

Confidential

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Handlers and Clinicians

Please complete the survey below.

Thank you!

1) Date _____

2) Please select which group you belong to

- Handler
 Clinician

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
3) The dog was a valuable addition to the treatment sessions tonight	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4) The students were prepared with treatment ideas incorporating the dog	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5) The use of a therapy dog is a valuable resource in an outpatient physical rehabilitation setting.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6) The addition of AAT is and help therapy patients reach their goals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7) There were positive interactions between the patient and the dog.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8) Please select which patient benefits you observed in the during the AAT sessions today.

- Range of motion (ability to move joints)
 Improved fine motor skills (picking up small objects, using buttons, zippers, pinching)
 Improved self-care (brushing, dressing, etc.)
 Increased muscle strength
 Improved overall mental health
 Increased attention
 Increase socialization
 Reduction in perceived pain
 Increased motivation
 Reduced anxiety or stress

9) What were the two most impactful things you witnessed throughout the sessions today?

10) Please describe any other observations or opportunities for improvement.

Thank you so much for participating in this program! It is amazing to see this Capstone experience come to life and I could not have done it without you. Thank you for taking the time to volunteer at the CARES clinic for this new program and for filling out this survey, I really appreciate it!

Colleen Fralinger

CARES OT Patients

1) Today's Date

Fecha

2) Gender

Genero

- Male (masculino)
- Female (femenino)
- Prefer not to say (prefiero no decir)

3) Please rate your stress level prior to treatment today. 0 being no stress and 10 being the worst stress you've ever felt.

- 0 1 2 3
- 4 5 6 7
- 8 9 10

Por favor, evalúe su nivel del estrés antes de su tratamiento hoy, 0 es sin estrés y 10 es el peor estrés que ha experimentado.

4) Please rate your pain level prior to treatment today. 0 being no pain and 10 being the worst pain you've ever felt.

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

Por favor, evalúe su nivel de dolor antes de tratamiento hoy, 0 es no dolor y 10 es el peor dolor que ha experimentado.

	Strongly Disagree (No estar para nada de acuerdo)	Disagree (No estar de acuerdo)	Neutral	Agree (Estar de acuerdo)	Strongly Agree (Estar totalmente de acuerdo)
5) The students incorporated the therapy dog well into my treatment session. (Los estudiantes usaron el perro de terapia bien a mi terapia.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6) I enjoyed the addition of a therapy dog into my treatment session. (Disfruté la incorporación del perro de terapia a mi cita.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7)					

- The activities performed with the therapy dog are helping me reach my therapy goals. (Las actividades realizadas con el perro de terapia me están ayudando alcanzar mis metas de terapia.)
- 8) Both the students and the dog/handler facilitated a welcoming and stress free environment. (Ambos los estudiantes y el manejador del perro crearon un ambiente acogedor y gratis del estrés.)
- 9) I enjoyed the variety of the treatments provided for my session today. (Disfruté la variedad de tratamientos en mi cita hoy.)
- 10) I would be open to incorporating a therapy dog into my treatment sessions in the future. (Sería abierto a incorporar un perro de terapia en mis tratamientos en el futuro.)

-
- 11) Please rate your current stress level at the end of treatment. 0 being no stress and 10 being the worst stress you've ever felt. 0 1 2 3
 4 5 6 7
 8 9 10

Por favor, evalúe su nivel del estrés al fin de su tratamiento, 0 es sin estrés y 10 es el peor estrés que ha experimentado.

-
- 12) Please rate your pain level after working with the therapy dog. 0 being no pain and 10 being the worst pain you've ever felt. 0
 1
 2
 3
Por favor, evalúe su nivel de dolor al fin de tratamiento, 0 es no dolor y 10 es el peor dolor que ha experimentado. 4
 5
 6
 7
 8
 9
 10

Thank you so much for participating in this program! It is amazing to see this Capstone experience come to life and I could not have done it without you. Thank you for agreeing to participate in this new program and for filling out this survey, I really appreciate it!

Gracias por su participación en este programa y para llenar esta encuesta. Es genial para ver esta experiencia de Capstone venir a vida. No podría hacerlo sin ustedes.

Colleen Fralinger

CARES OT Students

Please complete the survey below.

Thank you!

1) Today's Date _____

2) What is your current year in the OTD program at MUSC? 1st year
 2nd year
 3rd year

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
3) I gained knowledge about the field of Animal Assisted Therapy through this treatment session.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4) I feel that Animal Assisted Therapy is an important tool for therapists to use in clinical settings.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5) I increased my interprofessional skills through speaking and interacting with the trained handler during my AAT session	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6) The treatment ideas I prepared before the session increased my confidence of incorporating a therapy dog into the OT session.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7) Animal Assisted Therapy is an important addition to the CARES clinic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8) My patient benefitted from the treatment session with the therapy dog.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9) I would be interested in learning more on how to incorporate Animal Assisted Therapy into the field of OT.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10) Please select the benefits you believe AAT had with your patient(s) today.

- Range of motion (ability to move joints)
- Improved fine motor skills (picking up small objects, using buttons, zippers, pinching)
- Improved self-care (brushing, dressing, etc.)
- Increased muscle strength
- Improved overall mental health
- Increased attention
- Increase socialization
- Reduction in perceived pain
- Increased motivation
- Decreased stress and anxiety

11) Please describe how you prepared for the AAT sessions tonight.

12) Please list 2 things you learned from this experience.

13) Are there any additional comments you have regarding the program?

Thank you so much for participating in this program! It is amazing to see this Capstone experience come to life and I could not have done it without you. Thank you for taking the time to plan and implement treatments with the therapy dog and for filling out this survey, I really appreciate it!

Colleen Fralinger



Occupational Therapy Patient Animal Assisted Therapy Disclaimer

As part of a new project being conducted by an Occupational Therapy Doctorate student at MUSC, we will be utilizing therapy dogs in our treatment sessions. During your treatment, the student therapists will be including the therapy dog in various tasks/exercises you complete. The therapy dogs used in this program are part of the MUSC Pet Therapy program which ensures all dogs are registered with a national therapy dog organization and then also pass the training provided by MUSC volunteer services. All dogs must be groomed prior to arrival at MUSC facilities and are up to date on vaccinations and health standards. The estimated time with the dog will be approximately 15-30 minutes in length, but you may request to discontinue activities with the dog at any given time. All dogs are with a trained handler that will always be present. We want to facilitate a welcoming and stress-free environment and will work to ensure this is accomplished. The information gained from this program will lead to advancements in the field of Animal Assisted Therapy in a health care setting and hopefully impact the lives of many other patients to come. We appreciate your support and participation in the program! By signing, you agree to allow a therapy dog to be present during a portion of your treatment sessions.

Printed Name

Signed Name

Date