UNIVERSIDAD DE COSTA RICA SISTEMA DE ESTUDIOS DE POSGRADO

ENGLISH FOR PHYSICAL THERAPY: AN ONLINE COURSE FOR INSTRUCTORS AND STUDENTS TO FOSTER SPEAKING SKILLS

Trabajo Final de Investigación Aplicada sometido a la consideración de la Comisión del Programa de Estudios de Posgrado en la Enseñanza del Inglés como Lengua Extranjera para optar al grado y título de Maestría Profesional en Enseñanza del Inglés como Lengua Extranjera.

> ALFARO GONZÁLEZ, GUSTAVO VEGA MOREIRA, CHRISTIAN

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Dedicatoria

To my family and close friends, for their support and words of encouragement throughout the entire process. I would like to especially dedicate this work to my mother, for her immense love and support that inspired me to accomplish this goal. *Gustavo*

I dedicate this dissertation to my mother María del Rosario Moreira Alfaro, my two brothers Carlos Iván and Adrián Enrique Vega Moreira, and my wife María del Rocío Calvo Alfaro, who have always believed in my capabilities and supported me unconditionally to pursue the fulfillment of this dream. As I celebrate this achievement, I want to pay tribute to the memory of my beloved son, Dante Sebastián Vega Calvo. Thank you, family, for being my unwavering source of strength and inspiration. I offer this accomplishment to our angel above and to the endless possibilities that lie ahead for us.

Christian

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iii

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Dra. Irene Marin Cervantes Representante de la Decana Sistema de Estudios de Posgrado Mag. Randolph Zúñiga Coudin **Profesor Guía** Mag. Shazia Alfaro Magnan Lectora Mag. Ana Cristina Alvarado Acevedo Lectora M.A. Xinia Rodríguez Ramírez Directora Programa de Posgrado en Enseñanza del Inglés como Lengua Extranjera Gustavo Alfaro González Sustentante

Christian Josue Vega Moreira Sustentante

Dedicatoria	ii
Agradecimientos	iii
Tabla de contenidos	V
Resumen	ix
Abstract	x
Lista de tablas	xi
Lista de abreviaturas	xiii
I. Chapter I. Needs Analysis	2
A. Research Approach	3
B. Context and Participants	4
C. Data Collection Instruments	5
a. Semi-structured Interview	5
b. Needs Analysis Questionnaire	5
D. Procedures	6
E. Results and Discussion	7
a. Interests of Primary Stakeholder	7
b. General Group Profile	
F. Diagnostic Test Design	
a. Test Administration Issues	14
b. Principles of Validity and Reliability	15
c. Macro Skills	20
d. Constructs behind the Test	21
e. Task Design in terms of Proficiency Levels	
f. Types of Rubrics Used for Assessing Speaking and Writing .	23

Table of Contents

e. Types of Parameters Used for Assessing Reading and Listening	24
H. Diagnostic Test Results	25
II. Chapter II. Syllabus Design	32
A. Course Logo	32
B. Course Description	32
C. Statement of Goals and Objectives	34
D. Methodology	36
a. Approach	37
b. Classroom Dynamics	38
c. Tasks and Techniques and their Rationale	38
d. Role of the Learner	40
e. Role of the teachers	41
C. Assessment	41
a. Formal and Informal Assessment	41
b. Formative and Summative Assessment	42
c. Assessment Tasks	43
III. Chapter III: Literature Review	67
A. Critical and Reflective Thinking	69
a. High-order Thinking Skills (HOTS)	69
b. Techniques to Promote Self-Awareness	71
c. Systematic Implementation of Oral Tasks	72
B. Public Speaking	73
a. Giving Oral Presentations	73
b. The Use of Role-plays	75
C. Interactive Activities	79

a. Online Learning Resources (E-learning)	79
b. Games	80
D. Classroom Management Techniques	83
a. Grouping Techniques	83
b. Techniques to Encourage Speaking	87
IV. Chapter IV: An Evidence-based Reflection on the Practicum Ba	sed on the
Research Questions	90
A. Data Collection Methods	90
a. Unstructured Observations during the Course	90
b. Structured Delayed Observations based on Class Recordings	91
c. The Students' Opinions about the Course	92
d. The Supervisors' Feedback after Classes	92
e. Summative Assessments	93
B. Critical and Reflective Thinking	93
a. The Implementation of High-Order Thinking Skills (HOTS)	93
b. Self-Awareness and Self-Regulation Techniques	100
C. Public Speaking Techniques	107
a. Role-plays	107
b. Oral Presentations	111
D. Interactive Activities	115
a. Online Learning Resources	115
b. Games	122
E. Classroom Management Techniques	126
a. Grouping Techniques	126
b. Techniques to Encourage Speaking	137

Conclusions 1	39
a. Limitations 1	42
b. Recommendations1	42
G. References 1	48
I. Appendices1	53

Resumen

A medida que el actual mercado laboral exige hablantes de idiomas más especializados, los cursos de Inglés con Fines Específicos (ESP) se han tornado más relevantes. En Costa Rica, el avance de la economía ha dependido significativamente del idioma inglés y la creciente demanda de planes de estudio especializados ha sido abordada por la Universidad de Costa Rica (UCR) a través del Programa de Maestría en Enseñanza del Inglés como Lengua Extranjera. Este estudio tuvo como objetivo analizar las necesidades y deseos de los estudiantes y profesores de Terapia Física (PT) de la UCR, e investigó estrategias de enseñanza y aprendizaje para mejorar las habilidades de expresión oral de estas personas en un curso en línea de ESP. Esta investigación se divide en cuatro secciones. En el primer capítulo, se presenta un profundo análisis de las necesidades actuales y futuras, así como los deseos, carencias y métodos de aprendizaje preferidos por la población meta. En el segundo capítulo, se describe un programa de estudios siguiendo el enfoque de enseñanza por tareas (TBLT). El tercer capítulo ofrece un exhaustivo estado de la cuestión acerca de las estrategias para la enseñanza y aprendizaje del mejoramiento de las habilidades de expresión oral en un curso ESP. Finalmente, en el cuarto capítulo, los investigadores brindan una detallada reflexión sobre la implementación de las estrategias consultadas en el curso English for Physical Therapy, basándose en las observaciones realizadas a lo largo de las lecciones, la retroalimentación de los supervisores y las percepciones de los estudiantes. Los hallazgos en este estudio no son definitivos, pero ofrecen implicaciones significativas que podrían ser beneficiosas para futuros estudios en ESP, TBLT, y el aprendizaje en línea.

Palabras clave: terapia física, inglés para fines específicos, enfoque de enseñanza por tareas, aprendizaje en línea, estrategias de enseñanza y aprendizaje, mejoramiento de habilidades de expresión oral

ix

Abstract

As the current job market demands more specialized language speakers, English for Specific Purposes (ESP) courses have become more relevant. In Costa Rica, the advancement of the economy has significantly relied on the English language and the escalating demand for specialized syllabi has been addressed by the University of Costa Rica (UCR) through the Master's Program in Teaching English as a Foreign Language. This study aimed at analyzing the needs and wants of Physical Therapy (PT) students and instructors from UCR and investigated teaching and learning strategies for improving the speaking skills of those individuals in an online ESP course. This paper is divided into four sections. In the first chapter, a thorough needs analysis is presented, featuring the current and future needs, wants, lacks, and preferred learning methods reported by the target population. In the second chapter, a syllabus following the Task Based Language Teaching approach (TBLT) is described. Chapter three provides an exhaustive literature review regarding teaching and learning strategies for improving speaking skills in an ESP setting. Finally, in the fourth chapter, the team engages in a comprehensive reflection of the implementation of the consulted strategies in the course English for Physical Therapy based on the observations the studentteachers made throughout the lessons, the supervisors' feedback, and the students' perceptions. The findings in this study are not definitive but present significant implications that could be beneficial for future studies in ESP, TBLT, and online learning.

Keywords: Physical Therapy, English for Specific Purposes, Task-Based Language Teaching, online learning, teaching and learning strategies, improving speaking skills

Lista de tablas

Table 1. Participants' Current and Future Needs Using the English
Language 8
Table 2. Participants' Perceived Lacks in the English Language
Table 3. Participants' Preferred Learning Activities
Table 4. Participants' Preferred Activities Using the English Language 12
Table 5. Participating Students' Speaking Proficiency Results according to the
Diagnostic Test
Table 6. Participant Students' Listening Proficiency Results according to the
Diagnostic Test
Table 7. Participant Students' Reading Proficiency Results according to the
Diagnostic Test
Table 8. Participant Students' Writing Proficiency Results according to the
Diagnostic Test
Table 9. Evaluation of the course 42
Table 10. Implementation of HOTS Tasks in the Course 94
Table 11. The Students' Self-assessment of their Performance in the Final Oral
Presentations 102
Table 12. The Students' Perceived Improvement of English Skills in
the Course 105
Table 13. Games Implemented during the Course 123
Table 14. The Students' Opinions on the Effectiveness of Tasks to Improve their
Speaking Skills 134
Table 15. The Students' Preferences when Working in Pairs or Groups 135

Γable 16 – 27. Participants' individual prot	əs 158
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Lista de abreviaturas

ACTFL: American Council on the Teaching of Foreign Languages

EFL: English as a Foreign Language

ESP: English for Specific Purposes

HOTS: High-order Thinking Skills

PT: Physical Therapy

TBLT: Task-Based Language Teaching

UCR: University of Costa Rica





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Número de Carné: <u>BOO186</u> Número de cédula: <u>2668537</u> .
Correo Electrónico: xtavo 2290 x @gmail. com
Fecha: 08 de enero 2024 . Número de teléfono: 89927767 .
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English for Physical Therapy: An Online Course for Instructors and Students to Foster Speaking Skills

In order to fulfill the graduation requirements for the Master's Program in Teaching English as a Foreign Language at the University of Costa Rica (UCR), this research aims at expanding the field of language education by focusing on the practical English learning needs of current and future professionals in the discipline of Physical Therapy (PT). The present study emerges from the design and implementation of an English for Specific Purposes (ESP) course, a mandatory component for the program's completion, targeted at instructors and students within the PT major at UCR.

In light of the diverse spectrum of English proficiency levels identified among the participants in the needs analysis (NA) leading to the ESP course design, this study had the purpose of identifying, implementing, and assessing speaking strategies vital for developing oral communication skills. For the purposes of this investigation, the team employed a triangulated approach focusing on a literature review, the practical pedagogical implementation of the syllabus, and a reflection based on empirical feedback.

From an array of topics including critical thinking, public speaking, interactive activities, and classroom management, this study intended to explore the effectiveness of strategies identified in the literature and implemented in the course. This was evaluated based on their impact on student engagement, functional language use, sociolinguistic appropriateness, use of specialized vocabulary application, and pronunciation accuracy. The observed outcomes of implementing the strategies in the course can offer meaningful insights for teachers seeking to employ, thus contributing to improving speaking proficiency across diverse English levels within an ESP setting.

Chapter I. Needs Analysis

As stated before, in order to graduate from the Master's program, the students must comply with the design of an English for Specific Purposes (ESP) course. In light of this requirement, the students in charge of this study (studentteachers) created an ESP course during the first semester of 2022 and taught the course online during the second semester. The target population consisted of instructors and students of the Physical Therapy program at the University of Costa Rica. According to the United States Bureau of Labor Statistics (2021), this population can be described as medical staff specialized in therapy for injured or ill patients to improve movement and reduce pain. They are also involved in preventive care, rehabilitation, and treatment for patients with health conditions, illnesses, or injuries that may result in partial or total loss of mobility, or chronic pain in various parts of the body. Furthermore, physical therapists have to communicate with patients, providing them a diagnosis and explaining to them the conditions and possible treatments for their symptoms. Similarly, physical therapists need to be updated with the latest information about medical news and treatments developed around the world. To accomplish this, they usually need to attend international conferences or read academic papers that contain information about the newest and more efficient techniques to treat certain conditions and illnesses.

Since English is the lingua franca around the world, people in the workforce have to demonstrate proficiency in the English language (more and more frequently) in order to compete in a highly globalized job market. The Physical Therapy students and instructors in the target population are no exception. To be more competitive in their profession, they need to demonstrate similar skills and perform similar tasks in English as they do in their native Spanish, for example, communicate clearly and effectively with patients, colleagues, and instructors in clinical settings. Bosher and Smalkoski (2002) point out that health-care students in general must be capable of "using appropriate paralinguistic features of communication, such as stress and intonation, and volume and rate of speech," especially in clinical settings. The same holds true for Physical Therapy instructors and students who must rely on appropriate oral communication features (assertive, polite, clear, concise) to provide a diagnosis, describe and explain conditions and treatments to patients or colleagues, and participate in medical training sessions or conferences. The present ESP course may open up the possibility for the target population to take part in international studies or participate in professional development activities.

Research Approach

In order to collect the most important information from all the interested parties, the approach selected for this needs analysis was the mixed methods approach. According to Shorten and Smith (2017), this approach is characterized by enabling researchers to look for a more panoramic view of their "research landscape" by addressing its aspects from different points of view and through diverse "research lenses." Thus, to be as objective as possible, a combination of quantitative and qualitative data can provide better insights about the phenomena under study, in this case, about the needs, wants, and lacks of the target population to be addressed in the ESP course. This includes general information from all the participants, such as prior experience with the English language, employment status, their perceived English proficiency level, and their current and future use of the target language in academic or work-related situations, among others. These current and future needs using the target language can range from reading academic papers in English to listening and communicating orally with patients and colleagues, as well as participating in international medical conferences. To collect the data following the mixed methods approach, a needs analysis questionnaire for students eliciting quantitative and qualitative information was used first, followed by a semi-structured interview with the stakeholder eliciting additional qualitative data for triangulation about the target population's needs, concerns and expectations.

Context and Participants

The participants in this study were a group of 15 potential students for the ESP course, including instructors and students of the Physical Therapy major at the University of Costa Rica (UCR), Rodrigo Facio campus. The target population was selected using the convenience sampling or "opportunity sample." This type of sampling is the most common and an important criterion of sample selection for researchers since the target population meets certain practical criteria (Dornyei, 2007). To ensure participant anonymity, the researchers used pseudonyms throughout all the development of the present study. At this moment, seven participants were Physical Therapy professors at UCR (including the stakeholder), four participants were students, two of them claimed to be unemployed, and one participant was a medical assistant. The participants' ages ranged from 20 years

old to 54 years old. Half of the candidate students indicated that they had enrolled in English courses after graduating from high school at different private institutions, from a few weeks to several years of instruction.

Data Collection Instruments

This section describes the instruments used to collect the data for the present study. The researchers employed a semi-structured interview with the stakeholder and a questionnaire for the participants.

Semi-structured Interview

The Practicum team designed a semi-structured interview to collect information from the stakeholder, who is also the Director of the Physical Therapy Department, as well as a participant from the study. This interview consisted of eight open questions with the purpose of collecting detailed information from the stakeholder about the needs and wants from the target population, a general description of participants, the tasks they perform using the English language, possible authentic materials for the design of activities and assessments, and their expectations for the course and the student teachers. This semi-structured interview lasted around 30 minutes (see Appendix A).

Needs Analysis Questionnaire

Additionally, to collect information from the participants, the researchers employed a questionnaire containing close and open-ended questions, twenty-two items in total. These questions had the purpose to gather information about the participants' current and future needs and wants using the English language, their preferences and expectations about the course, and their experience and approximate proficiency level in the target language. This questionnaire was designed to be completed by the participants in approximately 15 minutes, and they had a week to answer the questionnaire (see Appendix B). The information collected in this questionnaire was highly relevant for the design of the ESP course.

Procedures

The Practicum team first had the semi-structured interview with the stakeholder to learn about the participants' current and future needs in the target language. The interview was conducted using the Zoom online platform, and it lasted for about 30 minutes. Some extra information to clarify details was provided by the stakeholder in additional conversations via email and phone. The stakeholder provided a general description of the participants, and their wants and needs for the use of the English language, as well as preferences in activities and materials for the course. Then, the researchers conducted the Needs Analysis Questionnaire for the participants including the stakeholder. As mentioned before, the stakeholder was also a participant for this study. From the expected 15 participants, only 12 participants responded to the questionnaire. The questionnaire was designed to be completed in approximately 15 minutes. It was sent via email (Google Forms) to the participants, and they had an entire week to access the link and answer it. Likewise, the anonymity from participants was ensured by using pseudonyms when referring to them during the collection of data from all the procedures used in this study. The data from both instruments was later analyzed and presented as the results in the next section of this document.

Results and Discussion

The results in this section are divided and presented based on the interests of the stakeholder, the general group profile, and the participants' individual profiles.

Interests of Primary Stakeholder

The semi-structured interview and additional conversations that the student teachers held with the stakeholder and Director of the Physical Therapy Department provided the team with valuable information about the current and future needs of the instructors and students of the Physical Therapy major. Based on the information obtained from the interview, the stakeholder stated that reading academic research and articles in English was the population's main use of the target language. According to the stakeholder, the Physical Therapy Department from the School of Health Technologies has recently started to collaborate with the University of Colorado Boulder (CU Boulder), in the United States. The stakeholder stated that last year, Physical Therapy students from both UCR and CU Boulder had a virtual conference where the participants had to communicate in English to participate in the activity. This example points to the participants' need to develop speaking skills to participate in international conferences as either speakers or attendees. The stakeholder further reported that the participants also said that they would like to develop more casual speaking skills with the aim of engaging in small-talk with fellow colleagues at those conferences to establish professional partnerships for further cooperative studies. Finally, the stakeholder also emphasized the need for improving the participants' listening skills, specifically when they have to watch videos about new techniques for pain management. In

classes, the participants study and discuss diverse techniques to address pain, but often they have to look for additional explanations or examples on how to administer those techniques to the patients. This information is seldom explained in their L1, so they need to enhance their listening skills in order to understand how the novel treatments must be carried out.

General Group Profile

This section presents the data collected through the Needs Analysis Questionnaire from 12 of the originally 15 students interested in the ESP course. The section is divided into participants' needs and wants.

Participants' Needs. This section presents the main results from the participants' needs according to their responses in the Needs Analysis Questionnaire.

Table 1

Current and future needs	Number of participant answers
Reading academic books and articles	12
Participating in workshops, meetings, and conferences as attendees	6
Following written instructions	6
Reading and writing emails and letters	4
Others	3

Participants' Current and Future Needs Using the English Language

Note. N= 12. Cuestionario sobre necesidades del uso del idioma inglés para personal docente y estudiantes de la carrera de Terapia Física de la UCR. Researchers' own elaboration.

As seen in Table 1, all of the participants affirmed they have to read academic books and articles in English, and half of the 12 participants use the target language to participate in workshops, meetings and conferences as attendees, and some others. The same proportion of the participants use English to follow written instructions. For a third of the 12 participants, reading and writing emails and letters were their main tasks at work. On a smaller scale, a fourth of the total participants have to provide written instructions, and interact with colleagues at workshops, meetings, and conferences. As can be seen, there is a clear tendency in participants' needs for reading comprehension skills according to these results, yet it is also observable that students have a need to develop speaking and writing strategies to fulfill these different duties.

Table 2

Areas of Improvement	Level of priority		
	First	Second	Third
Speaking fluently	8	3	1
Vocabulary	6	4	2
Correct pronunciation	6	4	2

Participants' Perceived Lacks in the English Language

Improving listening	5	5	2
comprehension			
Writing skills	4	4	4

Note. N= 12. Cuestionario sobre necesidades del uso del idioma inglés para personal docente y estudiantes de la carrera de Terapia Física de la UCR. Researchers' own elaboration.

Table 2 displays the English language areas in which the participants consider they need to improve based on their perception. The answers present the times that the different skills were selected as a priority to improve (first, second and third option). For example, "Speaking fluently" was selected 8 times as the main area of priority for improvement, 3 times as second, and 1 time as the third option. Half of the participants considered the use and correct pronunciation of technical vocabulary their main concern, while five participating students would like to improve their listening comprehension skills. Last, a fourth of the total participants want to improve their writing skills. These findings point to the need for focusing the ESP course on developing speaking and listening strategies, as well as correctly using and pronouncing vocabulary related to their profession in order to meet these expectations.

Participants' Wants. This section presents the main results from the participants' wants according to their responses in the Needs Analysis Questionnaire.

10

Table 3

Participants' Preferred Learning Activities

Areas of Improvement	Level of preference		
	First	Second	Third
Games	6	1	2
Class Discussions	2	4	1
Role-plays	1	2	1
Match word-images	1	2	3
Fill in the blanks	1	2	3
Debates	1	1	2

Note. N= 12. Cuestionario sobre necesidades del uso del idioma inglés para personal docente y estudiantes de la carrera de Terapia Física de la UCR. Researchers' own elaboration.

Table 3 displays the participants' preferred activities for learning. The activity of games was the most popular activity that they would like to have in the English classes with half of the responses. Activities such as class discussions, role-plays, matching words with images, and filling in the blanks followed in preference by the participants, not as their first option but as their second preferred activity for learning. Following these findings, the ESP course should include a variety of activities matching the students' preferred ways to learn. It can be

noticed that many of these activities require the participants to interact and speak with each other, such as games, class discussions, and role-plays. These activities can enhance the students' speaking skills when interacting with fellow colleagues at conferences, meetings, and other academic and professional settings.

Table 4

Participants' Preferred Activities Using the English Language

Activities selected as first, second,	Number of total answers combined		
and third preferred option			
Participate in conversations	8		
Speak to patients	8		
Correct pronunciation	8		
Improve listening	7		
Expand vocabulary	6		
Oral presentations	5		
Read texts	4		
Write texts	3		

Note. N= 12. Cuestionario sobre necesidades del uso del idioma inglés para personal docente y estudiantes de la carrera de Terapia Física de la UCR. Researchers' own elaboration.

