Begleitdokumente über das Ergebnis ihrer Nachprüfung zu unterrichten und ihm dabei mitzuteilen, ob sie die Erbringung der Dienstleistung erlaubt oder von ihm verlangt, eine Eignungsprüfung abzulegen. Ist der zuständigen Behörde eine Nachprüfung innerhalb eines Monats nach Eingang der Meldung und der Begleitdokumente in besonderen Ausnahmefällen nicht möglich, unterrichtet sie den Dienstleister innerhalb dieser Frist über die Gründe der Verzögerung; sie hat die der Verzögerung zugrunde liegenden Schwierigkeiten binnen eines Monats nach dieser Mitteilung zu beheben und spätestens innerhalb von zwei Monaten nach der Behebung der der Verzögerung zugrunde liegenden Schwierigkeiten über die Dienstleistungserbringung zu entscheiden. Erhält der Dienstleistungserbringer innerhalb der in den Sätzen 1 und 2 genannten Fristen keine Rückmeldung der zuständigen Behörde, darf die Dienstleistung erbracht werden.

(6) Die Absätze 1 bis 5 gelten entsprechend für Drittstaatsdiplome, für deren Anerkennung sich nach dem Recht der Europäischen Union eine Gleichstellung ergibt.

§ 21a Anerkennungsregelungen für Ausbildungsnachweise aus einem anderen Mitgliedstaat der Europäischen Union oder einem anderen Vertragsstaat des Abkommens über den Europäischen Wirtschaftsraum

(1) Antragsteller, die eine Erlaubnis nach § 1 Absatz 1 Nummer 2 des Masseur- und Physiotherapeutengesetzes beantragen, haben einen Anpassungslehrgang nach Absatz 2 zu absolvieren oder eine Eignungsprüfung nach Absatz 3 abzulegen, wenn sie über einen Ausbildungsnachweis verfügen, der in einem anderen Mitgliedstaat der Europäischen Union oder einem anderen Vertragsstaat des Abkommens über den Europäischen Wirtschaftsraum erworben worden ist, und ihre Ausbildung wesentliche Unterschiede zu der deutschen Ausbildung aufweist, die von der zuständigen Behörde im Rahmen der Prüfung ihres Antrags auf Erteilung der Erlaubnis zur Führung der Berufsbezeichnung festgestellt worden sind und nicht durch Kenntnisse und Fähigkeiten ausgeglichen werden konnten, die die Antragsteller im Rahmen ihrer nachgewiesenen Berufspraxis oder durch lebenslanges Lernen nach § 2 Absatz 3 Satz 7 des Masseur- und Physiotherapeutengesetzes erworben haben.

(2) Der Anpassungslehrgang dient dem Ausgleich der von der zuständigen Behörde festgestellten wesentlichen Unterschiede (Lehrgangsziel). Er wird entsprechend dem Lehrgangsziel in Form von theoretischem und praktischem Unterricht, einer praktischen Ausbildung mit theoretischer Unterweisung oder beidem an Einrichtungen nach § 9 Absatz 1 Satz 2 des Masseur- und Physiotherapeutengesetzes oder an von der zuständigen Behörde als vergleichbar anerkannten Einrichtungen durchgeführt. An der theoretischen Unterweisung sollen Personen nach § 3 Absatz 1 Nummer 3 Buchstabe b in angemessenem Umfang beteiligt werden. Die zuständige Behörde legt die Dauer und die Inhalte des Anpassungslehrgangs so fest, dass das Lehrgangsziel erreicht werden kann. Die Ableistung des Anpassungslehrgangs ist durch eine Bescheinigung nach dem Muster der Anlage 6a nachzuweisen.

(3) Bei der Eignungsprüfung haben die Antragsteller nachzuweisen, dass sie über die zum Ausgleich der von der zuständigen Behörde festgestellten wesentlichen Unterschiede erforderlichen Kenntnisse und Fähigkeiten verfügen. Sie besteht aus einer praktischen Prüfung. Dabei hat der Prüfling an mindestens einem und höchstens sieben Patienten aus den in Anlage 1 Teil B Nummer 1 aufgeführten medizinischen Fachgebieten je eine Befunderhebung durchzuführen, zu bewerten, zu dokumentieren und den Therapieplan mit Behandlungsziel und Behandlungsschwerpunkt zu erstellen sowie auf dieser Grundlage geeignete Behandlungstechniken durchzuführen. Die zuständige Behörde legt die medizinischen Fachgebiete, in denen die Prüfung durchgeführt wird, gemäß den festgestellten wesentlichen Unterschieden fest. Die Eignungsprüfung soll innerhalb von zwei Wochen abgeschlossen sein und als Patientenprüfung ausgestaltet werden. Sie wird von zwei Fachprüfern, darunter mindestens einem Fachprüfer nach § 3 Absatz 1 Nummer 3 Buchstabe b, abgenommen und bewertet. Während der Prüfung sind den Prüfern Nachfragen gestattet, die sich auf das konkrete praktische Vorgehen beziehen. Die Eignungsprüfung ist erfolgreich abgeschlossen, wenn die Fachprüfer sie übereinstimmend mit „bestanden“ bewerten. Das Bestehen setzt mindestens voraus, dass die Leistung des Prüflings trotz ihrer Mängel noch den Anforderungen genügt. Kommen die Fachprüfer zu einer unterschiedlichen Bewertung, entscheidet der Vorsitzende des Prüfungsausschusses nach Rücksprache mit den Fachprüfern über das Bestehen. Der Vorsitzende des Prüfungsausschusses muss zu diesem Zweck während der Prüfung anwesend sein; ihm steht ein Fragerecht zu. Die Eignungsprüfung soll mindestens zweimal jährlich angeboten werden. Sie darf einmal wiederholt werden. Über die bestandene Eignungsprüfung wird eine Bescheinigung nach dem Muster der Anlage 6b erteilt.

