



CLINICAL MASTER PROGRAM IN REHABILITATION SCIENCES AT JUST (JUST – CRS)

COURSE INFORMATION PACKAGE (COURSE CATALOGUE)

COURSE INFORMATION

Course title	Code	Semester	Theory (hours/week)	Application (hours/week)	Laboratory (hours/week)	National Credit	ECTS		
Sports Rehabilitation	CRS 733	11, 111	2	1		2	5		
Prerequisites	None	None							
Course language	English	English							
Course type	Electiv	e							
Mode of delivery (face to face, distance learning, blended)	•	• Blended							
Learning and teaching strategies	• • • • • • • • • • • • • • • • • • • •	 Lecture-Recitation Demonstration Team group work Problem solving Self-directed learning Preparing and/or presenting reports Discussion Online anvironment 							
Course description	This course aims to design and perform evidence-based and multifactorial clinical reasoning, develop rehabilitation strategies and use of technology according to the needs, facilitate and organize efficient interdisciplinary teamwork (between athlete, coach, manager, parent, and clinician) in accordance with the advanced management and organization strategies, develop the ability to work as an advanced independent practitioner and as part of a professional multidisciplinary sports' medicine team, evaluate social responsibilities associated with sport, exercise and society.								
Course objective	The aim of this course is to evaluate, analyse, interpret and apply current up to date rehabilitation strategies according to the needs, evidence-based and multifactorial clinical reasoning in sport's medicine, in the evaluation and management of the injury and develop safe and effective exercise and rehabilitation programs for athletic, normal, and special populations.								
Learning outcomes	 Upon the completion of this course, the student will; 1. Design and perform client management using an evidence based and multifactorial clinical reasoning within interdisciplinary context. 2. Integrate both rehabilitation sciences and technology for the enhancement of patient outcomes. 3. Design and perform client management according to up to date scientific evidence and multifactorial clinical reasoning. 								





	 4. Facilitate and organize efficient interdisciplinary teamwork in accordance with the advanced management and organization strategies. 5. Comprehension the importance of sports injury.
Course Content	 Clinical reasoning Models of practice Interdisciplinary work Future context and intervention
References	 Comfort P, Abrahamson, E. Sports Rehabilitation and Injury Prevention. Wiley-Blackwell; 2010.Peter Brukner & Karim Khan. Clinical in sports medicine. McGraw-Hill Education; 2012. Reider B, Davies, G, Provencher, MT. Orthopaedic Rehabilitation of the Athlete: Getting Back in the Game. Saunders; 2015. Brukner & Khan's Clinical Sports Medicine, 4th ed. Peter Brukner, Karim Khan Sydney: McGraw-Hill Australia; 2012 ISBN-13 978-0-07099-813-1. 126.

COURSE OUTLINE-WEEKLY

Weeks	Topics (Theory and Practice – Lab & hands on skills [P])
1	Scope of profession and interdisciplinary practice
1.	Introduction to the lab [P]
	Pathophysiology of skeletal muscles injury
2	Injury screening [P]
۷.	Pathophysiology of ligamentous and peripheral nerve injuries
	Assessment of performance I [P]
3	Clinical reasoning in sport rehabilitation
5.	Assessment of performance II [P]
4	First contact management
4.	Protection equipment [P]
5	Systematic rehabilitation of sport injuries
	Acute management of injury I [P]
6	Improving physical performance in sport
0.	Acute management of injury II [P]
7	Sport psychology and nutrition
/.	Physical conditioning [P] Field activities [P]
8.	Midterm exam
٩	Injury prevention strategies
	Students presentations [P]
10	Rehabilitation of upper extremity sport injuries
10.	Upper extremities sport rehabilitation [P]
11	Concussion assessment and treatment in athletes
	Concussion assessment and treatment [P]
12.	Rehabilitation of knee, ankle and foot sport injuries
	Knee, ankle, and foot sport rehabilitation [P]
13.	Return to sport criterias after lower extremity injuries
	Return to sport assessment [P]
14	Return to sport criterias after upper extremity injuries
±-,	Return to sport assessment [P]
15.	Final exam week (theoretical and practical exam)





*In accordance with the structure of the course, activities such as presentations, projects, seminars, and portfolios can be used in the evaluation system as a midterm exam.

ASSESSMENT METHODS

Course activities	Number	Percentage**
Attendance		
Laboratory		
Application	1	10
Field activities	1	10
Specific practical training		
Assignments	4	20
Presentation		
Discussion		
Project	1	20
Seminar		
Portfolio		
Online environment*		
Midterms		
Final exam**	1	40
Total		
Percentage of semester activities contributing grade success		60
Percentage of final exam contributing grade success		40
Total		100



Clinical Rehabilitation Sciences

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WORKLOAD AND ECTS CALCULATION

Activities	Number	Duration (hour)	Total Work Load	
Course Duration (x14)	14	2	28	
Laboratory				
Application	14	1	14	
Specific practical training	7	2	14	
Field activities	1	13	13	
Study Hours outside the classroom context				
(Preliminary work, reinforcement, self-	14	2	28	
directed learning etc.)				
Presentation / Preparation				
Project	1	8	8	
Online environment	2	20	20	
Homework assignment	2	5	10	
Portfolio				
Midterms (Study duration)				
Final Exam (Study duration)	1	15	15	
Total Workload			150	

MATRIX OF THE COURSE LEARNING OUTCOMES VERSUS PROGRAM OUTCOMES

Program Outcomes		Contribution level*				
		1	2	3	4	5
1.	Design and implement autonomously a professional approach based on analysis of complex rehabilitation science knowledge					х
2.	Design, deliver and evaluate educational process adapted or customize to different inter-professional contexts (academic/professional/co mmunity) using an effective pedagogical approach		x			
3.	Provide and disseminate new evidence in accordance with research ethics using updated and integrated knowledge of research methods		x			
4.	Develop, manage and organize strategic planning and decision making within				х	





	the scope of the quality				
	assurance, ethical rules,				
	team development and				
	cooperation				
5.	Integrate health advocacy				
	at an individual, community				
	and policy levels to		v		
	promote citizenship and		~		
	inclusive development of				
	communities				
6.	Communicates effectively				
	within multidisciplinary				
	clinical or scientific			х	
	contexts, based on				
	collaborative approach.				
7.	Plan, implement and				
	advocate interdisciplinary				
	healthcare services within				
	deep understanding of			Y	
	health care systems to			^	
	promote better networking,				
	and comprehensive patient				
	care.				

*1 Lowest, 2 Low, 3 Average, 4 High, 5 Highest