Table 4 shows the preferred activities that the participants want to focus on when using English. Since there were multiple different answers for all the activities, the answers were combined based on the total of times that the participants selected them as their first, second and third preferred activity (top 3). For example, "Participate in conversations" was selected 5 times as first, 2 times as second, and 1 time as third preferred activity, thus giving it an 8 in the scale. The selected activities by the participants suggest an incline for speaking and listening skills. The three activities that the participants want to emphasize the most are activities in which they have the opportunity to pronounce words correctly, participate in conversations related to their profession, as well as speak with patients orally. In light of these insights, the need to teach the participants how to develop a variety of speaking skills is apparent. The majority of the participants' responses pointed to their interest in taking part in speaking and listening activities; however, there is also an interest in giving oral presentations and reading activities.

Based on the information gathered through the instruments, the team encountered an interesting variety of self-perceived proficiency levels, academic and job-related needs, and wants in the group of candidate students from the Physical Therapy Department at UCR. Interestingly, half of the participants have had a fair amount of previous experience with the English language, while the other half of the group have little or no experience. The majority of the participants reported that they have between a beginner and intermediate proficiency level. This implies that the student-teachers needed to make careful decisions about the topics and activities to be implemented for the course design to fulfill this variety in proficiency levels.

Regarding the needs and wants from the participants, it can be observed that they also varied in the use of the target language. There was a clear difference between their current needs and their wants in the use of English. According to their responses and the opinion from the stakeholder, the participants mostly use the target language to read academic articles and to listen to conferences or videos about medical treatments and conditions. However, it is noticeable that the participants significantly prefer to take part in activities where they can use and improve their speaking skills, listening skills and pronunciation. This wide variety of answers obtained from the participants' responses provided more insightful and useful data for the course design, such as the relevance of including more spoken English interaction and conversations. Similarly, the preference for participating in activities like games, role-plays, class discussions and relating words with pictures where they can put into practice the lesson's content was noticed. These last aspects gathered from the Needs Analysis were considered by the team to be the ones that impacted the most on the future design of the course.

Diagnostic Test Design

This section describes the design and administration process of the diagnostic test to the target population in order to identify their English proficiency levels. This population consisted of instructors and students of the Physical Therapy major at UCR.

Test Administration Issues

To obtain the results from the participants' English proficiency level, the diagnostic test was divided into four sections, each section focused on assessing one of the four macro skills of reading, writing, listening, and speaking. This was

done to obtain information from the participants' current English proficiency level in all skills since it was noticed in the needs analysis that the participants engage in a variety of activities using all four macro skills at some point. Due to broad limitations in the participants' availability, the tests had to be administered both in pairs and individually over a span of several days and at different times of the day. Nonetheless, the Practicum team prepared and organized all materials and procedures of the diagnostic tests in order to ensure the same conditions and time allotted to every participant when taking the tests. Additionally, the diagnostic tests were planned to be administered virtually via Zoom due to the convenience of accessibility to the platform for both testers and the participants.

The diagnostic test tasks were planned and developed by the team to assess the students' performance in the intended skills (reading, writing, listening, speaking) and estimate their English proficiency level based on their outcomes. Also, each section was timed independently according to the length and difficulty of the tasks. The four sections of the diagnostic test were assessed by the team using a different rubric for each skill adapted from the ACTFL guidelines. These rubrics were created to assess the tasks which were developed following the responses from the Needs Analysis.

Principles of Validity and Reliability

The design of the diagnostic test was based on the principles of validity and reliability. Validity refers to the extent to which a test measures what it intends to measure (Coombe et al., 2007, p. 22). As indicated in the Needs Analysis questionnaire, the participating students stated current and future needs to show understanding of listening and written texts in the forms of academic articles and

educational videos, and to interact with colleagues to discuss treatments and establish partnerships. For the latter reason, the reading section of the diagnostic test was designed to observe the students' abilities to comprehend academic articles in the target language. This section assessed a sample of the contents to be taught in Unit 1 (reading academic articles) using a format familiar to a task the students perform on a daily basis.

For the reading test, the participants had to answer 8 comprehension questions consisting of looking for facts, guessing the meaning of specific vocabulary from context, and inferring information from a text about pain management. These types of questions were selected since they replicate the kind of reading tasks that the participants have to perform according to their responses in the NA. To answer these questions, the participants had to read for the purpose of locating and extracting specific information, guessing the meaning of words from context, as well as drawing inferences from the text. This reading test complied with the principle of validity since the participants frequently read academic articles in English to learn about new treatments and techniques for pain management. The questions for this reading section are considered valid since they reproduce the type of tasks that physical therapists perform when reading for useful information in academic articles about new treatments and pain management.

Similarly, for the listening section the participants had to answer 5 comprehension questions after listening to a 2-minute audio about a treatment to reduce chronic pain. This listening section was also founded on the principle of content validity because the audio and types of items selected for this test were useful resources to measure the learners' linguistic competence in listening

16

comprehension according to the listening tasks that the participants engage in their work as stated in the NA. Based on the participants' responses, they occasionally participate in conferences in which they have to listen to speakers describe the newest treatments, procedures, and technologies in the field of physical therapy. The questions from the listening section are equivalent to the tasks they perform when attending these conferences where they need to pay attention to technical vocabulary, identify specific details, and make inferences from the information presented at those conferences.

The speaking section evaluated the students' abilities to interact with fellow colleagues by using skills to introduce themselves, exchange contact information, ask and answer questions about professional and academic backgrounds, and establish partnerships for future collaborations in research, as found in the NA. These competences are highly needed by the participating students as stated by the main stakeholder during the semi-structured interview, claiming that the Physical Therapy program often collaborates at workshops and conferences with universities abroad. Thus, the speaking section of the diagnostic test is valid, fair, and useful for the students since it involves the participants in a situation where they have to engage in small-talk with peers when invited to attend those academic scenarios. For this speaking section, the participants had to introduce themselves, talk about their academic and professional backgrounds and interests, as well as provide reasons for attending the simulated conference. As mentioned before, these are specific tasks in which physical therapists have to engage when attending these types of conferences. In conclusion, the different sections of the diagnostic test (reading, writing, listening, and speaking) are considered valid since

they reflect the academic and real-life areas that the participants need to engage when interacting with the English language.

In the same way, the design of the diagnostic test was also guided by the principle of reliability. Reliability refers to the consistency of test results, which means that a test administered to the same group of examinees should provide similar results regardless of the time and place they take the test (Coombe et al., 2007, p. 23). To account for reliability, the student teachers provided the same amount of time, materials, and conditions to every participant to complete all the sections (reading, writing, listening, and speaking) of the diagnostic test. The reading, writing, and listening sections were designed to be completed individually by the participants, whereas the speaking section was designed to be performed in pairs. However, due to differences in availability from the participants to take the test, some participants had to complete the speaking section individually. In the cases where the participants took the test individually, the student teacher in charge of administering the test took the role of the speaking partner to assist the solo participants to perform the speaking section of the test. This was done to ensure the same conditions for every participant in all sections of the diagnostic test. All the speaking tests were performed virtually via Zoom, and they were recorded for later evaluation and scoring of the participants. In the tests where the participants had to interact with the teacher, the teacher only took the role of asking questions and making follow up comments in the conversation. No evaluation or note-taking were done while performing with the participants to avoid reliability issues. Instead, the recordings were evaluated and scored using the specific rubric for the speaking part.

Similarly, the student teachers also aimed at achieving interrater reliability during the assessment process to ensure a consistent evaluation for the writing and speaking tests. Interrater reliability refers to the process of rating or classifying the same subjects or objects by different raters separately. Similar results obtained from the raters in this process reflect a high interrater reliability, which means that the ratings are consistent and not influenced by the rater's interpretation (Gwet, 2014, p.4). To achieve interrater reliability for the scoring of the writing and speaking tests, the student teachers assessed and compared a sample of four of the participants' scores from the tests, two from the writing test and two from the speaking test, and the sample was selected randomly from all the participants' tests. The student-teachers scored the participants based on the parameters established in the rubrics to minimize subjectivity in the evaluation process. Each of the rubrics for assessing writing and speaking provide clear descriptors with a respective score for proficiency level based on the students' performance in the tests. The participants' performance was scored based on the descriptors in the rubrics. The results from the tests compared by the student teachers were consistent, providing a variation of a maximum of two points in the final scores, thus pointing to a reliable calibration in the scoring process based on similar interpretations of the rubric descriptors. Calibration is a process used to control rater performance in the scoring process in which raters determine specific and accurate categories for scoring (Wendler et al., 2019). Having obtained a consistent calibration for the scores of the sample tests, the student teachers proceeded with the evaluation process for the remaining participants' performances of the speaking and writing tests. Based on the rubrics' scoring

calibration used to assess the writing and speaking tests, the results showed to be consistent, and thus reliable.

Macro Skills

The first part of the diagnostic test was the reading part. This section evaluated the participants' ability to comprehend a short text about pain management by completing 8 comprehension questions, each item with increased difficulty and reflecting the expected abilities at the different proficiency levels in the rubric. This was considered by the team to provide an accurate measurement for reading abilities if the participants either succeeded or not in such items. The participants had 20 minutes to complete this task; the time allotted was also considered appropriate according to the difficulty and length of the reading task.

For the writing section, the participants had 30 minutes to read again the previous text about pain management, and later write a short summary to introduce the topic to a fresh student. The team decided to recycle the text from the reading part since it is used for a different outcome, and it gives the participants the opportunity to be better prepared and focus on the task of summarizing the text, without spending unnecessary time on dealing with new vocabulary, especially in the case of potential beginners.

The listening section consisted of a 2-minute audio describing a medical technique and a task in which the participants had to understand and identify specific details as well as make inferences from the audio in order to complete 5 multiple-choice items. Although the audio may have seemed somewhat challenging, it was also selected so that outcomes in terms of proficiency levels reflected the expected abilities in each case according to the rubric, and that the

answers were not selected randomly just to complete the task. Additionally, this task replicated a regular task that the participants need to perform in their field according to their responses in the Needs Analysis, such as listening to a lecture about a new technique for pain management. For this task, the participants listened to the audio twice, one time to mark the items and the other time to check answers; they had 10 minutes to complete the listening part.

As mentioned before, the speaking section was applied both in pairs and individually, due to limitations in the participants' availability. However, the testers played the role of a speaking partner for the individual tests in order to provide similar conditions for all participants. For the speaking part, the participants had 5 minutes to individually prepare for a conversation about attending a Physical Therapy conference based on a prompt provided to them with their role and relevant information and 5 minutes to role-play it. The speaking rubric emphasizes measuring the participants' pronunciation, fluency and vocabulary, based on the high value that the participants gave to these micro skills in the Needs Analysis.

Constructs behind the Test

In regard to the design of the diagnostic test, the listening and reading comprehension macro skills were assessed by having the students choose the best option from a multiple-choice exercise. For the listening part, there were a total of five items. The team constructed this part of the test in this manner because the authentic text was under a minute and a half long, yet full of technical vocabulary. Thus, the student teachers considered five multiple choice items to be enough since the Physical Therapy (PT) students had to cope with two challenging tasks: understanding what the medical procedure was about and thinking about the best answer to complete each item. For the reading part, there were a total of eight items ranked from the most basic to the most advanced comprehension skills based on the expected abilities at the different proficiency levels. In other words, the higher the item number (1-8) the more difficult the question. The authentic text consisted of three paragraphs, so eight was considered a suitable number of items to test the PT students not only on reading comprehension, but also in terms of inferences, vocabulary, and sentence insertion. For the other two macro skills (speaking and writing), PT students had to fulfill the performance criteria in specific rubrics created to evaluate their oral and writing production.

Task Design in terms of Proficiency Levels

Concerning how the tasks were designed in terms of proficiency levels, for the speaking macro skills, the team expected the PT students to be able to communicate short messages on everyday topics through the use of isolated words and phrases that have been memorized or recalled. Students were expected to have a novice level according to the American Council on the Teaching of Foreign Languages (ACTFL) based on the preliminary data obtained in the needs analysis stage, indicating that the participants hardly ever use English to communicate in spoken language with fellow colleagues. As dictated by the Needs Analysis, for the writing and reading macro skills, the team had the assumption that the PT students were going to be able to understand texts that convey basic information, comprehend some connected paragraphs with occasional gaps in understanding due to a limited knowledge of the vocabulary, structures, and writing conventions of the language, meet practical writing needs, communicate simple facts and ideas on topics of personal interest and social needs. In other words, the PT students were expected to have an intermediate level for both reading and writing according to the ACTFL because they have to read different texts and extract the most relevant information for their professional practices.

For the listening macro skill, the student teachers expected the PT students to have a range of proficiency levels; for example, some able to understand simple sentence-length speech, and some others able to derive substantial meaning from connected texts understood by advanced-level listeners, but with some gaps in understanding due to a limited knowledge of the vocabulary and structures of the spoken language. As well as for the previous two macro skills, the PT students were also believed to have an intermediate listening level according to the ACTFL. Recalling the NA results and the interviews with the main stake-holder, watching videos about the most novel techniques in PT is a task the students carry out on a daily basis, so they should have some listening comprehension skills.

Types of Rubrics Used for Assessing Speaking and Writing

Two out of the four macro skills needed rubrics to be assessed. Thus, the team constructed two analytic rubrics for each because this type of rubric provides more detailed outcomes of a student's performance, his or her strengths and weaknesses. First, for the writing macro skill, the rubric was designed to evaluate the PT students in terms of grammar, content, word choice (vocabulary), organization, and mechanics, with scores in each criterion ranging from excellent (4 points obtained) to poor (1 point obtained). Second, for the speaking macro skill, the rubric addressed grammar, content and vocabulary, fluency, and pronunciation elements. In this rubric, the score ranged from 5 (no mistakes) to 1 (heavy dependence on L1), with the exception of content and vocabulary which were

allotted 10 points since they evaluated two related elements in one. The team carefully checked each element in the rubric in order to guarantee that there would not be an overlap between constructs (see Appendix E).

Types of Parameters Used for Assessing Reading and Listening

For the reading and listening macro skills, CEFR or ACTFL guidelines could be adopted or adapted from. In the case of this project, the team used ACTFL guidelines as the basis for the rubric for both macro skills. Following the rubric, the TP students were divided into three proficiency levels: novice, intermediate, and advanced. Based on the corresponding descriptors in the ACTFL guidelines, adapted descriptors were planned. According to the adapted rubric, in reading, novice readers are able to understand key words and cognates, and highly contextualized phrases. Intermediate readers can understand information conveyed in simple, predictable, loosely connected texts by heavily relying on contextual clues. Advanced readers can understand the main idea and supporting details of authentic narrative and descriptive texts. They are also able to compensate for limitations in their lexical and structural knowledge by using contextual clues.

In listening, novice listeners can understand key words, cognates, and expressions that are highly contextualized and highly predictable. Intermediate listeners can understand information conveyed in simple, sentence-length speech on familiar or everyday topics by heavily relying on redundancy, restatement, paraphrasing, and contextual clues. Advanced listeners can understand the main ideas and most supporting details in connected discourse on a variety of general interest topics. They are also able to compensate for limitations in their lexical and structural control of the language by using real-world knowledge and contextual clues. The team selected ACTFL guidelines to assess the PT students' macro skills proficiency because they were created with the purpose of evaluating language ability functionality, and the descriptors for each range (novice-superior) truly help to explain what an individual can and cannot do with language at each level, regardless of where, when, or how the language was acquired.

Diagnostic Test Results

Ten out of the twelve participating students took their diagnostic test in the last week of May, 2022. As expected, the students' proficiency levels widely vary since their scores range from novice to advanced per macro skill (listening, reading, speaking, and writing).

Table 5

Participating Students' Speaking Proficiency Results according to the Diagnostic Test

Suggested proficiency level	Number of participants
Advanced	2
High intermediate	2
Low intermediate	5
Novice	1

Note. N= 10. Diagnostic Speaking Test. Researchers' own elaboration.

To begin with, the results of the diagnostic test revealed that for the speaking macro skill there were 2 advanced speakers who could perfectly

complete the task for the role-play with almost no errors in the rubric elements. There were 2 high intermediate speakers who committed a few errors in terms of grammar and word choice. Moreover, 5 participating students were unable to completely fulfill the task because they ignored some of the points in the role-play card, possibly due to some gaps in their oral skills. Those students were placed as low intermediate speakers. The remaining student said the requested information in the form of incomplete statements and highly resorting to L1, so this student was considered to be a novice speaker. The latter results reveal that more than half of the students can handle a limited number of basic communicative tasks by engaging in straightforward conversations where the interaction is restricted to some exchanges of predictable topics related to personal information, daily activities, personal preferences, and some immediate needs, according to the ACTFL and the test results. At the moment, 60% of the TP cannot yet communicate information on topics of community, national, or international interest, as well as social situations with unexpected complications. Thus, these results corroborate what the participant students asserted in their NA questionnaire, where they indicated there was an important need to develop their spoken communication skills.

Table 6

Participant Students' Listening Proficiency Results according to the Diagnostic Test

Suggested proficiency level	Number of participants		
Advanced	1		

Intermediate	7
Novice	2

Note. N= 10. Diagnostic Listening Test. Researchers' own elaboration.

Second, in terms of listening comprehension, out of the 10 students, it was found that 1 student obtained a perfect score in this task, 7 participants were able to extract the main idea and some supporting details of a short listening passage for a technique to manage pain, while the remaining 2 students obtained two or fewer correct answers. As mentioned before in this paper, the recording was guite challenging for the students since it contained several technical words to describe the technique. The items in which the students had to identify the main and supporting ideas of the listening passage were selected correctly by most of the learners. This means that 70% of the participants are able to comprehend messages found in highly familiar everyday contexts in a controlled listening environment where they listen to what they may expect to listen based on the items in the listening tasks and in accordance with the ACTFL. Nonetheless, the items in which the students had to infer or derive an answer using the context of the listening passage were selected incorrectly by most of the learners. This implies that almost all of the students cannot yet compensate for limitations in their lexical and structural control of the language or derive meaning from oral texts at higher levels. Therefore, the design of the course must be oriented toward the comprehension of authentic physiotherapy texts, which are often characterized by the use of specialized language, abilities to detect cues in texts to infer meaning, and strategies to comprehend a text when it exceeds the students' knowledge.

Table 7

Suggested proficiency level	Number of participants
Advanced	2
Intermediate	7
Novice	1

Participant Students' Reading Proficiency Results according to the Diagnostic Test

Note. N= 10. Diagnostic Reading Test. Researchers' own elaboration.

Third, Table 7 displays the participants' scores in the reading section of the diagnostic test. Reading comprehension seems to be the macro skill with the highest proficiency level among the participating students. As can be seen, there were 2 participants with 7 or 8 correct answers, so they were categorized as advanced readers. It was also found that 7 students reached an intermediate level with 4 to 6 correct answers. Last, the only novice reader was a student who obtained 3 or fewer correct answers. The items for reading comprehension (1-5) were selected correctly by most of the students. Some were able to choose the correct synonyms of the words in bold, and some others correctly inserted the missing sentence in the text. Hence, these outcomes suggest that 70% of the students can most easily understand information if the format of the text is familiar to them, but they are not able to fully understand very detailed texts in terms of signposting and adverbial clauses of time based on the items in the reading tasks and in accordance with the ACTFL. For the latter reason, the team aims at training the participants to have independence in their ability to read subject matter that is

new to them, so they can have sufficient control of standard linguistic conventions to understand sequencing, time frames, and chronology.

Table 8

Participant Students' Writing Proficiency Results according to the Diagnostic Test

Suggested proficiency level	Number of participants
Advanced	0
High intermediate	4
Low intermediate	5
Novice	1

Note. N= 10. Diagnostic Writing Test. Researchers' own elaboration.

Fourth, Table 8 shows the participants' scores in the writing section of the diagnostic test. Writing was the only macro skill in which there were no advanced students. As can be seen, 4 students obtained a high intermediate level score, 5 obtained a low intermediate level score, and the other student was a novice writer. Half of the students are characterized by the ability to meet practical writing needs, such as simple messages and letters, requests for information, and notes. They primarily write in the simple present tense by using basic vocabulary and structures to express meaning that is mostly comprehensible. Based on the rubric and the analysis of the answers obtained, 40% of them can write simple summaries related to work and/or school tasks. They can often but not always write compositions of paragraph length, and they typically contain some evidence of breakdown in one or more features of the Advanced level (according to the ACTFL). The results

obtained in the writing task and the participating students' NA responses showed that writing was not a common task for them to perform at their jobs. The participant students mostly employ this macro skill to write and reply to correspondence, yet it is extremely valuable to teach them how to summarize key information from written texts. Furthermore, it is expected that with the design of the course the participants can be able to narrate and describe in the major time frames of past, present, and future, using paraphrasing, the most frequently used structures, generic vocabulary, and elaboration to provide clarity.

Implications for Course Design

The rationale and results of this paper had direct implications for the design of the course for Physical Therapy instructors and students. In regard to the student sample, it is important to highlight that up to the submission deadline 12 out of the 15 interested participants answered the NA questionnaire. Also, from the 12 participants surveyed, 2 participants were not able to take their diagnostic test. Furthermore, it was virtually impossible to reschedule these students' appointments because the submission deadline for the project was a week after administering the diagnostic test. Nonetheless, the team was able to collect and document the information of most of the participating students, so the available data was expected to allow the student teachers to address the overall population's language learning needs in the course design.

Overall, most students were placed on an intermediate proficiency level for the 4 macro skills. The novice population in this group was very small, just like the advanced one. This implies that the team could work with a variety of tasks that range from low intermediate to high intermediate. Low intermediate proficiency assignments may be challenging for 1 or 2 novice students in the group. Nevertheless, by having students work collaboratively in pairs and small groups, these novice students should be able to benefit from their partners, and for their more advanced counterparts, it should be a great opportunity to consolidate their mastery of a given topic. High intermediate proficiency tasks may be less difficult for all the students toward the end of the course once they have had more contact with the target language.