(4) Absatz 3 gilt entsprechend für Personen, die sich gemäß § 13a Absatz 3 Satz 6 des Masseur- und Physiotherapeutengesetzes einer Eignungsprüfung zu unterziehen haben. Abweichend von Absatz 3 Satz 12 ist dabei sicherzustellen, dass die Eignungsprüfung innerhalb eines Monats nach der Entscheidung gemäß § 21 Absatz 5 Satz 1 oder Satz 2 abgelegt werden kann.

§ 21b Anerkennungsregelungen für Ausbildungsnachweise aus einem Drittstaat

(1) Antragsteller, die eine Erlaubnis nach § 1 Absatz 1 Nummer 2 des Masseur- und Physiotherapeutengesetzes beantragen, haben einen Anpassungslehrgang nach Absatz 2 zu absolvieren, der mit einer Prüfung über den Inhalt des Anpassungslehrgangs abschließt, oder eine Kenntnisprüfung nach Absatz 3 abzulegen, wenn sie über einen Ausbildungsnachweis verfügen, der in einem Drittstaat erworben worden ist und ihre Ausbildung wesentliche Unterschiede zu der deutschen Ausbildung aufweist, die von der zuständigen Behörde im Rahmen der Prüfung ihres Antrags auf Erteilung der Erlaubnis zur Führung der Berufsbezeichnung festgestellt worden sind und nicht durch Kenntnisse und Fähigkeiten ausgeglichen werden konnten, die die Antragsteller im Rahmen ihrer nachgewiesenen Berufspraxis erworben haben. Satz 1 gilt entsprechend für Fälle, in denen eine Prüfung der Gleichwertigkeit des Ausbildungsstandes auf Grund der in § 2 Absatz 2 Satz 5 des Masseur- und Physiotherapeutengesetzes vorliegenden Umstände nicht durchgeführt wird.

(2) Der Anpassungslehrgang dient zusammen mit dem Abschlussgespräch der Feststellung, dass die Antragsteller über die zur Ausübung des Berufs des Physiotherapeuten erforderlichen Kenntnisse und Fähigkeiten verfügen (Lehrgangsziel). Er wird entsprechend dem Lehrgangsziel in Form von theoretischem und praktischem Unterricht, einer praktischen Ausbildung mit theoretischer Unterweisung oder beidem an Einrichtungen nach

§ 9 Absatz 1 Satz 2 des Masseur- und Physiotherapeutengesetzes oder an von der zuständigen Behörde als vergleichbar anerkannten Einrichtungen durchgeführt und schließt mit einer Prüfung über den Inhalt des Anpassungslehrgangs ab. An der theoretischen Unterweisung sollen Personen nach § 3 Absatz 1 Nummer 3 Buchstabe b in angemessenem Umfang beteiligt werden. Die zuständige Behörde legt die Dauer und die Inhalte des Anpassungslehrgangs so fest, dass das Lehrgangsziel erreicht werden kann. Die erfolgreiche Ableistung des Anpassungslehrgangs ist durch eine Bescheinigung nach dem Muster der Anlage 7 nachzuweisen. Die Bescheinigung wird erteilt, wenn in der Prüfung, die in Form eines Abschlussgesprächs durchgeführt wird, festgestellt worden ist, dass die Antragsteller das Lehrgangsziel erreicht haben. Das Abschlussgespräch wird von einem Fachprüfer nach § 3 Absatz 1 Nummer 3 gemeinsam mit der Person nach Satz 3, die die Antragsteller während des Lehrgangs mit betreut hat, geführt. Ergibt sich in dem Abschlussgespräch, dass die Antragsteller den Anpassungslehrgang nicht erfolgreich abgeleistet haben, entscheidet der Fachprüfer nach § 3 Absatz 1 Nummer 3 im Benehmen mit der an dem Gespräch teilnehmenden Person nach Satz 3 über eine angemessene Verlängerung des Anpassungslehrgangs. Eine Verlängerung ist nur einmal zulässig. Der Verlängerung folgt ein weiteres Abschlussgespräch. Kann auch nach dem Ergebnis dieses Gesprächs die Bescheinigung nach Satz 5 nicht erteilt werden, darf der Anpassungslehrgang nur einmal wiederholt werden.

(3) Bei der Kenntnisprüfung haben die Antragsteller nachzuweisen, dass sie über die zur Ausübung des Berufs des Physiotherapeuten erforderlichen Kenntnisse und Fähigkeiten verfügen. Die Kenntnisprüfung umfasst jeweils einen mündlichen und praktischen Teil. Sie ist bestanden, wenn jeder der beiden Prüfungsteile bestanden ist.

(4) Der mündliche Teil der Kenntnisprüfung erstreckt sich auf folgende Fächer und Fächergruppen:

1. Berufs- und Gesetzeskunde,
2. Physiotherapeutische Befund- und Untersuchungstechniken,
3. Massagetherapie; Elektro-, Licht-, Strahlentherapie; Hydro-, Balneo-, Thermo- und Inhalationstherapie,
4. Anatomie, Physiologie und spezielle Krankheitslehre.

Der mündliche Teil der Prüfung soll für den einzelnen Prüfling mindestens 15 und nicht länger als 60 Minuten dauern. Er wird von zwei Fachprüfern nach § 3 Absatz 1 Nummer 3 abgenommen und bewertet. Der mündliche Teil der Kenntnisprüfung ist erfolgreich abgeschlossen, wenn die Fachprüfer in einer Gesamtbetrachtung die Fächer nach Satz 1 Nummer 1 bis 3 sowie die Fächergruppe nach Satz 1 Nummer 4 übereinstimmend mit „bestanden“ bewerten. Das Bestehen setzt mindestens voraus, dass die Leistung des Prüflings im Ganzen trotz ihrer Mängel noch den Anforderungen genügt. Kommen die Fachprüfer zu einer unterschiedlichen Bewertung, entscheidet der Vorsitzende des Prüfungsausschusses nach Rücksprache mit den Fachprüfern über das Bestehen. Der Vorsitzende des Prüfungsausschusses muss zu diesem Zweck während der Prüfung anwesend sein; ihm steht ein Fragerecht zu.

(5) Für den praktischen Teil der Kenntnisprüfung gilt § 21a Absatz 3 Satz 2 bis 11 entsprechend.

(6) Die Kenntnisprüfung soll mindestens zweimal jährlich angeboten werden und darf im mündlichen Teil sowie jedem medizinischen Fachgebiet, das Gegenstand der Prüfung war und nicht bestanden wurde, einmal wiederholt werden.

(7) Über die bestandene Kenntnisprüfung wird eine Bescheinigung nach dem Muster der Anlage 8 erteilt.

§ 21c Fristen, Bescheide, Durchführungsbestimmungen

(1) Die zuständige Behörde hat über Anträge auf Erteilung einer Erlaubnis als Physiotherapeutin oder Physiotherapeut nach § 1 Absatz 1 Nummer 2 des Masseur- und Physiotherapeutengesetzes in Verbindung mit § 2 Absatz 2, 3, 4a oder Absatz 5 des Masseur- und Physiotherapeutengesetzes kurzfristig, spätestens vier Monate, nach Vorlage der für Entscheidungen nach § 2 des Masseur- und Physiotherapeutengesetzes erforderlichen Unterlagen zu entscheiden. Im Fall des § 81a des Aufenthaltsgesetzes soll die Entscheidung innerhalb von zwei Monaten erfolgen.

(2) Über die Feststellung wesentlicher Unterschiede, die zur Auferlegung von Anpassungsmaßnahmen nach den §§ 21a oder 21b führen, ist den Antragstellern ein rechtsmittelfähiger Bescheid zu erteilen, der folgende Angaben enthält:

1. das Niveau der in Deutschland verlangten Qualifikation und das Niveau der von den Antragstellern vorgelegten Qualifikation gemäß der Klassifizierung in Artikel 11 der Richtlinie 2005/36/EG des Europäischen Parlaments und des Rates vom 7. September 2005 über die Anerkennung von

Berufsqualifikationen (ABl. L 255 vom 30.9.2005, S. 22, L 271 vom 16.10.2007, S. 18) in der jeweils geltenden Fassung,

2. die Fächer oder Ausbildungsbestandteile, bei denen wesentliche Unterschiede festgestellt wurden,
3. eine inhaltliche Erläuterung der wesentlichen Unterschiede sowie die Begründung, warum diese dazu führen, dass die Antragsteller nicht in ausreichender Form über die in Deutschland zur Ausübung des Berufs des Physiotherapeuten notwendigen Kenntnisse und Fähigkeiten verfügen, und
4. eine Begründung, warum die wesentlichen Unterschiede nicht durch Kenntnisse und Fähigkeiten ausgeglichen werden konnten, die die Antragsteller im Rahmen ihrer nachgewiesenen Berufspraxis oder durch lebenslanges Lernen im Sinne des § 2 Absatz 3 Satz 7 des Masseur- und Physiotherapeutengesetzes erworben haben.

(3) Die Prüfungen nach § 21a Absatz 3 und § 21b Absatz 3 finden in Form einer staatlichen Prüfung vor einer staatlichen Prüfungskommission statt. Die Länder können zur Durchführung der Prüfungen die regulären Prüfungstermine der staatlichen Prüfung nach § 2 Absatz 1 nutzen; sie haben dabei sicherzustellen, dass die Antragsteller die Prüfungen innerhalb von sechs Monaten nach der Entscheidung nach Absatz 1 ablegen können. Soweit in diesem Abschnitt nichts anderes bestimmt ist, gelten die §§ 5, 8 bis 11 für die Durchführung der Prüfungen nach Satz 1 entsprechend.

Abschnitt 6
Schlußvorschriften

§ 22 Inkrafttreten, Außerkrafttreten

Diese Verordnung tritt am Tage nach der Verkündung in Kraft. Gleichzeitig tritt, soweit sich nicht aus § 16 Abs. 2 des Masseur- und Physiotherapeutengesetzes etwas anderes ergibt, die Ausbildungs- und Prüfungsordnung für Krankengymnasten vom 7. Dezember 1960 (BGBl. I S. 885), zuletzt geändert durch Anlage I Kapitel X Sachgebiet D Abschnitt II Nr. 15 des Einigungsvertrages vom 31. August 1990 in Verbindung mit Artikel 1 des Gesetzes vom 23. September 1990 (BGBl. 1990 II S. 885, 1080), außer Kraft.

Schlußformel

Der Bundesrat hat zugestimmt.

Anlage 1 (zu § 1 Abs. 1)

Fundstelle des Originaltextes: BGBl. I 1994, 3791 - 3796

A	Theoretischer und praktischer Unterricht für Physiotherapeuten	
		Stunden
1	Berufs-, Gesetzes- und Staatskunde	40
1.1	Berufskunde und Ethik, Geschichte des Berufs	
1.2	Das Gesundheitswesen in der Bundesrepublik Deutschland und internationale Zusammenarbeit im Gesundheitswesen einschließlich der Gesundheitsprogramme internationaler Organisationen wie insbesondere Weltgesundheitsorganisation und Europarat	
1.3	Aktuelle berufs- und gesundheitspolitische Fragen	
1.4	Masseur- und Physiotherapeutengesetz; gesetzliche Regelungen für die sonstigen Berufe des Gesundheitswesens und ihre Abgrenzung zueinander	
1.5	Arbeits- und berufsrechtliche Regelungen, soweit sie für die Berufsausübung von Bedeutung sind	
1.6	Unfallverhütung, Mutterschutz, Arbeitsschutz, Jugendhilfe, Jugendschutz	
1.7	Einführung in das Krankenhaus-, Seuchen-, Strahlenschutz-, Arznei- und Betäubungsmittelrecht	