Chapter II. Syllabus Design



The course logo offers a representation of one of the many tasks that physical therapists perform at their jobs. In this case, the portrayed therapist is helping a patient while interacting in English. The aspect of the English language here is added due to the relevance of the goals of the present course.

Course Description

This course was designed and taught by two students enrolled in the Practicum from the Master's Program in Teaching English as a Foreign Language at the University of Costa Rica. The population of this course consisted of instructors and students of the Physical Therapy major at the University of Costa Rica. Approximately, fifteen students were expected to participate. The purpose of the course was to aid students improve their English language skills by providing a variety of real-life tasks related to their field of expertise. Such tasks were provided based on their current and future needs in the field of physical therapy, which were identified following a needs analysis process. Regarding the participants' English proficiency level, the team encountered a considerable variety of proficiency levels through a diagnostic test, ranging from beginners to advanced students in almost all four macro skills. Nonetheless, the overall average proficiency level for this population was estimated to be an intermediate level.

The course was taught on Tuesdays once a week and during a time span of 14 weeks throughout the second semester of 2022. Each class consisted of a synchronous session of about 2 hours, taught from 5:00pm to 6:50pm. Furthermore, there was asynchronous work from 7:00pm to 8:00pm. The participating students were expected to connect to every online class, and their English language progress was evaluated in every unit of the course. In addition, the course was taught virtually using the Zoom platform since it is currently the platform used by the university. English for Physical Therapy was designed to follow the components of an ESP course and the Task-based Language Teaching approach (TBLT). Thus, the course included a variety of communicative activities and a focus on conveying meaning through the completion of different spoken and written tasks. The tasks entailed in the syllabus reflect frequent real-life physical therapy tasks in which the participating students need to use English in their field. The course was divided into three different units following a teaching method based on the four English macro skills. All three units covered all macro skills in some way, but each unit focused on developing a specific skill, as dictated by the needs analysis.

Statement of Goals and Objectives

Unit 1: Reading academic articles

Goal: By the end of this unit, instructors and students of the Physical Therapy major at UCR will be able to demonstrate comprehension of academic articles by analyzing abstracts and key article sections (methodology, procedures, and results) and accurately selecting specific information relevant to their professional practice.

General Objectives:

1. By the end of the lesson, students will be able to effectively summarize specific key information from the abstract of an academic text by scanning for the key expressions and completing an outline.

2. By the end of the lesson, students will be able to successfully identify relevant specific information in an academic article by skimming and scanning the text and highlighting key phrases and terms.

3. By the end of the lesson, students will be able to accurately extract key specific information about the methodology, procedures, and results of a study by answering comprehension questions and comparing the answers with classmates.

Unit 2: Interacting with colleagues as conference attendees

Goal: By the end of this unit, students and instructors of the Physical Therapy program at UCR will be able to successfully introduce themselves to colleagues, talk about their professional and academic backgrounds and interests, and propose collaborations at field-related conferences.

General Objectives:

1. By the end of the lesson, students will be able to effectively introduce themselves by exchanging greetings and personal information and asking followup questions in conversations at conferences for physical therapy professionals and students.

2. By the end of the lesson, students will be able to accurately describe their occupations, qualifications, and work experience by exchanging information about their professional and academic backgrounds and interests with fellow colleagues at conferences for physical therapy professionals and students.

3. By the end of the lesson, students will be able to successfully suggest an academic or professional collaboration by expressing interest, exploring options based on their interests, and exchanging contact information for future collaboration at conferences for physical therapy professionals and students.

Unit 3: Watching educational videos

Goal: By the end of this unit, students and instructors of the Physical Therapy program at UCR will be able to effectively demonstrate comprehension of field-related educational videos by identifying main and supporting ideas, answering comprehension questions, exchanging key information, taking notes, and reporting findings.

General Objectives:

1. By the end of the lesson, students will be able to show understanding of an educational video about a therapy by accurately identifying discourse markers to help them locate the main and supporting ideas.

2. By the end of the lesson, students will be able to successfully demonstrate understanding of a physical therapy treatment in an educational video by taking notes and correctly reporting key information to a classmate orally.

3. By the end of the lesson, students will be able to successfully demonstrate understanding of a physical therapy treatment in an educational video by extracting the main and supporting ideas in the form of a video-comprehension quiz.

Methodology

The course was taught as a learner-centered ESP course with authentic materials that reflect real-life situations that the students may face in their field of physical therapy when using the English language. The class activities consisted of tasks following the TBLT approach, and the team instructors incorporated authentic materials such as academic texts, videos, audios, and a variety of handouts for students to complete the different tasks in the syllabus. In class, the tasks were carried out as individual activities, group activities, and whole class activities. The tasks were divided into three units, and each unit focused on a particular set of needs and wants identified through the needs analysis process, addressing specific English macro and micro skills. As mentioned before, the course was taught online and took advantage of a variety of technological tools to develop the course and create the materials. The platform Zoom was used to teach the classes alongside any other website or app that the instructors consider appropriate to use during each class. The class instructors guided the class, taught the contents, and provided the materials and feedback to the students during all synchronous sessions. The course also included asynchronous work, for which the student teachers also prepared the necessary materials and feedback.

36

Approach

As stated before, this course follows the Task-Based Language Teaching approach along with the focus on the students' ESP needs. According to Richards and Rodgers (2001) the task-based approach refers to "the use of task as the unit core of planning and instruction in language teaching" (p.223). For the authors, this kind of teaching approach provides learners with plenty of opportunities to process and activate language learning. Moreover, the TBLT approach appropriately coincides with the characteristics of English for Specific Purposes (ESP) teaching methods. The TBLT cycle is divided into three stages, the pre-task, the main task, and the post-task. For this course, the pre-tasks are intended for activating schema and teaching new vocabulary to students in preparation for the main task. In the main task, students engage in the most relevant activities that reflect the main objective of the class, and the post-task gives them an opportunity to reflect on task performance, clarify doubts, and receive feedback. All three stages aim to provide learners with language exposure and the opportunities to use and practice the language while producing a meaningful outcome.

The TBLT approach seeks to provide students with plenty of language exposure in real-life contexts, and relevant opportunities for communicative practice to produce a meaningful outcome based on clear goals. Furthermore, the task-based approach gives teachers and learners the opportunity to work with engaging, contextualized, and motivating materials and class activities. According to Dudley-Evans & St John (1998) teachers can stimulate and motivate students by appealing and connecting to the learners' reality, including challenging and engaging activities with meaningful outcomes while encouraging fun and creativity from learners. Hence, motivation is a key aspect to take into account in classes to achieve meaningful learning. In addition, the TBLT approach provides teachers the chance to select the most useful content and authentic materials according to the students' needs, which is vital in developing an ESP course.

Classroom Dynamics

Regarding class dynamics, the instructors carried out a team-teaching strategy to teach in the course. Each week, one instructor was intended to take the role of the teacher in charge or lead teacher, while the other took the role of assistant teacher, and each week, the instructors switched roles. For this course, the lead teacher took a more active role during the synchronous sessions; this instructor guided the class and was in charge of monitoring the students' work and progress, delivering materials, taking notes and checking on students' performance, providing examples and modeling conversations, evaluating students, as well as providing feedback and clarifying doubts throughout the sessions. The assistant teacher supported the lead teacher in monitoring class interactions, taking notes and checking students' performance in group activities. Both instructors were committed to help each other taking any role, and in any task if necessary.

Tasks and Techniques and their Rationale

The tasks and activities included in this course were divided and sequenced into three different units that focus on English skills. As defined by Nunan (2004), a task is a piece of work performed in the classroom that involves students in comprehending, interacting, and producing in the target language while focusing on key aspects of the language in order to convey meaning (p.4). In this course, the first unit concerned tasks that involve the reading macroskill, since, as indicated by the participants in the needs analysis, reading academic texts was one of the main reasons they needed English in their field. The tasks in Unit 1 included reading a variety of academic texts where students extracted specific information from different sections and collaborated with classmates to achieve an outcome. In such tasks, students were intended to use the skills of skimming and scanning, predicting information, guessing meaning from context, comparing and contrasting ideas and checking understanding of texts. Although reading is generally an individual activity, many of these tasks involved collaborative work between students in order to complete post-reading activities. As Harmer (2015) mentions, group activities like discussing texts after they have been read not only motivates students, but also helps them to remember and use words and phrases from the text as a natural repetition of that language (p.320).

Unit 2 was centered on the speaking component of the tasks that students are required to accomplish in their field. Based on the needs analysis, these tasks include describing different medical procedures orally, discussing a variety of illnesses, medical conditions and treatments providing diagnosis to patients, and having conversations and role-plays with colleagues and patients in medical and academic settings. For these tasks, the students were meant to employ different strategies such as clarifying information, turn-taking, negotiating meaning, asking and answering questions, and checking for understating.

The tasks proposed in Unit 3 addressed the skills of listening and writing. These tasks included listening to educational videos, identifying new vocabulary, identifying main and supporting ideas, writing summaries, taking notes, answering questions and describing different medical techniques and treatments. For these tasks, the students were expected to employ the strategies of predicting, guessing and providing information from texts, comparing and contrasting ideas, negotiating meaning and clarifying meaning. Overall, the tasks mentioned above serve as the basis for classroom teaching, and they are meant to reflect the students' current and future real-life English needs in their field. Besides, the tasks and activities included by the instructors in this course were sequenced with the aim of moving from less to more difficult while including content related to the students' field, following clear, expected, and achievable outcomes. Although every unit from the course focused on a specific skill, it is worth noting that most tasks integrated different macro skills for the students to complete them. As Harmer (2015) indicates, it makes sense to integrate different skills in the classroom, as we are providing maximum learning opportunities to our learners (p.298).

Role of the Learner

For this course, the students were expected to take the role of active and conscientious participants responsible for their own learning. According to Richards and Rodgers (2001, p. 235), in a TBLT approach learners take three different roles, the role of group participant, the role of monitor, and the role of risk-taker and innovator. As group participants, the students should actively participate in individual and group activities. As monitors, they were expected to employ their own cognitive skills to notice the characteristics and forms of the language, and the way language is used in communication to convey meaning effectively. As risk-takers and innovators, the students should create and interpret messages based on linguistic resources provided by the tasks, and on their prior experience with the

language. Additionally, the students should engage in practice of the language using skills like paraphrasing and restating information, asking for clarification, identifying and guessing specific details, and consulting with other learners depending on the tasks they are involved in. These learners' roles were supported by the materials, class activities and guidance provided by the team instructors.

Role of the Teachers

The student teachers assumed the role of selectors as sequencers of tasks, preparing learners for tasks, and consciousness-raising as described by Richards and Rodgers (2001). As described by Richards and Rodgers (2001), the student teachers selected, created, and sequenced the different tasks in the best possible way considering students' needs, interests and language skill level. Teachers were also expected to help students be ready for tasks by introducing the topics, providing clear instructions, modeling activities, helping learners with vocabulary, and clarifying doubts. Similarly, the teachers helped the learners to notice and think about critical features of the target language by employing a variety of form-focused strategies, and guidance in task procedures. The instructors embraced these roles each week of the course while taking turns as lead teacher and teacher assistant as stated before.

Assessment

The next section emphasizes the evaluative decisions made for the design of this ESP course and their rationale.

Formal and Informal Assessment

For the development of this course, the instructors incorporated different forms of formal and informal assessment. In accordance with Brown (2004),

informal assessment occurs when learners have ample opportunities to "play" with the language in a classroom without being formally evaluated. In other words, students should have the freedom to practice their skills with "no implications for their final grades" (p. 4). Informal assessment can take place at any time during or after any classroom activity or homework assignment. Marginal comments on papers, feedback to a draft of an essay, or advice about how to better pronounce a word are some examples of informal assessment (Brown, 2004, p. 5). In the case of the present ESP course, informal assessment was delivered through a wide range of appropriate feedback techniques. For instance, delayed feedback was sent to students via email or Google Docs to help them improve specific language features after assignments or tasks. In addition, the student teachers highlighted the learners' correct and expected language use by means of praise to motivate them to be active protagonists of their own learning process.

Formal assessment was the other kind of assessment planned for this course. Brown (2004) defines formal assessment as "exercises or procedures specifically designed to tap into a storehouse of skills and knowledge" (p. 6). This means that students had to prepare themselves to show their mastery of the tasks and topics covered in the Units. Thus, for the formal assessment evaluations, students had to perform selected tasks under test conditions in order to obtain a grade in the course.

Formative and Summative Assessment

For the design of this ESP course, the team included formative and summative evaluation. Formative assessment evaluates students in their "process of forming their competencies and skills with the goal of helping them to continue that growth process" (Brown, 2004, p. 6). The key to this process is how the teacher delivers the formative assessment, and how the students internalize feedback on their performance. The main goal of formative assessment is to guide students to reflect on their language skills and become more proficient language users. For the latter reason, the student instructors provided learners with constant feedback to help learners improve their language abilities without the pressure of having to obtain a score.

Parallel to formative assessment, the course also incorporated summative assessment. This can be understood as the type of assessment that aims to measure or summarize what a student has learned by looking back and "taking stock" of how well that student has accomplished the objectives in the course (Brown, 2004, p. 6). Hence, midterm and final tests, and listening quizzes are examples of this type of evaluation, as well as the evaluation of projects.

Assessment Tasks

The following table contains the distribution of the evaluation for this course.

Table 9

Evaluation of the course

Contents	Weight
Unit 1 partial exam: Reading test (midterm)	25%
Unit 2 partial exam: Speaking test (final)	25%
Unit 3 partial exam: Listening quizzes	20% (10% each)

Total

100%

Unit 1 Partial Exam: Reading Test (Midterm). The team administered a summative midterm partial test to assess reading comprehension. The test aimed to evaluate the students' ability to use reading strategies to extract main ideas and supporting details from physical therapy-related excerpts in academic articles. The test measured the students' skills to apply the strategies to answer comprehension questions in the forms of multiple-choice and short answer items. In order to select the best possible texts for this test, the student teachers are going to employ Nuttal's (2008) main criteria for the selection of reading texts for evaluation: suitability of content, exploitability, and readability (p. 170). In Nuttal's words, the text should be appealing for the students to make the task more efficient (p. 170). Furthermore, the text should "develop the students' competence" as readers since learners can learn the language better by focusing on the meaning and purpose of the text (Nuttal, 2008, p. 171). Finally, the text should "assess the right level for the students," which is the reason why the team administered the Needs Analysis (NA) questionnaire (Nuttal, 2008, 174). In order to help learners to comprehend written texts, the student teachers selected the most appropriate texts in terms of length, difficulty, and authenticity.

10%

Unit 2 Partial Exam: Speaking Test (Final). In Unit 2, the students took a summative speaking test to measure their spoken communication skills. For this test, students had to use previously learned vocabulary and expressions to perform a role-play in pairs where they simulated that they were attending an international conference with fellow physical therapists. The goal of the test was to assess students' oral skills to communicate in a real-life situation by engaging in small-talk, exchanging contact information, and establishing professional partnerships. As part of the task, the test evaluated other aspects such as word choice, grammatical structures, content, fluency, and pronunciation. The construction of this speaking test was derived from the evaluative principles of validity, reliability, practicality, and washback described by Bailey in 2005 (p. 21-22). The student teachers believe that this form of evaluation is a valid test because the task goes hand in hand with the contents that were taught and learned during the Unit. Moreover, the test was reliable because the participating students were evaluated under the same conditions and criteria. In regard to the third aspect, there are 12 students in the course, so a 5-minute role-play per pair will require a total of 30 minutes, making it reasonable for time and personnel. Last, washback can be defined as "the effect a test has on teaching and learning" (Bailey, 2005, p. 22). In other words, the test provides insightful data for instructional implications once it has been administered to the students. By taking the 4 principles into consideration for the design of the test, the student teachers ensure to have a positive effect on the students' language development.

Unit 3 Partial Exam: Listening Quizzes. The student teachers prepared two summative partial quizzes to assess video-listening comprehension. Similar to

the reading test, these short exams aimed to evaluate the students' ability to identify main and supporting ideas from physical therapy-related extracts in the form of short educational videos. The quizzes measured the students' capacity to apply the recently learned strategies to answer comprehension questions by means of multiple-choice and fill-in-the-blanks items. Furthermore, these short tests evaluated the vocabulary and grammar structures studied in Unit 3. As found in related research, Helgesen & Brown (2007, p. 18-19) affirm that it is extremely important to keep in mind the evaluative principles of validity, reliability, practicality, and washback described in the previous form of assessment (Unit 2 speaking test). Therefore, the team guarantees that the two quizzes measure the intended constructs, are consistent and practical in their administration, and lead to positive outcomes for students' performance.

Participation. This course was taught in a virtual environment, so it is known by the instructors that the class dynamics might be a little different than in face-to-face classes. For example, students who are affected by their confidence in using the language may be seriously reluctant to engage in oral tasks. This self-perception may also influence their motivation to participate in class. Thus, the team has allotted 10% of the final grade to incentivize students to participate in the sessions. Jacobi (2014) affirms that grades, as part of extrinsic motivation, are recognized to play a significant role in the context of online participation, especially in spoken interactions. The author found that all participants (students and teachers) recognized that "the point system is the primary mode of motivation" (p. 6). Similarly, Castelli and Sarvary (2020) support the previous strategy by proposing to engage students with a participation grade. Hence, graded

participation tends to motivate students to be more interested in the topics in classes because their final course grade depends upon it. Nonetheless, this percentage is not the only reason to prompt students to engage in class tasks. Participation is also a means for instructors to measure how much the students are involved in the topics, and how much they have progressed or fallen behind in their language development. For this reason, the student teachers fostered participation by employing different teaching strategies, such as gamification, authentic reading texts, and memorization of vocabulary lists; these were the most popular class activities chosen by the students in the NA questionnaire.

Final Project: Individual Oral Description about Treatments or **Techniques for Pain Management / to Improve Movement.** The students worked on a summative oral project by giving a presentation to the entire class about a technique of their own choice about techniques for pain management or to improve patients' movement. These presentations were done individually. Aspects such as vocabulary, content, grammar, fluency, and pronunciation were taken into account in the assessment rubric. The team believes that oral presentations are extremely meaningful projects for the students because oratory skills are often overlooked in the medicine field. For example, Nie et al. (2020) point out the importance of teaching medical students how to speak in front of an audience and highlight that this skill becomes a real challenge since "to [their] knowledge, there is scant literature on training medical students in aspects of public speaking" (p. 606). Thus, similar to the authors' conception, the student teachers had also decided to include a project where students have to develop their oral abilities for their future careers as "healers, educators, and leaders" (Nie et al., 2020, p. 606).

For this assignment, students had to use visual aids in the form of a formal presentation to explain what the technique was about and how to administer it to patients. For the presentation of this project, students had to employ previously learned vocabulary, expressions, and aspects of delivery such as appropriate tone of voice, visual contact, body language, and improvisation if needed.

Contents

This course consisted of three units, which were taught in order to meet the students' needs, wants and lacks. Each unit was composed of three objectives with one task each, and the instructors employed a variety of skills, useful language expressions, and strategies as seen below.

Unit 1: Reading academic articles

Goal: By the end of this unit, instructors and students of the Physical Therapy major at UCR will be able to demonstrate comprehension of academic articles by analyzing abstracts and key article sections (methodology, procedures, and results) and accurately selecting specific information relevant to their professional practice.

General Objectives:

1. By the end of the lesson, students will be able to effectively summarize specific key information from the abstract of an academic text by scanning for the key expressions and completing an outline.

2. By the end of the lesson, students will be able to successfully identify relevant specific information in an academic article by skimming and scanning the text and highlighting key phrases and terms.

3. By the end of the lesson, students will be able to accurately extract key specific information about the methodology, procedures, and results of a study by answering comprehension questions and comparing the answers with classmates.

General Objective	Tasks	Skills	Language focus	Strategies	Time allotted
1	Extract key information	R	Grammar	Skimming	1 lesson plan
	about the content of an	S	Present tense	Scanning	
	academic article from	W	E.g.: I think, the main idea is, the text		
	the abstract to use in		focuses on, the abstract highlights.		
	their professional				
	practice.		Vocabulary		
			Acronyms		
			Physical therapy terms		
			General medicine terms		
			Theories of physical movement		
			Pain management terms		
			E.g.: LSD= lateral step-down test		
			Chronic pain: ongoing pain which		
			usually lasts longer than six months.		

			Acute pain: sudden, sharp pain that lasts less than 6 months. E.g.: <i>This is the third</i> <i>time in 6 months that the patient comes</i> <i>to therapy; it's definitely a case of</i> <i>chronic pain.</i>		
2	Read academic articles to find and highlight key phrases and terms relevant to their professional practice.	S	Grammar Present tense to explain facts The technique is about, the author states, the text reflects on, the strategy has to be applied by, Cohesive devices and hedging E.g.: however, also, furthermore, additionally, maybe, probably, certainly, etc. Vocabulary	Skimming Scanning Predicting information Guessing Comparing and contrasting ideas Checking	1 lesson plan

			Acronyms	understanding	
			Physical therapy terms		
			General medicine terms		
			Theories of physical movement		
			Pain management terms		
			E.g.: LSD= lateral step-down test		
			Chronic pain: ongoing pain which		
			usually lasts longer than six months.		
			Acute pain: sudden, sharp pain that lasts		
			less than 6 months. E.g.: This is the third		
			time in 6 months that the patient comes		
			to therapy; it's definitely a case of		
			chronic pain.		
3	Extract key information	R	Grammar	Skimming	1 lesson plan
	about the methodology,		Present tense	Scanning	
	,	_			

procedures, and results	W	E.g.: I believe, the main idea is, the text	Predicting
of a study by identifying		focuses on, the strategy outlines.	information
the main ideas and		Infinitive phrases of purpose	Guessing
supporting details in an		E.g.: This text intends to explain how	Comparing
academic article.		scrambler therapy is more beneficial in	and
		young healthy women.	contrasting
		The main idea of the text is to show	ideas
		The purpose of the article is to provide	Checking
		professionals with	understanding
		Pronunciation:	Getting
		Final -s/-es pronunciation	meaning from
			context
			Taking notes
			Negotiating
			meaning

		Identifying	
		cohesive	
		devices	
		Summarizing	

Unit 2: Interacting with colleagues as conference attendees

Goal: By the end of this unit, students and instructors of the Physical Therapy program at UCR will be able to successfully introduce themselves to colleagues, talk about their professional and academic backgrounds and interests, and propose collaborations at field-related conferences.

General Objectives:

1. By the end of the lesson, students will be able to effectively introduce themselves by exchanging greetings and personal information and asking follow-up questions in conversations at conferences for physical therapy professionals and students.

2. By the end of the lesson, students will be able to accurately describe their occupations, qualifications, and work experience by exchanging information about their professional and academic backgrounds and interests with fellow colleagues at conferences for physical therapy professionals and students.

3. By the end of the lesson, students will be able to successfully suggest an academic or professional collaboration by expressing interest, exploring options based on their interests, and exchanging contact information for future collaboration at conferences for physical therapy professionals and students.

General Objective	Tasks	Skills	Language focus	Strategies	Time
					allotted
1	Describe medical	R	Grammar	Turn taking	1 lesson plan
	procedures and	S	Present tense to explain facts	strategies	
	techniques by	L	The technique is about, the author states	Clarifying	
	discussing illnesses, and		that, the text reflects on, the strategy has	information	
	other medical conditions		to be applied by,	Scanning	
	and treatments.		Passive voice in the present and past	Taking notes	
			E.g.: This technique was first applied in,	Summarizing	
			this procedure is performed by, the	Negotiating	
			patient's pain was controlled by, etc	meaning	
			Auxiliaries in the present and past for	Identifying key	
			yes-no and information questions.	vocabulary	
2	Provide a correct	S	Grammar	Giving	1 lesson plan

diagnosis according to	1	Modal verbs to use cordial expressions,	information
diagnosis according to	L		
the patients' needs by		offer help and make promises.	Asking for
analyzing different		E.g.: can, could, would, should, etc.	information
symptoms and medical		How can I help you? Could you tell me if	Providing
conditions.		this hurts? Would you mind if I examine	instructions
		you? I would be more than glad to help	and
		you.	indications
		Auxiliaries in the present and past for	Clarifying
		yes-no and information questions.	information
		Present tense for sentences and	Checking
		responses	understanding
		E.g.: Yes, it does. No, it doesn't. When	
		did the pain start?	
		Past tense regular and irregular verbs to	
		describe past experiences.	

3	Discuss with colleagues	S	E.g.: I hurt my back when I went biking with my friend. I had the surgery last month. Imperative E.g.: Lie on the bed. Lift your right knee. Breathe, stop, breathe again. Pronunciation Reduced forms with /ə/ Intonation patterns for statements, yes- no questions and information questions Pronunciation of vowel sounds such as: lax u, diagraph, and schwa for modal verbs.	Turn	taking	1 lesson plan
	for establishing new		Present and past tense to introduce	strategi	-	

partnerships by role-	W	oneself, start, continue, and finish a	Clarifying
partiterships by role-	vv		Clamying
playing as conference		conversation	information
attendees in medical and		E.g.: Hello, my name is How are you? I	Giving
academic scenarios.		am a(n), I come from, I study at/I	information
		graduated fromWhat about you? What	Asking for
		are your expectations of the conference?	information
		Yes-no and information questions and	Checking
		answers in present, past, and future.	understanding
		Will to make promises and offers	Negotiating
		Modals of possibility	meaning
		E.g.: I will call you. I might send you an	
		email next week. Will you call me anytime	
		soon?	
		Vocabulary	
		Expressions to exchange contact	

	information, to introduce oneself, start,	
	continue, and finish a conversation.	
	E.g.: I am looking forward to, I would like	
	to discuss about, how feasible is it for you	
	to?, what are your views on?, let's	
	meet again once we've had some time to	
	think, I'll be in touch again soon with more	
	details.	

Unit 3: Watching educational videos

Goal: By the end of this unit, students and instructors of the Physical Therapy program at UCR will be able to effectively demonstrate comprehension of field-related educational videos by identifying main and supporting ideas, answering comprehension questions, exchanging key information, taking notes, and reporting findings.

General Objectives:

1. By the end of the lesson, students will be able to show understanding of an educational video about a therapy by accurately identifying discourse markers to help them locate the main and supporting ideas.

2. By the end of the lesson, students will be able to successfully demonstrate understanding of a physical therapy treatment in an educational video by taking notes and correctly reporting key information to a classmate orally.

3. By the end of the lesson, students will be able to successfully demonstrate understanding of a physical therapy treatment in an educational video by extracting the main and supporting ideas in the form of a video-comprehension quiz.

General Objective	Tasks		Skills	Language focus	Strategies	Time
						allotted
1	Identify	relevant	L	Grammar	Predicting	1 lesson plan
	technical	vocabulary,	W	Present tense	information	
	and the	main and	S	E.g.: I think, the main idea is, the text	Guessing	
	supporting	ideas of a		focuses on	Comparing	
	lecture.			Infinitives of purpose	and	
				E.g.: This text intends to show, the main	contrasting	
				idea of the text is to, the purpose of the	ideas	
				text is to	Checking	
				Cohesive devices	understanding	
				E.g.: however, also, furthermore,	Taking notes	
				additionally, etc.	Negotiating	
				Vocabulary	meaning	
				Acronyms	Identifying	

		Physical therapy terms General medicine terms Theories of physical movement Pain management terms	cohesive devices	
of the i	ate the usefulness information from a elated lecture.	Grammar Present Tense to express ideas, agree or disagree E.g.: <i>I think that, I disagree, I agree, I</i> <i>believe, etc.</i> Prepositional phrases E.g.: <i>in my opinion, in my point of view,</i> <i>related to, etc.</i>	Predicting information Guessing Comparing and contrasting ideas Taking notes Clarifying meaning	1 lesson plan

				meaning Checking understanding	
3	Discuss with classmates	L	Grammar	Comparing	1 lesson plan
	to describe and promote	W	Present tense to explain facts	and	
	a pain management	S	Passive voice in the present and past	contrasting	
	procedure or treatment.		E.g.: This technique was first applied in,	ideas	
			this procedure is performed by, the	Taking notes	
			patient's pain was controlled by, etc	Clarifying	
			Auxiliaries in the present and past for	meaning	
			yes-no and information questions.	Negotiating	
			Will to make predictions	meaning	
			Modals of possibility	Checking	
			E.g.: This technique might help you	understanding	
			relieve the pain on your upper back.	Giving	

	Vocabulary	information
	Pain management terms	Asking for
		information

Conclusion

The main objective of this course was to help Physical Therapy instructors and students to develop comprehensive language skills needed to complete the target tasks in their profession and subject research. For the process of the course design, the student teachers were able to consider the learners' needs and wants since the administration of the NA questionnaire and interviews with the primary stakeholder. The final version of the course design is presented in this paper in terms of goals, objectives, syllabus, methods, organization and assessment. English for Physical Therapy was designed with the aim to introduce the elemental skills of demonstrating comprehension of written and listening texts to students, and equip them with skills to infer and understand meaning, higher English speaking skills and independent learning strategies. The course was mainly arranged by field-related topics, with an introduction to technical vocabulary and unfamiliar structures at the beginning of each unit. For the main tasks, the student teachers designed a subdivision of language skills to be trained and evaluated in class. The course was taught by encouraging students to actively participate in the lesson tasks. Finally, the assessment of the course was partly formative by focusing on the students' learning process, and summative by measuring to what extent the participating students can employ the knowledge and skills learned during each unit.

Chapter III: Literature Review

As stated in the analysis of the results of the diagnostic test, the course *English for Physical Therapy* was composed of students of different proficiency levels. The aim of this literature review was to identify teaching and learning strategies to foster oral communication skills in a group of Physical Therapy (PT) students and instructors with different language proficiency levels in an English for Specific Purposes (ESP) course. For this reason, the team raised the following main research question and two sub-research questions.

Main research question:

 What teaching and learning speaking strategies should be used to foster speaking skills in a group of physical therapy students and instructors with different language proficiency levels in an ESP course?

Sub-research questions:

- What teaching and learning speaking strategies can help a population of multi-level proficiency students from the Physical Therapy field to develop speaking skills to interact with colleagues in an ESP course according to the literature?
- How effective are strategies identified in related literature for teaching speaking skills to a group of physical therapy students and instructors with different language proficiency levels in an ESP course based on the studentteachers' observations, the supervisors' feedback, and the students' opinions?

Planning communicative activities similar to those of a general English as a Foreign Language (EFL) course can help ESP learners to develop speaking skills, with the difference that the tasks must be closely related to the topics identified in the Needs Analysis (NA). In fact, the nature of an ESP course resides in making the students active participants in the learning process by taking into account their field-related needs and wants. Thus, the kinds of strategies that should be implemented to improve the students' oral skills in an ESP course are more negotiable and open for discussion than those in many general EFL courses where the teacher is usually fully responsible for making decisions about classroom dynamics, on occasions bound by a strictly closed curriculum. To respond to the research questions and support pedagogical decisions with theoretical and evidence-based principles, the team examined research on strategies for fostering the speaking skills of students with different proficiency levels in an ESP course for PT.

Four main topics were selected to answer the research questions: critical and reflective thinking, public speaking, interactive activities, and classroom management techniques. These specific topics appropriately correspond to the students' speaking needs and wants identified through the preliminary needs analysis. Based on the overall schedule (one weekly lesson over 15 weeks) and time available in each class to complete the course (three hours of instruction), the team believes that the four strategies are sufficient to design appropriate tasks to cover and foster the students' speaking skills during that period. Similarly, due to the online ESP-Task-Based Language Teaching (TBLT) nature of the course, the strategies can be properly adjusted to adapt the structure, difficulty, and sequencing of tasks, as well as to the number of students and their various proficiency levels. Correspondingly, a systematic summary, evaluation, and synthesis of the selected sources is presented next.

Critical and Reflective Thinking

To help learners gain critical and reflective thinking skills in the target language in an ESP classroom, three sub-topics were identified in the literature: high order thinking skills (HOTS), techniques to promote self-awareness, and systematic implementation of oral tasks. All of the previous techniques aim at developing the learners' speaking abilities regardless of their proficiency levels.

High-order Thinking Skills (HOTS)

Studies about high-order thinking skills (HOTS) in speaking have been conducted by several researchers. HOTS focus on students' speaking achievement resulting from the quality of questions raised by teachers. Questions that involve high-order thinking can improve learners' critical thinking and speaking skills regardless of their English proficiency level according to Akatsuya (2019, p. 59). The author investigated the use of HOTS questions with the purpose of fostering students' awareness of critical thinking and found that learners are able to gain speaking skills by answering those questions. For giving learners the opportunity to think critically, the findings suggest implementing class activities, such as discussions, brainstorming, persuasive speeches, presentations, and writing (p. 63). Akatsuya also states that receiving feedback or objective criticism from others can aid in reconstructing ideas and thoughts in the learning process.

Based on Akatsuya's (2019) conclusions, activities that involve HOTS can be implemented in the form of statements or questions raised by instructors requiring students to think critically and express their opinions on given topics or to solve a specific problem. These strategies can be employed either individually or in groups in the form of group discussions or by reporting information. In addition, the nature of HOTS tasks can foster speaking skills by giving students plenty of opportunities to produce in the target language. While thinking and speaking, students have the chance to notice concrete aspects of the language, such as pronunciation or vocabulary, through attention to their own or other classmates' production. Also, when working with HOTS, students have the opportunity to receive feedback on their performance in the language either from the instructor or from other classmates, and thus, improve their speaking skills.

In the same vein, a similar study by Syafryadin et al. (2022) showed that most students had positive perceptions on answering high-order thinking skills (HOTS) questions because they perceived them as a means to train their brain "to think critically, creatively and innovatively" (p. 477). Likewise, Riza and Setyarini (2020) researched ways to foster HOTS in speaking by using the flipped classroom technique (p. 252). They found that HOTS in flipped classrooms increase the students' speaking time in the target language. Other studies suggest that HOTS in project-based learning can improve the students' speaking skills and also motivate them to speak in classes with multi-proficiency levels (Pertiwi, 2019; Setiawan, et al., 2020, as cited in Syafryadin et al., 2022, p. 478). The reason for these benefits is that HOTS questions can be used as a means to stimulate students to think critically about topics of their interest, especially in ESP contexts. Raising interesting or controversial questions on highly relevant specific topics can motivate learners to express their opinions and also listen to others' opinions on those topics by having a fair exchange of ideas resulting in proper negotiation of meaning. Additionally, HOTS questions can be used with almost any content of a course, and the level of difficulty can be adapted to fit different students' proficiency levels, which makes them a highly practical type of task.

Based on the previous studies, HOTS tasks performed by students in the EFL context can be expected to foster critical thinking and speaking skills in the short and medium term, regardless of the students' English proficiency levels. For the purpose of this research, this information suggests that carefully planned HOTS questions in an ESP classroom can also have a similar outcome since every student can participate in the tasks while using the target language to contribute to the discussion with a proper answer, solution, or idea to the HOTS question raised.

Techniques to Promote Self-Awareness

Techniques to become self-aware can have a positive effect by helping students to be responsible for their own learning process to acquire a language more effectively. An example of an effective technique to raise students' self-awareness is to encourage learner autonomy, which can be understood as the "ability to take charge of one's own learning," and it is "not inborn but acquired in either the natural setting or in the formal one" (Little & Dam, 1998, as cited in Nguyen et al., 2022, p. 945). As can be seen, becoming autonomous can aid students to be successful in the learning process; however, they have to understand that success in the learning process will highly depend on their involvement rather than on external factors. In a similar line of thought, Jamila (2013) claims that autonomous learners are able to carry out learning activities in a logical manner by reflecting on their learning process as well as encouraging themselves with planned actions (p. 33). Thus, learner autonomy plays a vital role in leading to effective learning because students are in active control of what and how they learn.

The reviewed research suggests that the use of self-awareness tasks drives students to notice their use of specific language features in their production. For speaking tasks, students can be asked to self-assess their use of vocabulary, grammar, fluency, or pronunciation of key words so that they can better estimate whether they are performing well or may need further improvement. For the present research, this implies that incorporating critical thinking tasks for students to reflect on their use of the language is vital, especially for a course that includes students of different proficiency levels. For such a course, these types of tasks can be used to allow each student to self-monitor their progress based only on their own proficiency regardless of the levels of the rest of the group. Furthermore, the students' language use during the tasks can allow instructors to provide further feedback or explanations on specific topics to individual students or to the entire group when needed.

Systematic Implementation of Oral Tasks

Another example of a technique to raise self-awareness is the systematic implementation of oral tasks to allow the students to achieve more solid learning in the form of self-regulation. Brown (2007) proposes a didactic model of oral production characterized by the use of a didactic sequence, "which revolves around a communication task that gives meaning to the students' learning" (p. 293). In this sequence, the task starts with an initial oral production stage through which the students become aware of their knowledge and their speaking challenges. The sequence allows the learners to overcome those speaking challenges while completing the remaining stages in the course *English for Physical Therapy*, this self-awareness technique can be included as a follow-up task for students to notice and assess their own oral production after completing speaking activities related to their ESP field. The task can be focused on checking performance in specific areas of the target language depending on the students' needs and proficiency levels. For instance, during a speaking task about describing past professional and academic

experiences, low-achieving students can be asked to self-assess their use of the simple past tense, whereas more proficient students can be asked to self-assess a more complex grammar area like their use of the present perfect tense.

In summary, to foster critical thinking skills, ESP teachers should be actively involved in their students' learning process by providing alternatives and additional resources to the tasks used in class, involving the learners in the decision-making process, creating classroom activities to promote speaking through the use of HOTS tasks, and encouraging learners' self-regulation of their speaking production. Thus, the research team can conclude that activities that promote students' critical thinking can be implemented at every stage of the lesson cycle in all units in the course. Due to their versatility, these types of tasks can also be easily modified to help the learners make use of higher cognitive processes and develop their oral skills in a multilevel classroom, which appropriately adjusts to the objectives of the present research.

Public Speaking

Based on the students' needs and wants and the design of the course, the following section explores the public speaking strategies of giving oral presentations and the use of role-plays to foster students' speaking skills in a multi-level proficiency ESP context.

Giving Oral Presentations

Strategies for public speaking have been identified as educational techniques which expose learners to real-life situations to strengthen their abilities for communicating naturally and meaningfully with their peers about events of their daily routines and future professional environments (García-Sánchez, 2019, p. 35). The author conducted research to study the impact of delivering oral presentations with a focus on the application of professional vocabulary, the collaborative learning process, and the communicative delivery strategies used in their postgraduates' research projects. The study found that the learners' speaking skills were significantly enhanced since the students were exposed to a task that demanded applying more complex oral and presentation skills rather than just taking part in a simple conversation. In the same line of thought, Bailey (2007) highlights the importance of having ESP learners practice and train public speaking techniques so that oral communication "becomes less traumatic and more natural and effective, especially if the speakers are using a second language" (p. 31). Public speaking activities like oral presentations offer students the opportunity to speak about relevant and interesting topics, which can lead to increased engagement and participation regardless of their proficiency level. Consequently, presenting orally in front of an audience is a recommended strategy to foster more production in the target language, and thus, an improvement of the learners' oral skills.

Giving a presentation to an audience is an active and productive skill often used by speakers for many purposes, including presenting in an ESP and TBLT focused context, yet listeners might be discouraged from following the presentation unless there is also a dynamic task for them to do. For this reason, García-Sánchez (2019) suggests having students intentionally omit some data while speaking to the audience to elicit questions from the audience so that at the end of their presentations, the speakers can have an interactive session to address the listeners' inquiries (p. 44). The author's claim is that both the speaker and the audience can benefit from applying the previously described technique during their oral presentations in order to develop their speaking skills by having a genuine exchange of thoughts and ideas from apparently missing information. Overall, oral presentations should be included in ESP courses to help learners enhance their confidence, convey meaning, and become enthusiastic builders of their own knowledge as indicated by the literature reviewed (Garcia-Sanchez, 2019 and Bailey, 2007). Oral presentations can be a highly effective task to include in ESP contexts since they give students the opportunity to speak about their preferred topics as well as to exchange ideas with the audience on those same topics as follow-up. As stated in the NA, the PT students in the course have a clear want to improve their vocabulary, pronunciation, and fluency when speaking. For this reason, oral presentations can serve as a great opportunity for the student-teachers to provide feedback to students on their oral performance.

The Use of Role-plays

Having students role-play is another type of public speaking strategy that can foster their oral skills since it exposes them to possible communicative situations in accordance with their field-related needs. The implementation of role-plays in an ESP and TBLT course allows learners to practice authentic communication and prepare them for future real-life scenarios based on their current necessities (Rojas & Villafuerte, 2018, p. 728). The authors state that role-plays provide the learners with opportunities to learn English more naturally in situations they feel related to, understand, and find engaging. Moreover, role plays can also help the students to be highly connected to their professional environments because they can develop relevant field-related oral communication strategies and become more competitive in the job market (Rojas & Villafuerte, 2018, p. 730).

The use of role-plays resembling real-life contexts in a TBLT course provides "situational authenticity" (Rojas & Villafuerte, 2018, p. 728). This means that TBLT tasks in the form of role-plays are authentic examples of situations that the learners will experience outside the classroom. In fact, the development of oral skills in a multilevel proficient group takes place when the learners interact in situations similar to those in the real world, and role-plays do prepare the students to be fluent and appropriate in real time and contexts, "and with the purposes of engaging real meaning with real people" (Rojas & Villafuerte, 2018, p. 728).

In a study conducted by Idham et al. (2022), the implementation of the roleplay method was compared to the grammar-translation one. The authors found that the students in the experimental group showed a significant improvement in their oral communication skills by engaging in real-life-situation tasks where they struggled with authentic oral communication in a meaningful manner (Idham et al., 2022, p. 1622).

Idham et al. (2022) classify role-plays into three categories: fully scripted, semi-scripted, and unscripted. This means that each type of role-play is appropriate for students of a particular level in a multi-proficiency group. The first category consists of providing the students with all words written down on a script for them to memorize their corresponding parts. In fully-scripted role-plays, less proficient students are given a dialogue with meaningful and easy to remember language since they still lack proper expressions and strategies to be able to interact in a specific situation. In the second category, the provided script has blank spaces for intermediate students to fill them in with words that fit the situation. In semi-scripted role-plays, students are encouraged to change the conversation with their own ideas based on a frame that gives them a real-life context since they are capable of using the strategies of recalling, brainstorming, discussing, and others to fulfill the task. Last, the third type of role play is more suitable for advanced learners. In this task, the students are given keywords, contextual information, or objectives to be used in

less controlled and structured role-plays. In unscripted role-plays, students are encouraged to establish a mini-conversation based on the keywords, materials, or contexts previously mentioned as an opportunity to use higher cognitive skills in unstructured scenarios that sometimes require unique abilities such as problemsolving, commonly seen in higher-proficiency students (p. 1625).

Following Idham et al.'s (2022) classification, ESP classes that implement role-plays provide an adequate and motivating environment for students to interact appropriately in genuine situations that relate to their careers since role-plays create opportunities to learn the target language naturally and meaningfully by focusing on interesting and engaging topics. When working with multi-level proficiency students, the same role-play task can be modified to fit students of different proficiency levels. For example, lower proficiency level students can work with the help of a script (fully or semi-scripted role-play), whereas higher proficiency level students can work with unscripted role-plays. Similarly, students can be divided into pairs or groups of similar proficiency levels to ensure more equal opportunities to interact with each other. For the course English for Physical Therapy, role-plays can become an ideal type of task to incorporate one of the most important needs stated by students in the NA: improving their oral skills to participate in international PT conferences.