1.8	Strafrechtliche, bürgerlich-rechtliche und öffentlich-rechtliche Vorschriften, die bei der Berufsausübung von Bedeutung sind; Rechtsstellung des Patienten oder seiner Sorgeberechtigten	
1.9	Sozialpolitik einschließlich Einführung in die Systeme der sozialen Sicherung (Sozialversicherung, Sozialhilfe, Sozialstaatsangebote in der praktischen Realisierung)	
1.10	Die Grundlagen der staatlichen Ordnung in der Bundesrepublik Deutschland	
2	Anatomie	240
2.1	Allgemeine Anatomie	
2.1.1	Begriffsbestimmung und anatomische Nomenklatur	
2.1.2	Achsen, Ebenen, Orientierungssystem	
2.1.3	Allgemeine Zytologie	
2.1.4	Allgemeine Histologie	
2.1.5	Aufbau des Skelettsystems und allgemeine Gelenklehre	
2.2	Funktionelle Anatomie des Bewegungssystems	
2.2.1	Allgemeine funktionelle Aspekte der Bewegungsorgane	
2.2.2	Palpation der Bewegungsorgane	
2.2.3	Spezielle funktionelle Aspekte des Schultergürtels und der oberen Extremitäten	
2.2.4	Spezielle funktionelle Aspekte des Beckens und der unteren Extremitäten	
2.2.5	Spezielle funktionelle Aspekte der Wirbelsäule und des Kopfes	
2.3	Anatomie der inneren Organe	
2.3.1	Überblick über die inneren Organe	
2.3.2	Herz-Kreislaufsystem	
2.3.3	Respirationssystem	
2.3.4	Blut- und Abwehrsystem	
2.3.5	Verdauungssystem	
2.3.6	Urogenitalsystem	
2.3.7	Endokrines System	
2.4	Anatomie des Nervensystems und der Sinnesorgane	
2.4.1	Einführung in das Nervensystem	
2.4.2	Makroskopische Anatomie des Nervensystems	
2.4.3	Zentrales Nervensystem	
2.4.4	Peripheres Nervensystem	
2.4.5	Vegetatives Nervensystem	
2.4.6	Funktionelle Anatomie des Nervensystems	
2.4.7	Anatomie der Sinnesorgane und der Haut	
3	Physiologie	140
3.1	Grundlagen der Zellphysiologie	
3.2	Nerven- und Sinnesphysiologie	
3.2.1	Zentrales Nervensystem	
3.2.2	Vegetatives Nervensystem	

3.2.3	Motorische Systeme	
3.2.4	Allgemeine Sinnesphysiologie	
3.2.5	Somatoviszerales sensorisches System	
3.2.6	Gleichgewichtssystem	
3.2.7	Nozizeption und Schmerz	
3.3	Muskelphysiologie	
3.3.1	Skelettmuskulatur	
3.3.2	Molekularer Mechanismus der Kontraktion	
3.3.3	Regulation der Muskelkontraktion	
3.3.4	Muskelmechanik	
3.3.5	Muskelenergetik	
3.3.6	Glatte Muskulatur	
3.4	Herz-, Blut- und Gefäßphysiologie	
3.4.1	Herzerregung, -mechanik, Energetik der Herzaktion	
3.4.2	Funktionen, Volumen und Zusammensetzung des Blutes	
3.4.3	Physiologische Mechanismen der Infekt- und Immunabwehr	
3.4.4	Arterielles, venöses und lymphatisches System	
3.4.5	Regulation des Gesamtkreislaufs	
3.4.6	Lungenkreislauf und Pfortaderkreislauf	
3.5	Physiologie des Respirationssystems	
3.5.1	Ventilation und Atmungsmechanik	
3.5.2	Pulmonaler Gasaustausch	
3.5.3	Atemgastransport	
3.5.4	Gewebeatmung	
3.6	Physiologie des Verdauungs-, Urogenital-, Stoffwechsel- und endokrinen Systems	
3.7	Zusammenwirken der Systeme	
4	Allgemeine Krankheitslehre	30
4.1	Pathologie der Zelle	
4.2	Krankheit und Krankheitsursachen	
4.3	Krankheitsverlauf und -symptome	
4.4	Entzündungen und Ödeme	
4.5	Degenerative Veränderungen	
4.6	Wachstum und seine Störungen, gutartige und bösartige Neubildungen	
4.7	Störungen der immunologischen Reaktionen	
4.8	Örtliche und allgemeine Kreislaufstörungen, Blutungen	
4.9	Störungen des Gasaustausches und der Sauerstoffversorgung	
5	Spezielle Krankheitslehre	360
5.1	Innere Medizin	
5.2	Orthopädie/Traumatologie	
5.3	Chirurgie/Traumatologie	