Another key aspect of successful speaking is the fluent use of grammar structures, technical vocabulary, and pronunciation in a variety of activities combined with the four macro skills (reading, writing, listening, and speaking). With this in mind, Safitri et al. (2021) list speaking activities to help students improve their speaking skills, such as turn-taking, role-playing, simulation, and mini-drama (p. 575). For the authors, the basic purpose of turn-taking is to grant the students a tool to be able to control conversations by asking questions and providing short answers. At the same time, it helps them to focus on the appropriate use of grammar, vocabulary, and pronunciation during interactions by creating more controlled conditions and equal participation among learners. Second, role-plays provide the learners with opportunities to speak as other people or resemble actors by choosing the vocabulary and expressions they need when speaking. Third, simulation and minidrama activities help students speak fluently by creating interactions through collaboration. Furthermore, these speaking activities can motivate learners to learn the target language more actively and effectively by making decisions about the roles they are going to play (Bygate, 2009; Atas, 2015, as cited in Safitri et al., 2021, p. 575). According to the authors, combining the four macro skills with activities such as role-plays can be useful for learners to practice grammar, vocabulary, and pronunciation while engaging in meaningful interactions and equal participation through specific roles.

To conclude, public speaking activities of various types are supported by the literature for students in an ESP-TBLT context to apply their language knowledge and stimulate their speaking skills. Public speaking activities where students have specific roles are not only a means of displaying language performance but can also be used as a way of integrating the four macro skills (reading, listening, writing, and speaking) to fulfill the course objectives, and therefore, improve overall language proficiency. The activities, when used correctly, can increase students' desire to learn and thus, lead to an improvement in their language skills. In light of this, the implementation of various public speaking tasks in the present ESP course, such as role-playing as attendees at a conference for PT and orally presenting in front of fellow colleagues about a field-related topic, is expected to highly contribute to the

78

learners' overall language development, including their speaking abilities, which are the main focus of this research.

Interactive Activities

To maximize student engagement in an ESP classroom, the consulted sources suggest that including ludic, interactive activities can highly motivate learners to participate orally in the target language, and thus, help them develop their speaking skills in a setting both entertaining and academic. This section aims at summarizing key information of the following identified techniques: online learning resources (e-learning) and games.

Online Learning Resources (E-learning)

Many researchers have studied the relationship between the use of interactive online learning resources and the improvement of language skills. Dwaley (2007, as cited in Banditvilai, 2016, p. 221) found that e-learning encourages learners to seek information, evaluate it, share it collaboratively, and finally transform it into their own knowledge. Tanveer (2011, as cited in Banditvilai, 2016) also found that e-learning can help students take accountability for their own learning by making them "autonomous and confident." When properly implemented, blended learning (an integration of online resources with traditional instructor-led classroom activities) can result in enhanced student success, satisfaction, and retention because learners have the chance to learn at their own pace and in their own time. In fact, Banditvilai (2016) obtained similar results to those of the previous researchers. For the author, e-learning can develop the students' language skills better than in-class teaching alone since "the online program reinforces and expands the textbook and classroom activities" providing students with opportunities to review activities and tasks that are "skill-building" (p. 226). Overall, blended learning tasks provide opportunities for

students to work at their own pace, reinforce the knowledge studied in class, and be responsible for their own learning. Therefore, the research team believes that these types of interactive online activities can be a useful tool to be implemented during the course for students to improve their language abilities outside the class.

E-learning in the form of blended learning encourages students of all levels of English to study independently and spend time in contact with the target language to improve their proficiency. Furthermore, e-learning tasks are necessary activities since they pose a challenging extension of the content covered during class, so the online lessons "are not identical to the classroom lessons but parallel to them" (Banditvilai, 2016, p. 227). Due to the ESP-TBLT nature of the course, blended learning activities can be ideally implemented as asynchronous post-tasks for students to further review and practice key content such as grammar, vocabulary, or pronunciation needed to enhance their oral skills in the target language.

Games

It is well-known that many instructors and students consider games in the classroom beneficial for the learning process due to their interactivity and the fun features they can add to the class. The previous line of thought is supported by research on communicative games showing that they can contribute significantly to the students' oral production, by promoting a higher level of vocabulary usage, more accuracy and fluency, and a smoother interaction with other classmates and the teacher (Fajariyah, 2009; Ulviana, 2011; Salazar & Villamil, 2012, as cited in Hernández-Chérrez et al., 2021; Harmer, 2015; Zarutskaya et al., 2018).

Games are a means to expose the students to more diverse motivational strategies, which can promote autonomous learning and positive self-evaluation. Since learners who lack motivation are less likely to achieve their learning goals or

actively participate in the lesson, it is the teachers' duty to provide students with opportunities to engage in the learning process (Fajariyah, 2009, as cited in Hernández-Chérrez et al., 2021, p. 646). The author designed a study to measure the impact of games on speaking proficiency and found that students' speaking skills were better and learners seemed to be more actively involved in classwork when using games. In similar studies, Ulviana (2011, as cited in Hernández-Chérrez et al., 2021, p. 647) and Salazar & Villamil (2012, as cited in Hernández-Chérrez et al., 2021, p. 647) also noticed an improvement in the students' interest and engagement during lessons that included communication games in them. As the research suggests, language instructors can take advantage of the motivation that games can generate in students to involve them further in the class, lower their anxiety, and foster their willingness to speak in the target language. Games also have the advantage of being easily modified and adapted for the purposes of any context and any proficiency level.

Other authors, such as Zarutskaya et al. (2018), observed similar implications of having learners play educational games in an ESP context. The authors state that games are intended to stimulate the students' strategic and cognitive processes, provide them with a means to practice in a meaningful communicative activity related to their professional needs, and help them reduce stress and anxiety. Games are highly recommended by the authors for equal oral participation and development of the students' speaking skills in a multilevel classroom.

All the previously mentioned researchers agree with Harmer (2015), who explains that communication games are designed to foster oral communication among students "whether it is solving a puzzle, drawing a picture, or giving answers to proposed questions" (p. 223). Furthermore, games can be used as a "diagnostic tool" for the teacher to identify areas of difficulty and come up with strategies to address them (Harmer, 2015, p. 223). Finally, having games in a safe learning environment can also reduce negative feelings during the learning process.

Games are well suited to develop both listening and oral skills within the learning process because they emphasize "the ludic and creative use of the language while stimulating and developing speaking through interaction and socialization" (Hernández-Chérrez et al., 2021, p. 647). When students have the opportunity to play games in the classroom, they can exchange ideas, ask and answer questions, and negotiate meaning while they subtly develop other skills such as reading and writing. However, for games to have an educational value, it is imperative to plan accordingly to provide scaffolding and give feedback when necessary to keep students engaged. Therefore, as a strategy to be implemented in the present ESP course to foster students' speaking skills, games must be carefully planned to ensure that they have meaningful objectives, allow for equal participation, and relate closely to the students' field needs.

In conclusion, interactive online resources, technological tools, and games can enhance learners' communicative skills because they allow students to explore the language more extensively, have fun (to lower their anxiety and stress levels), exploit their creativity and imagination, and learn in a more ludic manner. Thus, for the purposes of the present course, the reviewed research supports incorporating games, for example, as opening activities like warm-ups or pre-tasks to motivate students of all proficiency levels to participate and use the target language in class to improve their oral abilities.

Classroom Management Techniques

In order to maximize students' oral proficiency in English, scholars have done research to determine whether a variety of classroom management techniques can be effective pedagogical tools for the improvement of oral proficiency skills in the target language. This section addresses the strategies of grouping techniques and techniques to encourage speaking.

Grouping Techniques

First, to guarantee high quality group work in a group of English students with mixed proficiency levels, group size and stability are essential to determine the class dynamics. For instance, Blatchford et al. (2003) assert that the size of groups needs to be appropriate to the background and experience of the learners, as well as to the purpose of group work and the task (p. 163). In other words, students with similar interests and experiences may work together successfully when they understand the objective of the group task. The latter fact also promotes group stability, which can be understood as giving the students the chance "to build up trust, sensitivity, and respect for each other, and to resolve conflicts" through repeated opportunities to work collaboratively and have fun together (Blatchford et al., 2003, p. 164). Thus, appropriately planned group activities, such as discussions or conversations with carefully phrased guiding questions, allow students to work collaboratively while driving them to use their language abilities to achieve the goals of those tasks. In an ESP context, these group activities can be easily incorporated by using tasks that involve oral interaction between students and with topics that they are particularly interested in. As previously stated, working with the students' preferred topics can significantly motivate them to use the target language, fostering their oral proficiency (Blatchford et al., 2003).

In the same vein, Cohen (1994) considers cooperative tasks a suitable tool for the improvement of oral communication skills through the use of three key components of effective group work. The first one, delegating authority, makes learners responsible for the fulfillment of the task. Nonetheless, delegating authority, such as assigning specific roles for group interaction to reduce teacher talking time, does not mean that the learning process is uncontrolled; in fact, "the teacher maintains control through evaluation of the final group product" while the students report back to the class (Cohen, 1994, p. 2). As the research suggests, cooperative activities make students responsible for the outcome of the task, which drives them to properly use their communicative abilities to complete the goal, particularly during speaking tasks. Regardless of the students' proficiency level, cooperative tasks also give them the chance to help each other not only to complete the task but also to use the language. In the same way, instructors can intervene during or after the activity to provide feedback on the students' language use.

A second key feature of cooperative group work is that members need each other to some degree to complete the task (Cohen, 1994). All students become essential to fulfill the task by suggesting what other classmates should do, listening to their classmates' ideas, and deciding how to complete the task within the allotted time and the set of resources given by the teacher (Cohen, 1994, p. 2). Having the students work cooperatively in groups with all the necessary conditions that help to guarantee interaction can increase student talking time in an ESP-TBLT classroom since it is a chance for learners to ask questions, explain the subject matter or task procedures, make suggestions, listen to each other, agree or disagree, and make joint decisions. Thus, for the present course, the team expects to incorporate group activities that guarantee all the functions previously mentioned to ensure that they can become effective tasks and foster students' speaking skills regardless of their proficiency level.

The third and last key feature of cooperative group work resides in the nature of the task. If the teacher wants the students to engage in high-quality talk, then the task needs to "pose complex problems or dilemmas, have different potential solutions, and rely on students' creativity and insights" (Cohen, 1994, p. 3). According to the author, cooperative group work engages learners in active and equal participation, makes them responsible for the completion of the tasks, and gives them the opportunity to use their creativity to convey meaningful communication.

By completing tasks that comply with the three key features listed by Cohen, students are expected to achieve the outcome without direct and immediate supervision by the teacher. In the same way, with the appropriate guidance and scaffolding from the teachers, carefully planned group tasks provide learners the opportunity to work by themselves without much intervention from the teacher. This can lower their anxiety and increase their confidence and motivation to produce in the target language. Moreover, adding complex and interesting topics increases students' engagement in the task in any multi-level group.

For effective cooperative group work, teachers must promote equity in heterogeneous classrooms. According to Cohen (1994), low-achieving students can benefit from heterogeneous groups and classrooms where more academic resources are available to them, for example, in the form of carefully designed class materials and working with high-achieving classmates as their counterpart (p. 23). It follows that having heterogeneous groups and students trained to serve as academic and linguistic resources for one another can allow the teacher to intellectually challenge all students. If each group member is required to present a product demonstrating understanding of the group work, the students who might still lack academic skills "will not sit back, but rather will go along with the group" (Cohen, 1994, p. 23). For more proficient students, the act of explaining subject matter or instructions to others represents one of the first ways to consolidate their own learning. If students are able to become resources for one another, everyone can be exposed to "grade-level curriculum" (meaning standard class materials and tasks for all students regardless of their proficiency level) and even more challenging material (Cohen, 1994, p. 23). In synthesis, if students are properly prepared to work cooperatively in heterogeneous groups demonstrating understanding of the task instructions and their assigned role, they can develop their basic skills with assistance and support from their classmates.

Similar to Cohen, Scrivener (2012) suggests a technique called "some ways of dividing the class," consisting of deliberately mixing stronger and weaker students together (p. 88). For pair and group work, there must be one student with a higher proficiency level who is going to guide the task and support the less proficient students. This technique can provide positive outcomes because stronger students can support the weaker ones, improve their own skills, gain a better understanding of the contents, and improve their confidence (Scrivener, 2012). Furthermore, weaker students can benefit from the guidance and support of the stronger students in an atmosphere of mutual respect, and thus, maintain and grow a class identity. In other words, allowing students of mixed-proficiency levels to work together gives them the opportunity to improve their speaking skills. Weaker students benefit from the knowledge and support of stronger students, while the latter ones benefit by practicing and consolidating their own understanding of the language.

Techniques to Encourage Speaking

In addition to forming heterogeneous groups for cooperative group work, students have to be encouraged to speak. To do so, teachers must create the conditions for speaking. Scrivener (2012) lists several examples: when the instructor frames topics as questions, puzzles, or problems, uses pictures to help inspire reactions and ideas, or allows the use of web tools, among others, the students are trained to actively take part in group tasks and maximize their speaking time in the target language (p. 180).

Assigning a portion of the final grade to participation is another technique Scrivener (2012) suggests for motivating learners to take oral participation in English more seriously. This percentage focuses on the students' willingness to participate in class using the target language rather than "for quality of language or for correctness" (Scrivener, 2012, p. 215). This means that all students are under the same conditions regardless of their proficiency levels, and therefore, are expected to use English during class time to be awarded with a good grade. Thus, the teacher must keep track of the students' interventions with cumulative, transparent, and public marks to guarantee that the final grade for participation is fairly and accurately assigned.

In a group of mixed-level proficiency in English, it is usually expected that the more proficient and confident students will participate more in the class. For that reason, the needs of low-achieving learners can be easily overlooked by the instructor. To be more aware of the needs of the latter, Ur (2016) asserts that the teacher has to give more attention to students who are under-achieving (p. 47). A strategy is to insist that all students have to wait to be nominated in order to give their answers. Ur (2016) further explains that allowing enough wait-time before

eliciting answers can also give slower learners more opportunities to make a contribution (p. 47). Another strategy is to permit different answers in class tasks instead of only one right answer because these are designed for just "one level of learner" (Ur, 2016, p. 48). By inviting different solutions or ideas to a problem or question raised during the lesson, less confident students can share simple responses and still be participative while the more proficient learners can find more complex answers.

As research suggests, many classroom management techniques can be used to foster the learners' oral skills. For the objectives of the present course, these strategies can be used for conversations and discussions related to the field of PT and healthcare in every class, and by mixing all types of students in terms of their proficiency level, for example, having high-achieving students work with lowachieving ones, or placing students with similar proficiency together. The team must take into account that all effective classroom management techniques require an active processing of the situation at the moment and a flexible reflection to determine the best course of action depending on the students' evolving needs and interests.

In conclusion, a broad variety of strategies can be implemented during the course to foster students' speaking skills. As seen throughout this section, the research team has decided to employ four techniques: HOTS, public speaking, interactive online activities, and classroom management techniques. As stated in the literature, each of these strategies can help students develop their speaking skills in some way regardless of their proficiency levels. The team believes that with careful planning and design, these strategies can be used in the ESP-TBLT course as possibly effective tasks to promote the students' oral production in the target language.

88

Although there is plenty of information on the topics of fostering speaking, there is little to no research done in the field of developing speaking skills in an ESP group of physical therapists, particularly in Costa Rica. Due to this gap identified during the literature review, the team asserts that the findings in this paper can pose insightful information for other ESP courses focused on improving oral abilities. Thus, the present research intends to expand the current knowledge on the use of learning and teaching speaking strategies to foster the oral performance of fieldrelated students with different proficiency levels.

Chapter IV: An Evidence-based Reflection on the Practicum Based on the Research Questions

The student-teachers of the course *English for Physical Therapy* incorporated speaking and teaching strategies in their lessons to foster oral communication skills in a group of Physical Therapy (PT) students, instructors, and professionals with multi-proficiency language levels based on research consulted. This chapter aims to reflect on the effectiveness of implementing those strategies based on the perceptions and assessment of the participating students, the student-teachers, and the supervisors. Thus, for the purposes of the present research, the term effectiveness (or effective strategy) will refer to the extent to which the identified strategies were deemed useful for improving the learners' speaking production in terms of the following sub-constructs: active participation, appropriate performance of language functions, sociolinguistic appropriacy, appropriate use of PT vocabulary, and correct pronunciation.

Data Collection Methods

To collect the data for this reflection, the team used unstructured observations during the course, structured delayed observations based on class recordings, a survey to learn about the students' opinions regarding the course, the supervisors' feedback after every class, and the scores of summative assessments obtained by the students in the speaking tasks.

Unstructured Observations during the Course

The unstructured observations were carried out by both student-teachers during each lesson of the course in the form of notes taken on the students' speaking production and other relevant behaviors in terms of their active participation, use of PT vocabulary, correct pronunciation, sociolinguistic appropriacy, and appropriate performance of language functions, corresponding to the sub-constructs intended to assess the effectiveness of strategies. Specifically, the team focused on the following behaviors for each subconstruct:

- active participation: showing willingness to produce in oral tasks, having their camaras on throughout the entire class, opening their microphones when participating in class activities, and showing interest and engagement in the topics covered in the course.
- appropriate performance of language functions: using appropriate phrases, vocabulary, and communicative routines when describing, asking, clarifying, or sharing information with each other or with the student-teachers.
- socio-linguistic appropriacy: interacting respectfully with each other and the student-teachers while using formal speech according to a professional PT context.
- appropriate use of PT vocabulary: using the correct form and meaning of relevant PT vocabulary studied in class.
- correct pronunciation: applying the correct pronunciation of key vocabulary and the correct stress of sentences and questions studied in class.

These notes were taken mostly by the designated assistant-teacher of each class during the main session with the whole class and in small groups in breakout-rooms (BORs). While in Zoom BORs, each student-teacher could only visit one room at a time, which means that the data collected through this method was mostly from the group of students in which the assistant-teacher was present.

Structured Delayed Observations based on Class Recordings

The student-teachers observed the Zoom recordings of every class to analyze the students' overall speaking production regarding the sub-constructs already mentioned at the beginning of this chapter while working on the implemented speaking strategies. Through the class recordings, the team monitored and recorded in written form (rough notes) the students' behaviors, interactions, and use of the target language during specific moments in class where the strategies for the identified sub-constructs were incorporated. The notes taken by the student-teachers were used as data for the purposes of the present project. To carry the structured observations, the student-teachers focused on the same specific aspects for each identified sub-construct as detailed in the previous section. It is worth mentioning that the Zoom platform only records the parts of the session where the person who started the recording (host) is present, so the data to analyze in these observations were limited by this feature.

The Students' Opinions about the Course

A survey was used to collect information about the students' opinions of the course, their perception of their improvement in the target language, and their preferred speaking activities used throughout the course. The survey was administered on the last day of classes, and it gathered the data from the seven students who remained at the end of the course.

The Supervisors' Feedback after Classes

The feedback provided by the Practicum supervisors in charge of observing every lesson was also used as insightful data on the use of speaking strategies during the course. This feedback was given by the supervisors of the course in the form of notes and commentaries about the overall design and progress of every class. Similar to other sources of data for this reflection, the feedback received after each class was limited to the moments and groups where the supervisor was present during the Zoom classes.

Summative Assessments

The scores obtained by the students in the speaking test in Unit 2 and the oral presentations at the end of the course were considered as relevant data about the implementation of the speaking strategies used by the team throughout the course.

Critical and Reflective Thinking

As stated in the literature review, the strategies of high order thinking skills (HOTS) and techniques to promote self-awareness were implemented throughout the course to help the learners to improve their language competence in terms of the sub-constructs already listed at the beginning of the chapter.

The Implementation of High-Order Thinking Skills (HOTS)

Research indicates that raising questions or problems and solving puzzles that require high-order thinking skills (HOTS) can improve the learners' critical and speaking skills regardless of their English proficiency level (Akatsuya, 2019; Pertiwi, 2019; Setiawan et al., 2020; Syafryadin et al., 2022). Thus, the team decided to include HOTS as a strategy to foster the students' speaking skills throughout the entire course, starting in Unit 1. The goal of including HOTS tasks in the course was to stimulate critical thinking, discriminate between appropriate or inappropriate conversation topics, and promote meaningful speaking time with classmates during the course. In other words, the students were trained to raise and respond to the kind of questions which can prompt speaking and maintain a steady flow in a conversation and not just short or vague answers.

A summary containing examples of the implementation of HOTS tasks in the course is presented next. The full description of the lesson plans and materials used during the entire course can be found in the Appendices section (see Appendix G).

Table 10

Lesson **Description of the HOTS Task** Unit 1, The students took part in a conversation in pairs about the use of Lesson 4, technology to treat their patients. The objective of this pre-task Pre-task 2 was to have the students activate background knowledge by discussing the content to be read in that lesson. Unit 1, The students prepared answers to five HOTS questions provided Lesson 4, by the team on the lesson topic about movement illusions for Post-task patients with chronic stroke. Unit 1. The students discussed the answers they had written in the post-Lesson 5, task of the previous lesson to compare their understanding of the Warm-up HOTS questions in the task. Unit 2, The students prepared three questions according to the Lesson 7. information they read in their classmates' profiles (background, Pre-task 3 experience, and qualifications). Questions about future work, past and Main task experiences as students, topics of interest to pursue postgraduate studies, and languages they speak were the most common queries the learners raised. Unit 2. The students were given two sets of topics for them to discuss Lesson 8, their academic and professional background, main interests, and Pre-task 2

Implementation of HOTS Tasks in the Course

research experience by using the speaking strategy of turn-taking in pairs in break-out rooms (BORs).

Unit 2, The student-teachers employed HOTS in a flipped classroom task.

Lesson 8, In this opportunity, the students were trained on the structure and Post-task use of the present perfect tense, and thus, they prepared five questions they would ask a fellow colleague about his/her personal, academic, and professional experiences and achievements.