5.4	Neurologie	
5.5	Psychiatrie	
5.6	Gynäkologie und Geburtshilfe	
5.7	Pädiatrie	
5.8	Dermatologie	
5.9	Geriatrie	
5.10	Rheumatologie	
5.11	Arbeitsmedizin	
5.12	Sportmedizin	
6	Hygiene	30
6.1	Allgemeine Hygiene und Umweltschutz	
6.2	Persönliche Hygiene	
6.3	Bakteriologie, Virologie und Parasitologie	
6.4	Verhütung und Bekämpfung von Infektionen	
6.5	Desinfektion, Sterilisation	
6.6	Wasserhygiene	
7	Erste Hilfe und Verbandtechnik	30
7.1	Allgemeines Verhalten bei Notfällen	
7.2	Erstversorgung von Verletzten	
7.3	Blutstillung und Wundversorgung	
7.4	Maßnahmen bei Schockzuständen und Wiederbelebung	
7.5	Versorgung von Knochenbrüchen	
7.6	Transport von Verletzten	
7.7	Verhalten bei Arbeitsunfällen	
7.8	Verbandtechniken	
8	Angewandte Physik und Biomechanik	40
8.1	Physikalische, mechanische und mathematische Grundlagen	
8.2	Gleichgewichtssatz der Mechanik und Prinzip der Gelenkkraftberechnung	
8.3	Kinematik der Gelenke des menschlichen Körpers	
8.4	Statische und dynamische Bestimmung der Gelenkkraft	
8.5	Biomechanik von Muskeln, Sehnen und Knochen	
8.6	Biomechanik und Ergonomie	
9	Sprache und Schrifttum	20
9.1	Vortrag und Diskussion, Einführung in wissenschaftliches Arbeiten, Dokumentation	
9.2	Mündliche und schriftliche Berichterstattung	
9.3	Benutzung und Auswertung deutscher und fremdsprachlicher Fachliteratur	
9.4	Einführung in fachbezogene Terminologie	
10	Psychologie/Pädagogik/Soziologie	60
10.1	Psychologie	
10.1.1	Der Mensch in seiner psychosomatischen Einheit	

10.1.2	Der Therapeut im Prozeß der Patientenführung, Einführung in die Persönlichkeitspsychologie	
10.1.3	Psychologische Probleme spezieller Patientengruppen, insbesondere akut Erkrankter, chronisch Kranker, Kranker mit infauster Prognose, Kinder, psychische Besonderheiten Alterskranker und Behinderter	
10.1.4	Einführung in die Gruppendynamik im Therapieprozeß	
10.1.5	Gesprächsführung, Supervision	
10.2	Pädagogik	
10.2.1	Grundlagen der Pädagogik	
10.2.2	Einführung in die Sonderpädagogik	
10.3	Soziologie	
10.3.1	Grundlagen der Soziologie	
10.3.2	Soziales Umfeld - Krankheitserleben	
10.3.3	Soziale Stellung - Einfluß auf die Krankheitsentwicklung und -bewältigung	
11	Prävention und Rehabilitation	20
11.1	Grundlagen und Stellung der Prävention	
11.2	Gesundheitsgerechtes Verhalten und Gesundheitsförderung	
11.3	Grundlagen der Rehabilitation	
11.4	Einrichtungen der Rehabilitation und ihre Fachkräfte	
11.5	Medizinische, berufliche und soziale Rehabilitation	
11.6	Rehabilitationsplanung und -durchführung im interdisziplinären Team	
12	Trainingslehre	40
12.1	Grundlagen der Trainingslehre	
12.2	Beanspruchungsformen des Trainings	
12.3	Aufbau und Prinzipien des Trainings	
12.4	Transfer der allgemeinen Trainingslehre in die Prävention und medizinische Rehabilitation	
12.5	Psychologische Aspekte des Trainings	
13	Bewegungslehre	60
13.1	Grundlagen der Bewegungslehre	
13.2	Bewegungs- und Haltungsanalysen	
13.3	Prinzipien der Bewegung	
13.4	Sensomotorische Entwicklung	
13.5	Bewegungen als sensomotorischer Lernprozeß	
14	Bewegungserziehung	120
14.1	Grundformen der Bewegung mit und ohne Gerät	
14.2	Bewegungserziehung im Rahmen der Krankengymnastik	
14.3	Bewegungserfahrung in bezug auf Raum, Zeit und Dynamik	
14.4	Rhythmisch musikalische Aspekte in der Bewegungserziehung	
14.5	Psychomotorische Übungskonzepte	
14.6	Kombinationen von Grundformen der Bewegungserziehung aus Krankengymnastik, Gymnastik, Sport und Psychomotorik	
14.7	Methodik und Didaktik von Einzel- und Gruppenbehandlung	

14.8	Behindertensport	
15	Physiotherapeutische Befund- und Untersuchungstechniken	100
15.1	Grundlagen der Befunderhebung	
15.2	Inspektion	
15.3	Funktionsprüfung	
15.4	Palpation	
15.5	Meßverfahren	
15.6	Reflexverhalten	
15.7	Wahrnehmung akustischer Auffälligkeiten	
15.8	Systematik der Befunderhebung	
15.9	Dokumentation	
15.10	Synthese der Befunderhebung	
15.11	Erstellung des Behandlungsplanes	
16	Krankengymnastische Behandlungstechniken	500
16.1	Grundlagen krankengymnastischer Techniken	
16.2	Atemtherapie	
16.3	Entspannungstechniken	
16.4	Krankengymnastische Behandlung im Schlingengerät	
16.5	Krankengymnastische Behandlung im Bewegungsbad	
16.6	Gangschulung	
16.7	Manuelle Therapie	
16.8	Funktionsanalyse	
16.9	Medizinische Trainingstherapie	
16.10	Neurophysiologische Behandlungsverfahren	
16.10.1	Propriozeptive neuromuskuläre Fazilitation	
16.10.2	Behandlung nach Bobath	
16.10.3	Behandlung nach Vojta	
16.10.4	Sonstige Verfahren	
16.11	Psychomotorik	
16.12	Sonstige Behandlungstechniken	
17	Massagetherapie	150
17.1	Grundlagen der Massage	
17.2	Techniken und Wirkungen der Massage	
17.3	Klassische Massage	
17.4	Bindegewebsmassage	
17.5	Sonderformen	
17.6	Indikationen nach Krankheitsbildern, Kontraindikationen	
18	Elektro-, Licht-, Strahlentherapie	60
18.1	Einführung in die Elektrotherapie, physikalische Grundlagen	
18.2	Einführung in die Elektrodiagnostik	

18.3	Elektrotherapie mit nieder-, mittel- und hochfrequenten Stromformen, Ultraschallbehandlung	
18.4	Grundlagen der Lichttherapie	
18.5	Grundlagen der Strahlentherapie	
19	Hydro-, Balneo-, Thermo- und Inhalationstherapie	60
19.1	Grundlagen und Anwendungen in der Hydro- und Balneotherapie	
19.2	Grundlagen und Anwendungen in der Thermotherapie	
19.3	Grundlagen und Anwendungen in der Inhalationstherapie	
20	Methodische Anwendung der Physiotherapie in den medizinischen Fachgebieten	700
20.1	Innere Medizin	
20.2	Chirurgie/Traumatologie	
20.3	Orthopädie/Traumatologie	
20.4	Gynäkologie und Geburtshilfe	
20.5	Neurologie/Neurochirurgie	
20.6	Psychiatrie	
20.7	Pädiatrie	
20.8	Geriatrie	
20.9	Rheumatologie	
20.10	Arbeitsmedizin	
20.11	Sportmedizin	
20.12	Sonstige	
Zur Verteilung auf die Fächer 1 bis 20		100

Stunden insgesamt		2.900
B	Praktische Ausbildung für Physiotherapeuten	
		Stunden
Praktische Ausbildung in		
1.	Krankenhäusern oder anderen geeigneten medizinischen Einrichtungen in den medizinischen Fachgebieten:	
1.1	Chirurgie	240
1.2	Innere Medizin	240
1.3	Orthopädie	240
1.4	Neurologie	240
1.5	Pädiatrie	160
1.6	Psychiatrie	80
1.7	Gynäkologie	80
Zur Verteilung auf die Fachgebiete 1.1 bis 1.7		240
2.	sonstigen Einrichtungen, Exkursionen	80

Stunden insgesamt		1.600

Anlage 2 (zu § 1 Abs. 2 Satz 1)

Fundstelle des Originaltextes: BGBl. I 1994, 3797 - 3799

A	Theoretischer und praktischer Unterricht für Physiotherapeuten	
		Stundenzahl
1	Physiologie	50
1.1	Grundlagen der Zellphysiologie	
1.2	Nerven- und Sinnesphysiologie	
1.2.1	Zentrales Nervensystem	
1.2.2	Vegetatives Nervensystem	
1.2.3	Motorische Systeme	
1.2.4	Allgemeine Sinnesphysiologie	
1.2.5	Somatoviszerales sensorisches System	
1.2.6	Gleichgewichtssystem	
1.2.7	Nozizeption und Schmerz	
1.3	Muskelphysiologie	
1.3.1	Skelettmuskulatur	
1.3.2	Molekularer Mechanismus der Kontraktion	
1.3.3	Regulation der Muskelkontraktion	
1.3.4	Muskelmechanik	
1.3.5	Muskelenergetik	
1.3.6	Glatte Muskulatur	
Von den vorgesehenen 50 Stunden können bis zu 40 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.		
2	Angewandte Physik und Biomechanik	20
2.1	Physikalische, mechanische und mathematische Grundlagen	
2.2	Gleichgewichtssatz der Mechanik und Prinzip der Gelenkkraftberechnung	
2.3	Kinematik der Gelenke des menschlichen Körpers	
2.4	Statische und dynamische Bestimmung der Gelenkkraft	
2.5	Biomechanik von Muskeln, Sehnen und Knochen	
2.6	Biomechanik und Ergonomie	
Von den vorgesehenen 20 Stunden können bis zu 10 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.		
3	Trainingslehre	40
3.1	Grundlagen der Trainingslehre	
3.2	Beanspruchungsformen des Trainings	
3.3	Aufbau und Prinzipien des Trainings	
3.4	Transfer der allgemeinen Trainingslehre in die Prävention und medizinische Rehabilitation	
3.5	Psychologische Aspekte des Trainings	
Von den vorgesehenen 40 Stunden können bis zu 20 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.		

4	Bewegungslehre	60
4.1	Grundlagen der Bewegungslehre	
4.2	Bewegungs- und Haltungsanalysen	
4.3	Prinzipien der Bewegung	
4.4	Sensomotorische Entwicklung	
4.5	Bewegung als sensomotorischer Lernprozeß	

Von den vorgesehenen 60 Stunden können bis zu 40 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.

5	Bewegungserziehung	50
5.1	Bewegungserziehung im Rahmen der Krankengymnastik	
5.2	Rhythmisch musikalische Aspekte in der Bewegungserziehung	
5.3	Psychomotorische Übungskonzepte	
5.4	Kombination von Grundformen der Bewegungserziehung aus Krankengymnastik und Psychomotorik	
5.5	Behindertensport	
5.6	Methodik und Didaktik von Einzel- und Gruppenbehandlung	

Von den vorgesehenen 50 Stunden können bis zu 10 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.

6	Physiotherapeutische Befundaufnahme und Untersuchungstechniken	70
6.1	Grundlagen der Befunderhebung	
6.2	Inspektion	
6.3	Funktionsprüfungen	
6.4	Palpation	
6.5	Meßverfahren	
6.6	Reflexverhalten	
6.7	Wahrnehmung akustischer Auffälligkeiten	
6.8	Systematik der Befunderhebung	
6.9	Dokumentation	
6.10	Synthese der Befunderhebung	
6.11	Erstellung des Behandlungsplanes	

Von den vorgesehenen 70 Stunden können mit Ausnahme der Punkte 6.2 bis 6.4, 6.7 und 6.8 bis zu 10 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.