Unit 2, The learners took a summative assessment in the form of a

Lesson 9, midterm speaking exam. The speaking test consisted of a role-

Main task play in pairs simulating an initial interaction between two

professionals at an international conference for physical therapists.

Unit 3, The students were given a HOTS task in the form of a critical-

Lesson 10, thinking question. The question was raised by the student-

Post-task teachers after the students had already watched the educational video of the lesson (about plantar fasciitis).

Unit 3, The students gave their final oral presentations. Following each

Lesson 14, presentation, at least one or two different students participated in

Main task the question rounds by praising the effort their classmates displayed during the presentations, asking questions to clarify information, expanding on the topics from a different perspective, and highlighting the importance of the chosen topics. As observed in the class recordings, both in the main session and the instances where it was possible to record the BORs, the implementation of HOTS in the course seemed to have been helpful for the participating students to discuss PT-related topics, exchange ideas, raise appropriate questions, report recently acquired insights from classmates, present role-plays by incorporating recently learned vocabulary and speaking strategies (such as correct intonation of questions and accurate pronunciation of key words), give an oral presentation about a PT-related topic, ask the speakers questions for clarification or expand on the given topic by means of appropriate interventions, and answer the questions raised by the audience.

The students were able, for example, to discuss types of technology to treat patients basing their ideas on their previous experience working as physical therapists. A student mentioned that "there is artificially create antibodies to combat sclerosis," [*sic*] and another said that "the use of lights is good to treat acute and chronic pain." Often, the students came up with their own input and provided original ideas that went beyond the topic and the task, suggesting their willingness to produce in the target language. The students seemed comfortable discussing the HOTS questions with their classmates and reporting back to the entire class in the main session. The perceived positive outcomes from the HOTS task were also pointed out in the supervisors' feedback in Lesson 4 where it was expressed that this strategy provided more variety to the class and encouraged the students to continue participating actively in the lesson since it allowed the students "to actually make connections to real-life experiences." This finding suggests that incorporating HOTS in ESP courses can also be beneficial to increase student involvement and motivation, serving as effective tools to allow equal participation of all students, and

therefore, foster critical thinking and oral skills, such as employing technical PT vocabulary and correct pronunciation, during the course. Furthermore, the latter finding coincides with the results obtained by Akatsuya (2019) and Syafryadin et al. (2022) where it was observed that the students tend to show a positive attitude when working on HOTS tasks by discussing critically and creatively.

Often, the students returned to the main session after an activity in BORs in pairs or groups to report that they felt very comfortable with each other asking and answering questions. For instance, the students stated that being in BORs with their classmates gave them an opportunity to discover new information about the work they do as physical therapists and a paramedic and about how to proceed in emergency situations, make vital decisions, and handle difficult situations while working under extreme pressure. This means that the students were able to develop insightful conversations in their own manner with the proposed HOTS topics by making use of the speaking strategies studied throughout Unit 2, such as expressions to show interest and ask follow-up questions. In other words, the combination of the two factors, HOTS tasks and the students' frequent use of the speaking strategies studied in the course, seem to have been effective to provide them with plenty of time to speak in the target language and develop their oral performance, regardless of their proficiency levels. Similarly, Pertiw (2019) and Setiawan et al. (2020, as cited in Syafryadin et al., 2022) reported that HOTS tasks in ESP contexts can motivate learners to participate in classes using the target language and critically discuss topics of their interest.

According to the information collected in the initial needs analysis (NA), the team noticed an evident need for the students to be able to interact with fellow colleagues at international conferences for physical therapists. Thus, the speaking

test consisted of a role-play in pairs simulating an initial interaction between two professionals at an international conference for physical therapists. According to the unstructured and delayed structured observations of the summative assessments and the students' scores, the data suggests that they were able to meet the objectives of the tasks evaluated in the speaking exam. In addition to being able to address the points in the given prompts, the students were also capable of asking appropriate questions for the given context with accurate rising intonation, for example, "What did you study at college?" and "What is the most difficult aspect of your job?" while also using expressions learned in the course to show interest in the conversation, such as "That's very interesting!" and "Really? Tell me more!" Additionally, students were able to ask follow-up questions to expand on information that needed further clarification, for instance, "What makes you say that?" and "What do you mean by that?", and often pronouncing accurately the -ed sounds of the regular verbs in the past tense, for example, "Have you graduated from college?", "I have never attended a PT conference before," "I have worked at Clínica Bíblica Hospital," and "I studied PT at UCR." Similarly, the students' test scores (see Appendix H) indicate an improvement of their speaking production in comparison with the outcomes drawn from the diagnostic test, where some were not aware of the many available speaking strategies to successfully hold a conversation with a colleague in English. In contrast, prior to taking the midterm speaking exam, the learners had already taken several classes in the course and had been trained to take part in formal conversations with fellow colleagues. This suggests that the speaking tasks used in the lessons, such as HOTS tasks, provided opportunities for the students to engage in interactions that promoted the improvement observed and helped them to be better prepared to fulfill the main objective in the oral exam. The

speaking skills acquired through the HOTS tasks implemented in the course were deemed helpful in the learning process for the students to develop oral competence in the sub-constructs under study, in alignment with the benefits of having HOTS in ESP courses as stated by Akatsuya (2019).

According to the unstructured observations during class, some students were not able to correctly employ HOTS in a few instances, even when their language production was accurate. For example, in Unit 2, Lesson 7, Pre-task 1, the students brainstormed and shared a list of questions about a fictional character's background, experience, and qualifications. In this task, a student raised a grammatically correct question about whether the character's contact information was real or not. Even though the student employed an accurate use of the studied grammar structures, the purpose of the question raised was deemed irrelevant and immediately corrected by the lead teacher by expanding on the types of questions that were more suitable in such a task. Hence, the task resulted in an opportunity for the students to practice the linguistic appropriacy needed for their professional environments. The lead teacher's intervention seemed to have helped the students to recover the focus on the task since their following questions were appropriately raised for the given context, for example, "What is something interesting about Chloe's educational background?", "What's Chloe certified in?", and "Do you have any certifications?"

As seen in the previous examples of HOTS implemented in the course, the data suggest that this technique was highly effective to engage the learners in a meaningful exchange of ideas in pairs, groups, or as a whole class discussion, regardless of their language proficiency. Furthermore, the findings in this section indicate that HOTS tasks can increase student motivation, talking time in the target language, and use of recently learned speaking strategies to develop oral

competence while discussing topics of their interest, asking and answering criticalthinking questions, and proposing solutions to given problems, displaying sociolinguistic appropriacy when interacting with peers, and making accurate use of language features studied in the course.

Self-Awareness and Self-Regulation Techniques

Students who monitor their language use, prepare themselves prior to a task, and reflect on their final product have higher chances of improving their oral skills regardless of their language proficiency level (Little & Dam, 1998, as cited in Nguyen et al., 2022; Brown, 2007; Jamila, 2013; Dumais & Messier, 2016). Thus, the team decided to implement tasks where students could put into practice techniques of self and peer assessment of their performance, mainly during Unit 2, the speaking test, the final oral presentations, and the questionnaire administered on the final day of classes.

The following tasks exemplify the use of self-awareness and self-regulation techniques in the course. In Unit 2, Lesson 6, for the main task of the lesson, the students initially drafted a fully-scripted role-play in pairs about the topic of two physical therapists holding a conversation at an international conference. After the completion of the first draft, the students continued working on a self-assessment rubric provided by the student-teachers to evaluate the aspects described in Handout #4 (see Appendix I), such as the correct use of expressions studied in the unit and appropriateness of the conversation topics. The learners were expected to make all pertinent adjustments to the conversations prior to presenting in front of the entire class. In Unit 2, Lesson 8, for the main task of the lesson, the students presented to the class an unscripted role-play about two colleagues at an international conference for physical therapists. Once all pairs of students were

ready to present their role-plays, the lead teacher explained the peer assessment task and assigned a classmate to each student for them to evaluate their classmate's performance in terms of the aspects described in Handout #4, such as proper intonation for questions, correct use of follow-up questions and expressions to show interest, and accurate pronunciation of -ed sounds.

Similarly, at the end of the course, the students assessed their performance in the final oral assessments by means of a self-assessment task. In Lesson 14, the students gave the class a presentation about a PT-related topic of their choice. In the post-task for that lesson, in Handout #2 (see Appendix I), the learners evaluated their own presentations using the aspects described in the rubric provided by the team, such as the correct use and pronunciation of vocabulary related to PT, manner of addressing the questions and comments raised by the audience, and use of visual aids.

According to the structured observations, the supervisors' feedback, and the summative assessments, the use of self-regulating tasks in the course seems to have helped the students to focus on details they might have overlooked, and thus, make changes before presenting their final work or reflect on already delivered products. For instance, in Unit 2, Lesson 6, the learners were observed correcting their work before presenting their final conversations to the group by addressing the aspects in the provided Handout #4. In Unit 2, Lesson 8, the students provided feedback to each other in an oral exchange in pairs by making use of the items assigned in Handout #4, praising their classmates' strengths, providing suggestions to work on their weaknesses, and expanding on what they could have done differently to improve their conversations. In other words, the implementation of peer and self-assessment tasks seems to have helped the learners to notice and correctly

adjust aspects of their language use, to correct grammar mistakes, and to focus on the accurate use of the key expressions learned in the unit. The use of selfregulating materials was also highlighted by the designated supervisor of Lesson 8, who pointed out the evident training that the students had received on "specific language features to notice and regulate their own oral production in the target language." These findings suggest that self and peer assessment tasks to monitor and regulate speaking production in the target language were effective to foster the learners' oral competence in the ESP course. This outcome seems consistent with authors' claims that, by assessing their own and other classmates' work, learners are able to have an active control in the learning process, and thus, acquire a language more effectively (Jamila, 2013; Little & Dam, 1998, as cited in Nguyen et al., 2022).

As mentioned before, the learners evaluated their own performance during their final presentations and the data is presented next in Table 11 (see Appendix I). **Table 11**

The Students' Self-assessment of their Performance in the Final Oral Presentations

Aspects Assessed by Students' Answers on their Performance

Students

			A	D	
	Excellent	Very good	Average	Poor	
Use of technical vocabulary	1	5	1	0	
related to PT					
Pronunciation of technical	1	5	1	0	
vocabulary related to					
physical therapy					

Content and development	4	2	1	0
of my chosen topic				
Visual aids (PowerPoint,	4	3	0	0
Google Slides, Canva, etc)				
Manner of addressing the	3	3	1	0
questions and comments				
raised by the audience				
Overall rating of my	2	4	1	0
presentation				

Note: N= 7. Source: Formulario de Evaluación Final del Curso *English for Physical Therapy*. Researchers' own elaboration.

Table 11 shows how the students rated their own performance in the final oral presentations. By employing self-regulation and self-awareness techniques, the students were asked to self-assess their performance in various aspects and select them as either "excellent," "very good," "average," or "poor". As can be seen, "Use of technical vocabulary related to physical therapy" and "Pronunciation of technical vocabulary related to physical therapy" were chosen only one time as an excellent feature in the students' presentations, five times as very good, and one time as average. Half of the students considered the content and development of their topics and their use of visual aids as the aspects better performed during the presentations, and an equal number of learners also believed that their manner of addressing the questions and comments from the audience was very good. About the latter aspect, the team hypothesizes that the students felt well-prepared and confident to answer questions because of the training and scaffolding of tasks they received throughout

the course. On the other hand, only a third of the students graded their overall presentation as excellent even though all of them effectively met the task requirements (a different topic per student, preparation, and expertise on the topic). Last, five students selected five out of the six categories in the assessment form as "average," which could mean that some of them still need further input and practice to enhance those specific skills, or that they could have underestimated their oral competence since, as mentioned before, the students were able to achieve the goals of this task.

The results obtained from the use of self-assessment techniques in the course seems to have been helpful for the students to be more aware of the importance of monitoring their own oral production in the target language and notice their strengths and weaknesses. Based on this, the implementation of self-awareness and self-regulation tasks in the course seems to have been effective for the students to improve their oral performance in terms of linguistic appropriacy, active participation, accurate use of PT vocabulary and language features, and correct pronunciation. This effectiveness coincides with the expectations the team had previously set for the course based on research done by Little and Dam (1998, as cited in Nguyen et al., 2022), Jamila (2013), and Dumais and Messier (2016), who observed an improvement of the studied learners' oral production when granting them the opportunity to reflect upon their work, regardless of their language proficiency.

In Lesson 15, the final day of classes, the team administered a questionnaire to collect the students' opinions about their perceived improvement of the skills studied throughout the course (see Appendix J). The questionnaire was used as a means for the learners to become aware of their overall progress and for the team to

learn about their perceptions and takeaways from the course, especially in terms of their oral production.

Following self-regulation techniques, the students evaluated their own improvement in various English skills during the course. They were asked to classify their improvement in each skill as "none," "little," "moderate," or "considerable." The data collected is shown in the following table.

Table 12

English Skill	Students' Self-Perceived Improvement			
	Considerable	Moderate	Little	None
Speaking	6	1	0	0
Pronunciation	6	1	0	0
Fluency	6	1	0	0
Vocabulary	6	1	0	0
Reading	4	3	0	0
Listening	4	3	0	0
Grammar	3	3	1	0
Writing	1	5	1	0

The Students' Perceived Improvement of English Skills in the Course

Note: N= 7. Source: Formulario de Evaluación Final del Curso *English for Physical Therapy*. Researchers' own elaboration.

As shown, six out of seven students stated that the skills involved in oral production (speaking, pronunciation, fluency, and vocabulary) were significantly improved in the course English for Physical Therapy. On a smaller scale, three out of seven students reported that grammar, another skill necessary for oral proficiency, did improve considerably, while three out of seven students considered their grammar knowledge as fairly enhanced. It is also noticeable that the speaking, pronunciation, and fluency skills were selected as 'moderately' improved exactly one time, which possibly means that there were one or some students above the target proficiency level of the course (intermediate). Therefore, they may have not seen an improvement of their oral skills as much as other classmates during the course. The remaining skills correspond to other areas covered in the course not so relevant to answer the research question of the present paper, yet important for the students to notice their self-improvement. For instance, writing skills were not explicitly taught in the course since this macro skill was deemed less urgent based on the students' responses in the NA. However, the data collected allow to conclude that note-taking and brainstorming skills and answering comprehension questions in written form seems to have served to stimulate the students' grammar and spelling abilities.

These findings indicate that the students noticed an improvement in all of their skills, especially in the ones that involve speaking. This is also supported by the observations made by the team and the supervisors' feedback where an improvement of the learners' language skills in many lessons towards the end of the course was noticed. It may be concluded that the students' self-perceived improvement is linked to a combination of the techniques identified in the literature and implemented in the course, the student-teachers' rationale for task design, the

professors' feedback and suggestions, and the learners' commitment to use the target language during the lessons.

In conclusion, the use of self-awareness and self-regulation techniques in the course seems to have helped the learners to improve their speaking proficiency based on the information presented in this section. By monitoring their own work, assessing their classmates' performance, and reflecting on their overall perceived improvement during the course, the learners had the chance to assess key aspects that were useful to enhance their speaking performance, regardless of their proficiency level. The self and peer assessment instruments employed throughout the course seemed to have guided the learners to ponder on their acquired knowledge, identify areas for improvement, and notice their own production, which were considered by the team to have a positive effect on fostering the students' speaking performance.

Public Speaking Techniques

The use of the public speaking techniques of role-plays and oral presentations during the course as speaking strategies to foster the students' speaking production is analyzed next in terms of participation, use of vocabulary, pronunciation, sociolinguistic appropriacy, and language functions.

Role-plays

This section examines the use of role-plays during the course as a speaking strategy to foster the students' speaking production in terms of the sub-constructs selected for the purposes of this research. Role-plays were employed as the main tasks in Lesson 6, Lesson 8, and Lesson 9 of Unit 2 during the Practicum course. The objective of these tasks was for students to role-play as attendees at

international PT conferences in accordance with the students' needs identified in the NA.

According to the structured delayed observations of Lesson 6, Unit 2, the students created a conversation between two physical therapists to then role-play it in front of the entire class. To prepare for this first role-play, the learners were asked to write some parts of the conversation as a semi-scripted role-play (Idham et al., 2022). Nonetheless, this first role-play had a drawback, which was noticed during the unstructured observations and also and pointed out in the supervisor's feedback of that session. When presenting this role-play, most students opted for reading many of the dialogues instead of having a real-like conversation as physical therapists. To fix this issue, the students were asked not to write the conversations in the subsequent role-plays, and only take notes to remember ideas and key words when presenting. Thus, the following role-plays in Unit 2 (Lesson 8 and Lesson 9) were designed as unscripted to address this issue (Idham et al., 2022).

Based on the structured delayed observations of the role-plays of Lessons 8 and 9, in Unit 2, the students seemed to be engaged and talked about various PT topics in their conversations like their areas of specialization, the different methods they use to treat their patients, and even future projects in their careers. All of them were able to complete the task, and some of them even took the role of foreign attendees and speakers and provided creative reasons for closing the conversation according to the context of the conversations, which added a diverse and fun feature to the interactions, for example, "My name is Noriko Sato. I'm from Canada," "Don't miss the lecture. See you there!", "Your conference? You mean my conference [*sic*]. I was the speaker!", and "You can come to my conference, and I can make you some videos about the technique... I can show you the results about it". These roleplays also provided the students with the opportunity to practice the structure and level of formality necessary to be able to appropriately take part in conversations with fellow colleagues at international conferences, such as "Are you interested in research?", "Can we exchange contact information to collaborate in the future?", and "What would you like to specialize in?"

Similarly, according to the delayed observations and the supervisor's feedback, the students participated actively, seemed to enjoy the task, and had the opportunity to learn new vocabulary and practice pronunciation when completing these tasks. The participating students were also able to practice expressions for greeting and farewell, asking and answering questions appropriately according to the context, and exchanging contact information, such as "Nice to meet you, my name is [*student's name*]," "Do you know who is the speaker of the conference?" [*sic*], and "Sure, my phone number is [*student's actual phone number*]."

Based on the unstructured observations of Lesson 9, during the role-play exam (see Appendices E and F), only a couple of students had some minor difficulties when trying to express some of their ideas while speaking or recalling specific vocabulary which led to slightly chopped speech. Nonetheless, all the students were able to follow the structure of the conversations and respond to the questions raised by their classmates, and when having difficulties or doubts, the students opted to ask their classmates or the teacher in charge, or even corrected themselves when speaking. During this task, the students showed correct use of the expressions commonly used in conversations studied in class, and they were able to ask and answer appropriate questions according to the context of a formal conference such as providing professional information, describing their occupations, using follow-up questions, and arranging future meetings and partnerships, for

example, "I'm a PT professor at UCR, I have worked there since 2015," "In the paramedic is [sic] sometimes difficult to handle a [sic] emergency," and "I'm also interested in hydrotherapy, maybe we can collaborate together in the future." The students seemed to enjoy speaking about their profession, asking and answering questions, sharing personal experiences, as well as listening to the experiences and ideas shared by the other classmates. This suggests that the students were quite knowledgeable when talking about PT topics, and that they were willing to use the target language to converse with colleagues. Additionally, based on the summative assessment of the speaking exam, the scores obtained by the students also reflect a positive outcome of the use of role-plays as a speaking strategy. In this exam, students achieved an effective use of the structures, vocabulary, pronunciation, and content learned in the course during these role-plays. According to the supervisor's feedback, the role-play speaking exam followed an appropriate structure, and it appeared to be a relevant task for the students to complete. Coinciding with related literature, these role-plays seem to have prepared the students for simulated real-life scenarios while engaging them in relevant field-related communication (Rojas & Villafuerte, 2018).

In the case of the first fully-scripted role-play where students mostly read the dialogues, the team considers that it is necessary to manage this type of activity differently to prevent students from entirely reading their conversations. Possibly, the students should have been given more time to practice and memorize easier phrases and follow-up questions (provided by the student-teachers) to continue the conversations in a more natural way as expressed by Idham et al. (2022). Nonetheless, the decision to implement unscripted role-plays in Lessons 8 and 9 seems to have rendered very positive results as suggested by the data. This may be

for the reason that this type of role-play reflects a more natural and real conversation between PT colleagues.

As the data points out, the outcomes of role-plays in Lessons 8 and 9 support the literature that states that implementing this kind of activities in ESP classes provides an adequate and motivating environment for students to interact in genuine situations that relate to their careers (Idham et al., 2022). Additionally, the students managed to incorporate the speaking strategies studied in the Unit in their role-plays, such as rising intonation for questions, expressions to show interest, and follow-up questions. These role-plays seem to have helped students to learn new vocabulary related to their field, practice formal speech and language features used in these contexts and to have provided an appropriate opportunity to practice their pronunciation and fluency when speaking in real-life conversations.

The data collected indicates that many of the advantages of using role-plays proposed by the literature such as equal participation and plenty of opportunities for students to produce in the language and practice conversations in authentic contexts were present in these tasks (Rojas & Villafuerte, 2018; Idham et al., 2022). Overall, it can be concluded that the role-plays used in the course seem to have helped students to improve their speaking abilities in terms of sociolinguistic appropriacy, appropriate use of language functions, active participation, correct use of PT vocabulary and accurate pronunciation while engaging them in meaningful communication as physical therapists in real-life contexts, regardless of their proficiency levels.

Oral Presentations

This section describes the use of oral presentations during the course as a speaking strategy to foster the students' speaking performance in terms of

participation, use of vocabulary, pronunciation, sociolinguistic appropriacy, and language functions. Oral presentations were given in small groups as part of the task lesson cycle in the three units of the course and in front of the entire class for the final oral presentations.

In Unit 3, Lesson 11, the class was divided into two groups, groups A and B, where the students watched a video and took notes to then orally present a summary of the most important information to other classmates who watched the other video. By working in pairs in BORs, the students in group A watched a video about stroke recovery, and students in group B watched a video about pediatric therapy. Similarly, for Unit 3, Lesson 14, the students gave an individual presentation about different topics related to PT as part of the main task. This task was the final oral evaluation of the course. The students were given two weeks to prepare the topic and visual aids to support their presentations. Also, the students were instructed to only include images and key words to avoid excessive reading while presenting.