7	Krankengymnastische Behandlungstechniken	500
7.1	Grundlagen krankengymnastischer Techniken	
7.2	Atemtherapie	
7.3	Entspannungstechniken	
7.4	Krankengymnastische Behandlung im Schlingengerät	
7.5	Krankengymnastische Behandlung im Bewegungsbad	
7.6	Gangschulung	
7.7	Manuelle Therapie	
7.8	Funktionsanalyse	
7.9	Medizinische Trainingstherapie	

7.10	Neurophysiologische Behandlungsverfahren	
7.10.1	Propriozeptive neuromuskuläre Fazilitation	
7.10.2	Behandlung nach Bobath	
7.10.3	Behandlung nach Vojta	
7.10.4	Sonstige Verfahren	
7.11	Psychomotorik	
7.12	Sonstige Behandlungstechniken	

Von den vorgesehenen 500 Stunden können mit Ausnahme der Punkte 7.3 bis 7.6 bis zu 50 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.

8	Methodische Anwendung der Physiotherapie in den medizinischen Fachgebieten	500
8.1	Innere Medizin	
8.2	Chirurgie/Traumatologie	
8.3	Orthopädie/Traumatologie	
8.4	Gynäkologie und Geburtshilfe	
8.5	Neurologie/Neurochirurgie	
8.6	Psychiatrie	
8.7	Pädiatrie	
8.8	Geriatrie	
8.9	Rheumatologie	
8.10	Arbeitsmedizin	
8.11	Sportmedizin	
8.12	Sonstige	

Von den vorgesehenen 500 Stunden können bis zu 180 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.

Zur freien Verfügung	110

Für Masseure und medizinische Bademeister mit einer Ausbildung nach dem Gesetz über die Ausübung der Berufe des Masseurs, des Masseurs und medizinischen Bademeisters und des Krankengymnasten sind diese Stunden zur Vorbereitung der Ergänzungsprüfung in den Fächern Anatomie und Spezielle Krankheitslehre vorzusehen.

Stunden insgesamt	1.400

B	Praktische Ausbildung für Physiotherapeuten	
		Stunden
Praktische Ausbildung in		
1.	Krankenhäusern oder anderen geeigneten medizinischen Einrichtungen in den medizinischen Fachgebieten:	
1.1	Chirurgie	160
1.2	Innere Medizin	160
1.3	Orthopädie	160
1.4	Neurologie	80
1.5	Pädiatrie	80
1.6	Psychiatrie	20
1.7	Gynäkologie	20

2.	sonstigen Einrichtungen	20

Stunden insgesamt		700

Anlage 3 (zu § 1 Abs. 2 Satz 2)

Fundstelle des Originaltextes: BGBl. I 1994, 3800 - 3801

		Stunden
A	Theoretischer und praktischer Unterricht für Physiotherapeuten	50
1	Physiotherapeutische Befundaufnahme und Untersuchungstechniken	
1.1	Grundlagen der Befunderhebung	
1.2	Inspektion	
1.3	Funktionsprüfung	
1.4	Palpation	
1.5	Meßverfahren	
1.6	Reflexverhalten	
1.7	Wahrnehmung akustischer Auffälligkeiten	
1.8	Systematik der Befunderhebung	
1. 9	Dokumentation	
1.10	Synthese der Befunderhebung	
1.11	Erstellung des Behandlungsplanes	
Von den vorgesehenen 50 Stunden können mit Ausnahme der Punkte 1.2 bis 1.4, 1.7 und 1.8 bis zu 10 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.		
2	Krankengymnastische Behandlungstechniken	400
2.1	Grundlagen krankengymnastischer Techniken	(30)
2.2	Atemtherapie	(30)
2.3	Entspannungstechniken	(10)
2.4	Krankengymnastische Behandlung im Bewegungsbad	(10)
2.5	Krankengymnastische Behandlung im Schlingengerät	(10)
2.6	Gangschulung	(10)
2.7	Manuelle Therapie	(60)
2.8	Funktionsanalyse	(20)
2.9	Medizinische Trainingstherapie	(10)
2.10	Neurophysiologische Behandlungsverfahren	
2.10.1	Propriozeptive neuromuskuläre Fazilitation	(80)
2.10.2	Behandlung nach Bobath	(40)
2.10.3	Behandlung nach Vojta	(40)
2.10.4	Sonstige Verfahren	(10)
2.11	Psychomotorik	(20)
2.12	Sonstige Behandlungstechniken	(20)
Von den vorgesehenen 400 Stunden können mit Ausnahme der Punkte 2.3 bis 2.6 bis zu 50 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.		

3	Methodische Anwendung der Physiotherapie in den medizinischen Fachgebieten einschließlich Spezielle Krankheitslehre	500
3.1	Innere Medizin	(80)
3.2	Chirurgie/Traumatologie	(60)
3.3	Orthopädie/Traumatologie	(60)
3.4	Gynäkologie und Geburtshilfe	(30)
3.5	Neurologie/Neurochirurgie	(70)
3.6	Psychiatrie	(30)
3.7	Pädiatrie	(70)
3.8	Geriatrie	(20)
3. 9	Rheumatologie	(10)
3.10	Arbeitsmedizin	(10)
3.11	Sportmedizin	(20)
3.12	Sonstige	(40)
Von den vorgesehenen 500 Stunden können bis zu 200 Stunden theoretischer Unterricht als Fernunterricht erteilt werden.		
Zur freien Verfügung		50
Für Masseure und medizinische Bademeister mit einer Ausbildung nach dem Gesetz über die Ausübung der Berufe des Masseurs, des Masseurs und medizinischen Bademeisters und des Krankengymnasten sind diese Stunden zur Vorbereitung der Ergänzungsprüfung in den Fächern Anatomie, Physiologie und Bewegungserziehung vorzusehen.		

Stunden insgesamt		1.000
B	Praktische Ausbildung für Physiotherapeuten	
		Stunden
Praktische Ausbildung in Krankenhäusern oder anderen geeigneten medizinischen Einrichtungen in den medizinischen Fachgebieten:		
1	Chirurgie	80
2	Innere Medizin	80
3	Orthopädie	80
4	Neurologie/Psychiatrie	80
5	Pädiatrie	60
6	Gynäkologie	20

Stunden insgesamt		400

Anlage 4 (zu § 1 Abs. 4)

(Fundstelle des Originaltextes: BGBl. I 1994, 3802)

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.................................................
(Bezeichnung der Schule)

                          Bescheinigung
          über die Teilnahme an den Ausbildungsveranstaltungen

Name, Vorname
.....................................................................
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Geburtsdatum Geburtsort
.....
hat in der Zeit vom ..... bis .....
regelmäßig und mit Erfolg

1. ( ) an dem theoretischen und praktischen Unterricht und der praktischen Ausbildung nach § 9/§ 12 Abs. 2/§ 18 Satz 2*)
2. ( ) an dem theoretischen und praktischen Unterricht nach § 12 Abs. 1 Satz 1 und 2/§ 12 Abs. 1 Satz 3*)
( ) an der praktischen Ausbildung nach § 12 Abs. 1 Satz 1 und 2/§ 12 Abs. 1 Satz 3*)

des Masseur- und Physiotherapeutengesetzes teilgenommen.
(Zutreffendes ankreuzen.)
Die Ausbildung ist - nicht - über die nach dem Masseur- und Physiotherapeutengesetz zulässigen Fehlzeiten hinaus - um ..... Tage*) - unterbrochen worden.

Ort, Datum
..... (Stempel)
.....
(Unterschrift(en) der Schulleitung)

.....
*) Nichtzutreffendes streichen.

Anlage 5 (zu § 7 Abs. 2 Satz 1)

(Fundstelle des Originaltextes: BGBl. I 1994, 3803)

Der Vorsitzende
des Prüfungsausschusses

Zeugnis
über die staatliche Prüfung für Physiotherapeuten

Name, Vorname
.....
Geburtsdatum Geburtsort
.....
hat am ..... die staatliche Prüfung nach § 9 des Masseur- und Physiotherapeutengesetzes vor dem staatlichen Prüfungsausschuß bei der .....
in ..... bestanden.

Sie/Er hat folgende Prüfungsnoten erhalten:
1. im schriftlichen Teil der Prüfung "....."
2. im mündlichen Teil der Prüfung "....."
3. im praktischen Teil der Prüfung "....."

Ort, Datum
..... (Siegel)
.....
(Unterschrift des Vorsitzenden des Prüfungsausschusses)

Anlage 6 (zu § 20)

(Fundstelle des Originaltextes: BGBl. I 1994, 3804)

Urkunde
über die Erlaubnis zur Führung der Berufsbezeichnung
"....."
Name, Vorname
.....
geboren am in
.....
erhält auf Grund des Masseur- und Physiotherapeutengesetzes

mit Wirkung vom heutigen Tage die Erlaubnis, die Berufsbezeichnung
"....."
zu führen.

Ort, Datum
..... (Siegel)
.....
(Unterschrift)

Anlage 6a (zu § 21a Absatz 2)

(Fundstelle: BGBl. I 2016, 934)

.....
(Bezeichnung der Einrichtung)

Bescheinigung
über die Teilnahme am Anpassungslehrgang

Name, Vorname

.....

Geburtsdatum Geburtsort

.....

hat in der Zeit vom .....
bis .....
regelmäßig an dem nach § 21a Absatz 2 der Ausbildungs- und Prüfungsverordnung für Physiotherapeuten von der zuständigen Behörde vorgeschriebenen Anpassungslehrgang teilgenommen.

Ort, Datum

..... (Stempel)

.....
Unterschrift(en) der Einrichtung

Anlage 6b (zu § 21a Absatz 3)

(Fundstelle: BGBl. I 2016, 934)

Die/Der Vorsitzende
des Prüfungsausschusses

Bescheinigung
über die staatliche Eignungsprüfung
für

.....

Name, Vorname

.....

Geburtsdatum Geburtsort

.....

hat am ..... die staatliche Eignungsprüfung nach § 21a Absatz 3 der
Ausbildungs- und Prüfungsverordnung für Physiotherapeuten bestanden/nicht bestanden*.

---

* Nichtzutreffendes streichen.

Ort, Datum

..... (Siegel)

.....
(Unterschrift(en) der/des Vorsitzenden des Prüfungsausschusses)

Anlage 7 (zu § 21b Absatz 2)

. . . . . .

(Bezeichnung der Einrichtung)

Bescheinigung
über die Teilnahme am Anpassungslehrgang

Name, Vorname

. . . . . .

Geburtsdatum Geburtsort

. . . . . .

hat in der Zeit vom . . . . . bis . . . . . regelmäßig an dem nach § 21b Absatz 2 der Ausbildungs- und Prüfungsverordnung für Physiotherapeuten von der zuständigen Behörde vorgeschriebenen Anpassungslehrgang teilgenommen.

Das Abschlussgespräch hat sie/er bestanden/nicht bestanden* .

Ort, Datum

. . . . . (Stempel) . . . . . .

. . . . . .

Unterschrift(en) der Einrichtung

Ort, Datum

. . . . . (Stempel) . . . . . .

. . . . . .

Unterschrift(en) der Personen nach § 21b Absatz 2
Satz 7

* Nicht Zutreffendes streichen.

Anlage 8 (zu § 21b Absatz 7)

Die/der Vorsitzende
des Prüfungsausschusses

Bescheinigung
über die staatliche Kenntnisprüfung
für

. . . . . .

Name, Vorname

. . . .

Geburtsdatum Geburtsort

. . . .

hat am . . . . die staatliche Kenntnisprüfung nach § 21b Absatz 3 der Ausbildungs- und Prüfungsverordnung für Physiotherapeuten bestanden/nicht bestanden* .

* Nicht Zutreffendes streichen.

Ort, Datum

. . . . (Siegel)

. . . .

(Unterschrift(en) der/des Vorsitzenden des Prüfungsausschusses)