According to the structured observations of Lesson 11, Unit 3, during the main task of that lesson, the students took turns to individually report to a classmate who watched the other video and vice versa. Additionally, the students listening to the presentations were instructed to pay attention to the information reported since they had to be able to describe the treatment later in the main session. The students who were listening to the classmates presenting the information asked questions related to the topics which promoted more speaking interaction between them, such as asking for their own experiences with those treatments, for example, "Have you treated patients who are recovering from a stroke?" and "I like children because you can play funny games with them." The presentations were deemed effective since the students shared their own knowledge and experiences as physical therapists on those treatments by adding extra information about the therapies covered in the videos, and used the language features present in the task, such as describing PT treatments, asking for clarification, comparing answers, and agreeing or disagreeing with each other's ideas. For instance, one student expressed that he had learned a lot about PT by listening to his classmates during class; he then emphasized the value of kindness in their profession and the importance of family members being involved in the process for a better and sooner recovery. It is worth mentioning that the other students in the BOR also expressed agreement with this line of thought by using expressions learned in the course, such as "I totally agree" or "It's true, I've seen this with my patients."

The outcomes of this presentation suggest that this type of task provided students the opportunity to practice their listening and speaking abilities in the target language to understand and report the information from the videos. Thus, the team concludes that the task served as an effective tool for them to interact in the target language and share their own expertise in the area of PT. The benefits of presentations shown in the evidence coincide with the literature that identifies public speaking strategies as effective activities that expose learners to natural communication about meaningful events related to their professional environments (García-Sánchez, 2019).

According to the unstructured observations of Lesson 14, Unit 3, during their final presentations (see Appendices E and F), the students seemed highly involved while presenting their topics and when listening to their classmates' presentations. This type of task gave the opportunity for the audience to ask questions, engaging all students in the task. These presentations allowed students to practice their speaking

and listening abilities, present their topics in a formal manner, while giving them the chance to talk about their preferred topics, for example, hydrotherapy, virtual reality, and the mirror technique were among the most popular in the course. In addition, as stated by the supervisor of the lesson, the students produced a lot in the target language during the task, and the use of follow-up questions and comments became a good opportunity to exchange experiences and knowledge among the students. The data suggests that this type of task had a positive effect on the students' willingness to speak in the target language due to the opportunity for learners to engage in meaningful communication about relevant topics for them (Bailey, 2007).

According to the summative assessment, the scores obtained by the students in this task (see Appendix H) also showed positive results in the aspects that they were evaluated in such as fluency, use of vocabulary, pronunciation, and grammar in the target language. Similarly, based on the supervisors' feedback of the lesson, it was pointed out that the learners succeeded at the task by giving formal presentations related to PT and demonstrating expertise of their chosen topic. The supervisor asserted that "the students are able to produce," and further expressed that "the follow-up questions/comments became an opportunity to exchange experiences and expertise (Great!)." This evidence matches with the identified benefits of this type of task according to García-Sánchez (2019) such as engaging students in active participation and allowing them to share their own knowledge on topics of their interest.

Based on the outcomes from this speaking strategy, it can be concluded that the use of oral presentations fulfilled the principles identified in the theory, such as giving learners the opportunity for plenty of speaking time, and equal participation to discuss their preferred topics, regardless of their proficiency level. As expected,

including oral presentations in the ESP course seems to have helped students to develop their oral communication performance, especially in terms of learning new vocabulary, acquiring language features, and practicing formal speech, pronunciation, and fluency (García-Sánchez, 2019; Zarutskaya et al., 2018).

Interactive Activities

The use of interactive activities, such as e-learning resources and games, in an ESP setting seems to have a positive effect on the learners' development of their language skills, by providing the learners of all proficiency levels with the conditions to become more participative and proactive during the lessons (Dwaley, 2007; Fajariyah, 2009; Tanveer, 2011; Ulviana, 2011; Villamil, 2012; Harmer, 2015; Banditvilai, 2016; Hernández-Chérrez et al., 2021). Since the course took place in a virtual setting, the team made the deliberate decision to incorporate online learning resources (also known as e-Learning) and ludic games especially as warm-ups, pretasks, and asynchronous post-tasks for the students to activate their schemata, negotiate meaning with each other in a fun manner, and work independently by making use of technological tools.

Online Learning Resources

The use of online learning resources, also referred to as e-Learning, allows both the students and the teachers to access reliable educational content in an online environment. This access has been found to have a direct effect on the learners' development of their language skills (Dwaley, 2007; Tanveer, 2011; Banditvilai, 2016). The course *English for Physical Therapy* took place in a virtual setting, and therefore, many of the tasks incorporated e-Learning applications and tools, such as *Wordwall, Kahoot, LIVEWORKSHEETS, Flip,* and original handouts.

Wordwall was often employed by the team to introduce the vocabulary of the lesson to the students. In fact, it was used in at least two different lessons per unit. This tool is characterized by being extremely user-friendly, so for the teachers the design of the tasks was relatively rapid and easy. For the students it was also quite simple to access, navigate, and work on the tasks. Through these interactive learning resources, the students were able to match definitions with their corresponding picture, complete short pop quizzes, fill in the blanks with words from given word banks, organize a conversation in the correct chronological order, and formulate questions on the spot with previously learned vocabulary.

Kahoot was another interactive tool employed in the course to foster the students' speaking abilities. *Kahoot* was used one time in Unit 1, Lesson 4, in the Warm-up stage. The students competed against each other in an online game to identify key vocabulary about the topic of the lesson (movement illusions induced by tendon vibration after chronic stroke) in the form of a pop quiz. Based on the unstructured and structured observations, when playing the game, the learners were observed highly enjoying the activity and having fun as demonstrated by their cheerful facial expressions and celebrations when they got the correct answer, and there were no technical issues with the application.

LIVEWORKSHEETS was also an example of a technological resource that the team implemented just one time in the course. The team created a task in LIVEWORKSHEETS where the students watched two different videos for the main task of Lesson 11, in Unit 3. According to the information recovered from the structured and unstructured observations, in this task the students appeared to have no difficulties while working on the website because, as expected, they were able to take necessary notes for guiding questions about the information from the videos embedded into the digital handouts. The purpose of the task was to complete the worksheet in pairs in BORs, where the learners were required to share their screens and sound, take as many notes as they could while watching, and then exchange the information with their classmates. For the exchange of information, the learners were observed helping each other complement their ideas (in case any relevant information was missing in their notes), discussed differences in their answers by demonstrating agreement and disagreement, and negotiated meaning by selecting the most suitable answers to the provided questions, for instance, "Can you play the video again?", "What is the answer for #2?", and "Do you agree with this answer?"

Flip was often used for asynchronous post-tasks in units 2 and 3 for the learners to be able to record themselves and practice their oral production. For example, in Unit 2, the students were asked to record themselves on a video using proper rising intonation to ask questions (Lesson 6), correctly pronounce the final -ed sounds of the regular verbs in the past tense (Lesson 7), and use the present perfect and the simple past tenses to talk about their personal, academic, and professional achievements and experiences (Lesson 9). In Unit 3, Lesson 10, the students recorded themselves paraphrasing key information from a video using new vocabulary. The students were trained and constantly reminded about how to use *Flip* and its features for their recordings.

The course *English for Physical Therapy* also incorporated blended e-Learning tasks using only authentic materials. These were implemented as posttasks where the team designed original handouts combining asynchronous work from a previous class with synchronous work in the following. For instance, in Unit 3, Lesson 11, in the asynchronous post-task, the students were able to extract discourse markers from the video they did not watch during class time and focus on language structure by classifying sentences with modals according to their corresponding use to report in the next lesson. In Unit 3, Lesson 12, in the asynchronous post-task, the students watched an educational video about PT for shoulder pain. The objective of the task was to be able to successfully define key vocabulary from the video, review the present continuous and the future with *be going to* to explain steps of a procedure during a therapy session, and arrange statements in the correct chronological order. Similar to Lesson 11, the students brought their answers to the following session to compare them in what seems to have been a meaningful exchange of ideas where the student-teachers, in a more passive manner, mediated the discussion. For instance, a student asked to share her definition of regional interdependence, and then continued providing the answers for items 2 and 3, encouraged by the group and the lead teacher. Next, another student provided the correct order of the statement for the second part of the task, for which no further questions were asked by the group since all students had the same answers.

Working on online-learning tasks seems to have highly engaged the learners to carry out the activities in a fun and friendly manner. The students always had positive comments about the layout, the vivid colors, the animations, and the content studied or reviewed via the applications used in the course, such as "I like the Halloween design," "We finished, this activity was very good," and "We are playing again because we got two mistakes." As observed in the recorded lessons, the implementation of online learning resources provided the learners with plenty of opportunities to stay focused on the tasks while interacting in the target language, meaning that e-Learning seems to have been effective to improve the students' speaking performance. For example, in Unit 3, Lesson 10, Pre-task 1, the supervisor in charge noted that the *Wordwall* task employed in the lesson was "easy to complete but challenging enough because of the potential pronunciation difficulties on which it focused." In other words, this observation suggests that e-Learning resources allow the students not only to learn in a ludic manner, but also to acquire knowledge of essential linguistic features, such as correctly pronouncing technical vocabulary related to PT, which can result in an improved oral production. The data presented matches with the statements by Dwaley (2007, as cited in Banditvilai, 2016) about the opportunities that e-learning tasks provide to students to further practice and expand their knowledge on topics studied in class.

According to the unstructured and delayed structured observations of the course, while the students worked in BORs, they were often seen reporting key information of recently acquired knowledge through the online tools employed in the course. For example, in Lesson 11, *LIVEWORKSHEETS* was used as the carrier content for the main task. In that lesson, in one of the BORs, a student reported that he had treated patients recovering from a stroke before. In another BOR, a student reported that he had received special training to tend to children in the emergency room. Back in the main session, a couple of students were selected to share an interesting piece of information they learned from their classmate's explanation. These students mentioned that they compared the similarities between the two types of PT watched in their assigned videos, and both came to the conclusion that "the main purpose of physical therapy is to help the patients to learn something new." Thus, the previous observations seem to indicate that the use of online tools in an ESP setting can be beneficial for the students to foster their oral reporting skills, which coincides with Tanveer (2011, as cited in Banditviliai, 2016) claims that the

integration of online resources can expand and reinforce the knowledge studied in class.

In addition to the synchronous online tasks used in classes, the team also implemented asynchronous post-tasks in the form of blended e-Learning via the recording platform *Flip* and original handouts to balance the contents covered in class. These asynchronous post-tasks served as an extension of parallel tasks for the students to practice and tackle new material at the pace that was most adequate to them. The team created asynchronous speaking post-tasks in both Unit 2 and Unit 3 so that the learners could have more opportunities to complete additional tasks autonomously and practice in the target language to improve their oral proficiency using this blended e-Learning approach.

The student-teachers checked the students' recordings on *Flip* on a weekly basis; this type of task allowed the team to monitor the learners' performance in the post-tasks and provide immediate feedback by entering comments below each student's recording. Unfortunately, most of the time only half of the learners recorded themselves via the application, so there was relevant data missing for the purposes of this research. The team believes that assigning a classmate to each other to provide feedback on the application (so that it was not the student-teachers doing so all the time) could have helped the learners to increase their completion of post-tasks. Moreover, having the post-tasks as a graded portion in the evaluation could have also helped to motivate the students to complete these tasks. Despite the fact that the implemented post-tasks on *Flip* did not render the set expectations, the team can conclude that the application was convenient in Units 2 and 3 since its purpose was to permit the learners to display their own understanding and knowledge of the

contents covered during class time by working on complementary tasks aimed at completing the lesson cycle in a meaningful manner.

Another means of e-Learning implemented in the course was original handouts made by the student-teachers, often used as asynchronous post-tasks for the participating students to further work on the topics studied in class. Through these post-tasks, students had the opportunity to share their own ideas and answers in the following session with the rest of the class to either confirm or reject the answers they had prepared. For example, according to the unstructured observations, in the warm-up stage of Lesson 13, the students explained to the class the definitions they had written in a negotiation of meaning that was deemed effective, with limited intervention from the lead teacher and unanimously agreeing on the chronological order of the statements in the second part of the task. Furthermore, the designated supervisor of the lesson expressed that the students were able to discuss their information with the entire class instead of simply comparing their responses with the answer key.

Through the implementation of online resources, the students were able to orally participate in the class activities and acquire knowledge of language related topics covered in the Practicum. Moreover, the student-teachers and some supervisors observed that while the students performed e-Learning tasks, they seemed to show a large degree of autonomy to ask for help or clarification, offer help to others, and organize their work in BORs using the target language. Some examples of the learners' utterances used were: "Can you share your screen?", "I think the correct answer in #2 is C," and "Why we don't ask Gustavo?" [*sic*]. These outcomes match with Dwaley's (2007, as cited in Banditvilai, 2016, p. 221) statements about the usefulness of tasks involving e-learning tools to encourage

learners to seek, evaluate, share, and learn about relevant topics. Based on the examples above, it can be concluded that a combination of interactive and relevant materials and tasks for the students to further practice speaking via e-Learning seems to have helped them to develop their oral production. This information also indicates that online learning resources drew the expected results for most of the sub-constructs that the team had previously set for the learners in the course.

Games

Several authors have researched techniques to engage learners to participate and be more proactive during the lessons. Most point to gamified lessons as being highly beneficial to the students' development of language, problem-solving, and critical-thinking skills. Moreover, games can increase the students' senses of healthy competition and equal collaboration and responsibility to achieve an objective in common (Fajariyah, 2009; Ulviana, 2011; Villamil, 2012; Harmer, 2015; Hernández-Chérrez et al., 2021). Since the course *English for Physical Therapy* is an ESP and TBLT course, the team made the decision of using games at specific moments in the units (mostly for warm-ups and pre-tasks) as a means to lower anxiety and stress levels (Zarutskaya et al., 2018), learn new vocabulary, and prepare them for the main tasks, and achieve the course goals and objectives. A summary of the games implemented during the course is presented next.

Table 13

Lesson	Description of the Task
Unit 1,	The students played a game using Jamboard, a digital interactive
Lesson 5,	whiteboard. The students were divided into two teams to compete
Pre-task 2	against each other by taking turns matching the spoken words with
	their corresponding pictures.
Unit 3,	The learners recognized key vocabulary related to hydrotherapy
Lesson 12,	while playing a hangman game.
Pre-task 2	
Unit 3,	The team used the total physical response (TPR) approach for the
Lesson 13,	students to act out the words displayed on the presentation and read
Pre-task 2	examples taken from the video of the lesson.
Unit 3,	The students played a simple game called word chain. They had to
Lesson 14,	take turns saying words related to physical therapy (or healthcare in
Warm-up	general). Then, the next student had to speak another word that
	began with the last letter of the previous word, e.g., strok e ,
	electroconvulsive therapy, and so on.
Unit 3,	The team used Playfactile, an educational tool to create customized
Lesson 15,	jeopardy games, to assess the students' understanding of the most
Warm-up	relevant takeaways of the course in an interactive and fun way.
	Playing in teams of three, the students had to choose a question
	among the categories of vocabulary, pronunciation, the course, and
	grammar, and provide the correct answer to win points.

Games Implemented during the Course

According to the unstructured and delayed structured observations, when playing games in the course, all the learners were often observed opening their microphones to state the correct answers of items, such as vocabulary and pronunciation questions, which were already familiar to them. For the unknown words, only the higher proficient students attempted to guess the right answers. This may indicate that learners would probably participate in games whenever they feel more certain about the correct answers. It seems that lower-achieving students would prefer to refrain from participating in items deemed more difficult, hoping that a higher-achieving classmate (or even the teacher) provides the correct answer. This way of approaching some games at the beginning of the course was not expected by the team; nevertheless, it was observed that in further games the students participated more equally by helping each other guess the correct answers, discussing the possible correct options, showing agreement and disagreement, and negotiating meaning. The students were often observed resorting to their classmates and the student-teachers to obtain more hints and win the games. This data suggests that games were effective in terms of helping the students to practice pronunciation, gain knowledge of technical vocabulary, and employ other skills, such as the soft skills of collaboration and empathy. In addition, many supervisors qualified the games in the course as effective tasks to promote meaningful student speaking-time and review the use and pronunciation of key vocabulary to be able to perform well at later stages in the lesson. This evidence reflects the benefits of using games in class identified in the literature, such as promoting learners' interest and engagement during lessons and fostering their willingness to speak (Salazar & Villamil, 2012, as cited in Hernández-Chérrez et al., 2021).

In Unit 3, in Lessons 12 and 13, the student-teachers deliberately selected games as pre-tasks to help the learners to activate their schemata, increase their concentration and engagement, and prepare for the upcoming evaluation in the lesson (video-comprehension quiz). Based on the structured observations, in both opportunities, the learners seemed to enjoy playing the games based on their facial expressions and active participation. Furthermore, they appeared to make a great effort to recall the correct answers and reinforce the knowledge acquired throughout the course. In fact, the supervisor observing lesson 13 highlighted the importance of playing purposeful games as a means for the students to recall key information and review vocabulary in a salient manner, increase confidence, practice pronunciation necessary for the main task, and be able to apply that knowledge in the evaluation. As Fajariyah (2009) and Zarutskaya et al. (2018) state, games can be a means to lower students' anxiety and engage them in more diverse and motivational learning processes. The data suggests that games which are carefully designed to review key information from previous lessons in a fun manner and involve all the students in an ESP course, regardless of their proficiency level, seem to be highly effective for the learners to develop their speaking performance, especially in terms of active participation, appropriate use of PT vocabulary, and correct pronunciation of recently learned vocabulary.

In conclusion, the data in this section suggests that the team's decisionmaking for the implementation of games in the course was considered by both the learners and the supervisors to be effective to keep the students actively engaged in the course, promote equal participation in the tasks using the target language, reduce their stress and anxiety levels, foster their confidence, practice and review

essential vocabulary and pronunciation, and thus, help them develop their oral performance based on the sub-constructs previously defined.

Classroom Management Techniques

This section describes the classroom management techniques and techniques to encourage speaking implemented during the course to foster the students' speaking production in terms of the sub-constructs listed at the beginning of this reflection.

Grouping Techniques

This section analyzes the use of grouping techniques as a strategy to foster the students' speaking proficiency during the course based on the sub-constructs mentioned at the beginning of this chapter. Plenty of tasks were performed in groups throughout the course; however, this section on classroom management techniques focuses on analyzing only the speaking tasks consisting of class discussions and conversations since these are the types of tasks which relate more to the research question. Due to the heterogeneous nature of the Practicum group and the number of students, all the grouping techniques implemented during the course consisted of forming groups with mixed proficiency level students (Blatchford et al., 2003; Cohen, 1994; Scrivener, 2012).

According to the structured observations of Unit 2, Lesson 6, pre-task 1, the students exchanged personal, academic, and professional information by taking part in conversations in pairs using questions they had prepared in the previous lesson. This type of task provided the students the opportunity to be exposed to new vocabulary related to PT, practice how to formulate questions in simple present and simple past, and exercise their communicative abilities in conversations with classmates. As usual in the course, the students worked cooperatively within a

friendly atmosphere of interaction. They appeared interested in the topics they were talking about, asked appropriate questions, such as "When did you decide to study something related to health?", "What kind of patients do you prefer to help?", and "What is your favorite area of specialization?", and respected each other's turn to speak. This data reflects some of the benefits of working in pairs indicated by the literature such as the possibility of working collaboratively with peers with similar interests (Blatchford et al., 2003).

Regardless of their proficiency level, all pairs of students worked successfully with each other and were able to take part in a conversation between two PT colleagues. Some students corrected themselves when speaking, and in most groups, higher proficiency students often helped other classmates with the meaning and pronunciation of words in English. For instance, one student self-corrected the word "hundred" for "thousand", another student helped a classmate with the meaning of the word "theme." Another student explained to the class what triage was and how he uses it every day at work, and another student helped a classmate with the pronunciation of "rehabilitation." As described in the literature, stronger students can guide and help the weaker students to fulfill the goals of the tasks when working together in groups (Scrivener, 2012). Furthermore, while completing this task, most students showed willingness to use the target language: they did not seem afraid of making mistakes or asking questions if they did not know how to say certain words, for example, "I don't know what it means. What is iontophoresis?" and "How do you pronounce iontophoresis? What's that?" Most learners showed an appropriate level of knowledge in the target language to accurately correct themselves and help classmates when interacting, which may be due to the fact that the nature of this type of speaking strategy allows students to engage in natural and meaningful

communication since they need each other to complete the task (Cohen, 1994). This data suggests that the task engaged students in active participation and provided them with the opportunity to practice the appropriate use of language and formality of conversations with PT colleagues.

In the main task of Lesson 7, Unit 2, the students described their occupations, academic backgrounds and interests, and their work experiences to classmates by taking part in a conversation. For this task, only five students were present, so they were grouped as a pair and a group of three. While participating in this task, the students talked about various physical therapy topics like future job opportunities, the procedures to tend to patients who suffer a car accident, their experiences when attending an international conference for PT and how embarrassing it was for some students to communicate in English with native speakers, the use of technological tools to treat patients with chronic pain, and the importance of empathy when working as physical therapists, among many others.

Based on the structured delayed observations, the students appeared to be highly engaged and motivated to speak about their preferred topics. In this task, students also had the opportunity to formulate questions to fellow colleagues in a formal manner, for instance, "Where would you like to work in the future?", "As a paramedic, what's the procedure to help a patient in a car accident?", and "Have you used technology, for example, virtual reality or something like that to treat a patient?" and use common expressions to show interest when speaking to colleagues, such as "That sounds very interesting" and "For real? And what did you do?" "Wow! That is so cool!" In addition, some students noticed that they were pronouncing some words incorrectly while speaking and immediately proceeded to effectively selfcorrect, for example, the pronunciation of words like "duties," "responsibilities," "graduated," "emergency," "certifications," among others. The observed ability of these students to notice some features of the target language points to a level of improvement in their language production that can be linked to the opportunities for practicing the language through speaking tasks (Cohen, 1994). From the outcomes of this task, it was noticed that the students actively participated and worked cooperatively when conversing in groups. The students exhibited an atmosphere of cooperation and engagement while using the target language regardless of their classmates' proficiency levels.

Similarly, during Pre-task 1 in Lesson 8 and Lesson 9, Unit 2, the students participated in conversations to exchange personal experiences and professional interests. These tasks were designed so that the students could have two conversations about similar topics with different classmates to prepare for the speaking exam of the unit. As observed in the class recordings, the task provided students the opportunity to talk about their academic backgrounds and previous job experiences. In a couple of instances, a couple of the less-proficient students hesitated slightly when trying to express themselves and thinking about the correct word they wanted to use; however, they were able to successfully convey their ideas in spite of lacking some vocabulary and small grammar errors. For instance, a student wanted to talk about her experience with a PT professor in a course at university; conveniently, her professor was her classmate for the task, so she used pseudonyms and often talked accurately in third-person singular to avoid using real people's names, for example, "This didn't happen to me, it happen [sic] to my friend Alejandra." Another student explained her plans for her postgraduate studies in a university abroad by making correct use of future tenses, such as be going to and would like to: "There's an opportunity for me to study a Master's Degree in Argentina, so I'm planning to leave next year." This suggests that the students were not afraid of making mistakes, and they were willing to use the target language even when facing some difficulties when interacting with each other. As the literature states, providing the appropriate conditions for students to work by themselves without much intervention from the teacher can lower their anxiety and increase their confidence (Cohen, 1994).

While working on the same task, one student mentioned that he had not liked his first job at a call center and that he much preferred his current job as a PT professor. Another student spoke about her participation in an upcoming international conference where she was going to give a speech about flexibility and mobility as part of her job, to which the other classmates in the group and the student-teachers congratulated her and expressed their support for her participation at the conference. During these conversations, the students showed that they maintained good relationships when working in groups and were interested and motivated to use the target language to express themselves. Furthermore, according to the supervisor observing the class, the tasks implemented in this lesson provided the students with plenty of opportunities for interaction. Thus, the team considers the conversations to have been highly useful to promote the students' speaking skills through effective group work, equal participation, and plenty of time to speak, which corresponds to the benefits of grouping techniques stated by Cohen (1994).

Similarly, during the warm-up of Lesson 9, Unit 2, the students were grouped as a whole class to brainstorm ideas about the appropriateness of topics to discuss during a PT conference. In this task, the students shared their opinions on specific topics that they should or should not include in a conversation when meeting someone at a PT conference. Next, the lead teacher raised follow-up questions for

the students to explain the reasons for their opinions on the topics. For instance, a student expressed that it was inappropriate to ask about home addresses at PT conferences because she could not conceive the idea of having a stranger at her house. Another student said that they must always start and end a conversation in a formal manner with proper greetings and farewells. Last, another student highlighted the importance of using an adequate tone of voice in order to be understood by their colleagues and avoid making them feel uncomfortable. Although this was a short activity, the students participated actively and were involved in the task as expressed by the supervisor. The task was considered by the team to be useful for the students to practice sociolinguistic appropriateness and language features used in conversation at conferences, pronunciation, and the meaning of key vocabulary needed for the upcoming tasks in the lesson.

For the speaking exam in Lesson 9, the student-teachers organized the corresponding pairs of students with similar proficiency levels together to complete the speaking exam. Only in the case of three students who were not able to join that lesson, one of the student-teachers role-played as an attendee at a PT conference to help those students complete the task; however, his role mostly consisted of asking the students questions and making follow up comments to what they said to give them more opportunities to speak. According to the unstructured and structured delayed observations and the results obtained in the summative assessment, all the students who worked in pairs and the ones who performed the task with the help of one of the student-teachers were able to complete the task requirements. In other words, the learners complied with the allotted time to prepare and present the role-play and followed all the required steps in the given instructions, which suggests that this grouping technique may have been useful in terms of achieving the goals of the

task. For example, the students were observed behaving cooperatively by discussing the information they were going to present, who was going to start and end the conversation, and the types of questions they would like to ask each other: "Maybe I can say that I'm interested in research and you say you are investigating new techniques with virtual reality," "I want to be a professor because I'm a professor at UCR, and I can use my knowledge for the role-play. What do you think?", and "And for the finish [sic] I can say: Can I have your email or phone number to contact you in the future?" The students who were paired up with the assistant teacher also showed cooperative demeanor by agreeing on being mostly interviewed by the teacher to maximize their speaking time as seen in the following interaction: "Maybe you can say that you're looking for partners to collaborate with you on your investigation." "Can I ask you some questions about your background?", and "OK, I can ask you 2 or 3 questions, and you can ask me more." This data suggests that the pairing system employed by the team seems to have been conducive to mutual responsibility and cooperative behavior, which likely contributed to their successful completion of the task. As related literature states, cooperative tasks are suitable activities that can foster students' oral proficiency by making them responsible for the completion of tasks while exposing them to plenty and equal participation (Cohen, 1994).

For the warm-up of Lesson 10, Unit 3, as a whole class activity, the students exchanged ideas about treatments for plantar fasciitis. Even though it was a short activity, the students spoke about various treatments which physical therapists can use to help patients who suffer from that condition, such as the use of electricity, massages, the use of appropriate shoes, ice, stretches, etc. The task gave students the opportunity to practice new vocabulary and pronunciation of key vocabulary (iontophoresis, dorsiflexion, mobilize, calcaneus), and exchange opinions about PT treatments, for example, "I have never used iontophoresis in my life," "Is iontophoresis with electricity?" [*sic*], and "I prefer to use my hands, my patients told me they don't like to feel electricity on their bodies." The students seemed engaged while working collaboratively and sharing their opinions according to the unstructured observations and the supervisor's feedback of that lesson. In fact, the supervisor expressed that the task served as a proper source to use the students' expertise to generate relevant language and content. As expressed by Blatchford et al. (2003), when working in groups, students have the chance to build up trust and respect for each other to solve a conflict or achieve the goal of a task.

In pre-task 2, Lesson 12, Unit 3, the learners practiced key vocabulary about hydrotherapy by means of a whole-class activity. The task consisted of a hangman game where students worked as a team to guess the key vocabulary displayed on a presentation. As usual in these types of group-activity discussions during the course, the students seemed engaged and motivated when participating and expressing their ideas and even laughing at some instances, which suggests that they were enjoying their participation in the task as identified in the structured observations and expressed by the supervisor of the lesson. The task seemed to be an effective and fun activity for students to practice vocabulary and pronunciation of key terms related to hydrotherapy.

As mentioned before in this chapter, on the last day of class, the students were asked to complete a questionnaire to know about their opinions on the implementation and their perceived effectiveness of speaking tasks during the course. In this questionnaire, all of them stated that discussions and conversations in class were highly effective to foster their English-speaking skills (see Table 5).

The Students' Opinions on the Effectiveness of Tasks to Improve their Speaking Skills

Task	Students' Perception of Task Effectiveness			
	Very much	Somewhat	Only a little	Not at all
Conversations	7	0	0	0
Discussions	7	0	0	0
Games	5	1	1	0
Role-plays	4	2	1	0
Presentations	3	3	1	0

Note. N= 7. Source: Formulario de Evaluación Final del Curso *English for Physical Therapy*. Researchers' own elaboration.

Table 14 shows the students' opinions on the effectiveness of specific tasks used throughout the course to improve their speaking production. As can be seen, the students considered all the speaking tasks as very effective to improve their speaking abilities to a certain extent. There is an evident incline towards discussions and conversations as the preferred types of tasks to improve speaking skills as mentioned before. More than half of the students also considered role-plays and games as very effective, followed by presentations, which were rated between very effective and somewhat effective tasks. The team believes that the students' preference towards conversations and discussions may be due to the option of talking about their preferred topics, exchanging ideas, and sharing experiences as physical therapists in a more natural type of communication about events related to their professional environments (García-Sánchez, 2019). These opportunities to speak are possible in tasks such as conversations and discussions whereas in roleplays and presentations, speech tends to be a little bit more fixed. Students seemed to prefer tasks in which they were able to speak about their preferred PT topics, as well as to listen to other classmates' experiences and ideas. Based on the data displayed on Table 14, it is noticeable that the tasks of class discussions and conversations performed during the course were considered by the students as effective strategies that motivated them to interact with classmates and produce in the target language. This matches with the statements in related literature that identify discussions and conversations as tasks that allow students to work collaboratively while driving them to use the target language (Blatchford et al., 2003).

It is worth mentioning that regarding the students' proficiency level, all of them had the opportunity to work with all their classmates while completing the tasks in groups throughout the Practicum course. In the same way, most of them expressed that they felt comfortable working with any of their classmates regardless of their proficiency level (see Table 15).

Table 15

The Students' Preferences when Working in Pairs or Groups

Grouping technique	Students' Preferences		
	Number of times selected by the students		
Working with any	5		
classmate regardless of			
their proficiency level			

Working with	2
classmates with a higher	
proficiency level	
Working with	0
classmates with a lower	
proficiency level	
Working with	0
classmates with a	
similar proficiency level	

Note. N= 7. Source: Formulario de Evaluación Final del Curso *English for Physical Therapy*. Researchers' own elaboration.

Table15 shows the students' preferences to work in pairs or groups based on their perception of their classmates' proficiency levels in the target language. It can be observed that only two students expressed their preference to work with more proficient students, while the rest stated that they felt comfortable completing the class activities with any classmate regardless of their proficiency level. These two responses are believed to be from the less-proficient students in the course, which relates to Scrivener's statement (2012) that in some cases, low-achieving students prefer to work with high-achieving classmates since the latter can take a supportive role to help and guide the less-proficient students to fulfill the class task.

Furthermore, the other five responses may come from the remaining students who showed a more similar proficiency level throughout the course according to the unstructured observations and summative assessment. In the same way, according to the unstructured and structured observations, students showed a positive attitude and cooperation when working in pairs or groups during the entire course. Moreover, the positive group atmosphere and fun manner that the learners interacted with each other on many occasions was evidence of the benefits of grouping techniques. This may be due to the students being very professional while interacting with each other and to the way that these tasks were designed for them to work and produce in the language, which reflects most of the responses in Table 15.

According to the data presented, the different grouping techniques implemented during the course seemed to have positive results in this group of students. The group generally appeared to be focused on the tasks while communicating in the target language and respecting each other's talking time in a respectful manner. This is believed to be due to the learners' positive attitude and active participation demonstrated throughout the course as well as the training and support they received from the student-teachers. It can be concluded that the different grouping techniques for pair and group work implemented during the course helped the students achieve the goals of the tasks while fostering their speaking skills in terms of vocabulary, pronunciation, active participation, appropriate use of language functions, sociolinguistic appropriacy, and active participation regardless of their proficiency level.

Techniques to Encourage Speaking

The techniques to encourage speaking abilities consulted in the literature such as prompting questions, nominating students, including their preferred topics, using pictures, inspiring ideas, maximizing speaking time, and providing the same conditions for all students were actions taken by the student-teachers as a means to manage the class dynamics and not actual tasks in the lesson cycle. Therefore, they

were included in the design, materials, and instructions of the other speaking strategies already covered in this reflection.

Conclusions

Various strategies were implemented throughout the course of *English for Physical Therapy* to foster students' speaking skills. Based on the observations from the student-teachers, and the opinions from both the supervisors and the students, it can be concluded that all strategies implemented contributed to foster the students' speaking abilities in terms of the previously identified sub-constructs of active participation, appropriate performance of language functions, sociolinguistic appropriacy, appropriate use of PT vocabulary, and correct pronunciation.

Tasks that involved critical thinking and assessment of the students' own production were deemed relevant to make students aware of various language features, as well as to notice and monitor their own performance in the target language. The use of HOTS questions was an efficient resource to stimulate thinking, activate schemata, and promote the students' oral production. HOTS were also deemed highly versatile since they can be added in conjunction with plenty of other tasks as reported in the section *The Implementation of High-Order Thinking Skills (HOTS)*. This type of task provided students the opportunity to express their opinions and exchange ideas on different physical therapy topics which they seemed to enjoy based on their active participation and constant use of the target language while addressing the HOTS tasks.

Public speaking strategies like role-plays and presentations were seen as effective tasks that provided plenty of opportunities for the students to produce in the target language. In these types of tasks, the students were able to learn and use appropriate and formal language to converse with fellow colleagues in authentic contexts like international PT conferences, highly relevant for their needs as stated in the NA. The implementation of useful language in these activities was noticed to be

suitable to guide and help the students achieve the goals of the tasks. In addition, role-plays and presentations were perceived as useful activities for the students to learn and practice technical vocabulary and pronunciation, practice the level of formality of professional conversations in their field, and engage in active participation since they provided plenty of time to share their knowledge on many topics related to PT and healthcare in general.

Games and online interactive activities were useful tasks to prepare and help the students achieve the goals of the lessons. These tasks were mostly used to activate the students' previous knowledge, introduce new vocabulary, and practice pronunciation. Although most games implemented during the course did not provide plenty of time for the students to produce in the target language as mentioned by some supervisors, the student-teachers considered them as effective activities to learn key vocabulary, lower students' anxiety, and promote group work. The students actively participated and seemed to enjoy the structure and competitiveness of the games implemented in the course. In brief, games were deemed appealing tools to motivate the students in the course; nonetheless, they should be carefully planned so they do not take too much time of the synchronous session, especially in an ESP virtual context of 2-hour lessons per week.

The use of some asynchronous online tasks was deemed somewhat successful by the team based on the learners' response towards them. Even though the activities were carefully planned and relevant for the students' needs, some students were reluctant to complete the asynchronous tasks throughout the entire course, which led to some issues in subsequent lessons such as the need for further explanations on already-covered content. However, when completed by most

students, these types of tasks seemed very useful to support the students' knowledge on the topics covered in class.

In terms of grouping techniques to promote speaking, tasks such as conversations and class discussions proved to be effective group activities that significantly promoted speaking. According to the students' opinions, these tasks were considered as the most effective activities to practice and improve their speaking skills. Class discussions and conversations were suitable tasks that provided plenty of opportunities to speak about work-related experiences as physical therapists and to promote active participation and collaborative work in the group of students. These aspects seem to have promoted their interest and motivation to complete the tasks and use the target language. These activities in groups also seem to have allowed for more natural and spontaneous speech; the students displayed positive relationships among themselves, supported each other, and worked successfully regardless of their proficiency level. Moreover, the students had the chance to work with every other classmate when working in pairs and groups, which allowed them to share and learn from each other. This seems to have worked effectively for the group since the students always showed willingness to work with any classmate as seen in the questionnaire administered on the last day of classes.

Based on the overall experiences from the course, the student-teachers believe that all speaking strategies implemented during the course contributed to fostering the students' speaking performance regardless of their proficiency level. All strategies used can certainly benefit the students' speaking abilities if they have a meaningful communicative objective, are carefully planned, and clearly comply with the students' needs and wants. This was the main objective of the task cycle and course design the student-teachers intended to implement throughout the lessons. In

the same way, for the team, in an ESP and TBLT course, there should be a balanced combination of various speaking tasks that provide students with opportunities to interact with each other, learn new vocabulary related to their field, and practice pronunciation, grammar, and fluency in situations typical of their academic and professional contexts. The implementation of speaking tasks should also be accompanied with a positive class environment, engaging materials, and both the teachers and students' commitment to use the target language to achieve the goals in similar courses.

Limitations

Even though this research can offer valuable insights for other ESP courses, the Practicum also posed limitations to the student-teachers. The main limitations were related to the final number of students who remained in the course, attendance, time management, and completion of the asynchronous post-tasks. Factors such as having fewer students than originally expected, constant late connections and absences, time constraints while completing some tasks during class such as roleplays and games, and the unwillingness of some students to complete the post-tasks throughout the entire course hindered the team's attempt to collect additional insightful data for this paper.

Recommendations

Based on the supervisors' suggestions and the student-teachers' own retrospective look at the course after its completion, some recommendations have been raised to implement in similar courses. The first set is intended to overcome the limitations mentioned before.

First, to maintain a higher number of students enrolled in the course, instructors should foster an exciting learning environment through active discussions,

engaging content, and timely feedback to keep students interested; offer personalized assistance (office hours, discussion forums, or one-on-one sessions) to address individual learning needs; and ensure that the content is still relevant and aligned with students' expectations.

Second, for attendance issues similar to those in this project, the team recommends setting clear attendance policies in the course syllabus which highlight the importance of attendance and how it contributes to learning outcomes. Additionally, it is advisable to send regular reminders and announcements about upcoming sessions to keep students informed and motivated.

Third, to address time constraints for task development, such as role-plays, either provide plenty of time for students to practice their scripted products (if the task is indeed a scripted role-play), or prior to presenting their conversations, explicitly instruct them not to read their scripts. Games and online resources must be carefully planned so they do not take too much time of the synchronous session. Thus, it is important to consider how much time of the lesson will be invested in explaining the instructions, having the students perform the task, and closing the task (feedback from the instructors and questions from the learners).

Fourth, to rectify the problem of pending asynchronous post-tasks, and although it is the learners' responsibility to comply with homework assignments, it is recommended to add a portion of the final grade to asynchronous post-tasks to motivate the students to complete them.

The second set of recommendations emerges from the team's experience teaching the ESP course, the research findings, and suggestions by supervisors. Specifically, a framework for implementing HOTS tasks can be derived from the features identified during the course that contributed to the development of the students' oral production as defined by the sub-constructs for task effectiveness. Based on the team's findings about HOTS tasks, it is recommended that they fulfill the following requirements:

- They should be highly appealing for students and their professional fields.
 When implementing HOTS tasks, instructors can raise questions that engage students in discussions about their preferred topics where they can employ their creative thinking and share their own experiences.
- They should allow for open and multiple answers, offering a range of perspectives, promoting collaboration, and exploring diverse ideas to prevent yes/no or vague responses from learners.
- They should give students the opportunity to formulate their own HOTS questions. As previously discussed, when the students formulated their own HOTS questions, they were often observed displaying an increased engagement and active participation in class discussions and activities.
- 4. They should stimulate the students' critical thinking to share and further explain their ideas. This was the case the team observed in the course when the learners made complex ideas understandable to their classmates by using clear communication from a deeper understanding of their own ideas through critical evaluation.
- 5. They should challenge the students' current proficiency level in the target language. For instance, the learners in the course seem to have fostered the development of new skills, such as better retention of the contents and increased self-confidence since HOTS seem to have made them more comfortable with higher-level thinking and problem-solving.

In addition to these aspects and by recommendation of the supervisors, it is advisable to explore other frameworks for the implementation of HOTS tasks in ESP courses, such as Project Zero's Thinking Routine Toolbox from the Harvard Graduate School of Education (2022) for establishing a thinking routine, composed of strategies to introduce, synthesize, organize, consider controversies, dilemmas, and perspectives, and generate possibilities and analogies. In other words, a thinking routine can foster a structured and organized thought process. First, introducing, synthesizing, and organizing information facilitates a deeper and more comprehensive understanding of the topics covered in the course. Second, considering controversies, dilemmas, and various perspectives encourages critical thinking and the evaluation of multiple viewpoints. Lastly, generating possibilities and analogies stimulates creativity by exploring unconventional ideas. In brief, the routine's ultimate purpose is to cultivate robust problem-solving skills by encouraging diverse thinking approaches and solutions (Harvard Graduate School of Education, 2022).

Furthermore, revising the work of other authors and researchers about the implementation of HOTS with different populations (children and teenagers) and in other contexts (English as a Foreign Language and General English) can increase the scope of the framework to be used in an ESP course. For example, according to several authors, teaching students how to use problem-solving strategies and creative thinking, make inferences, encourage brainstorming or consideration of alternative explanations, and elaborate their answers can also be beneficial for enhancing the learners' speaking skills in an ESP setting. Further, problem-solving and creative thinking often require discussing a variety of concepts and ideas. This exposure to different topics and situations can expand students' vocabulary and

familiarity with different language structures. As a result, they become more adept at using a diverse range of words and expressions, which enriches their speaking abilities (Thomas & Thorne, 2009; Cox, 2019). Teaching students how to make inferences can improve their speaking skills by enhancing their ability to analyze information, understand underlying meanings, and draw conclusions. This skill enables students to communicate more effectively, support their arguments with evidence, and engage in deeper conversations by understanding implicit messages (Thomas & Thorne, 2009; Cox, 2019). When students are encouraged to use brainstorming or consider alternative explanations, this process allows them to explore diverse perspectives, express ideas more imaginatively, and participate in richer discussions. By considering diverse viewpoints and explanations, students can learn to articulate their thoughts more comprehensively, leading to higher impromptu communication skills (Widyastuti, 2022). Last, when students are taught to expand on their thoughts, provide details, examples, and explanations, they can refine their communication abilities. Elaboration encourages clarity, confidence, and the ability to convey complex ideas effectively. This strategy improves learners' ability to present information logically and coherently, making their speech more understandable and engaging for listeners (Mursyid & Kurniawati, 2019; Widyastuti, 2022). By researching studies on the application of HOTS across various demographics and contexts, the suggested framework can pose helpful insights for its integration into other ESP courses.

In conclusion, these recommendations are based on specific situations experienced during the course, such as engagement, attendance, task development, and the incorporation of HOTS. As suggested in this paper, exploring frameworks for the application of HOTS in ESP settings can prompt a more meaningful learning process. Implementing strategies such as problem-solving, creative thinking, inference-making, brainstorming, and elaboration techniques seems to be effective to enhance learners' oral production. To conclude, the information listed in this section is intended to aid future research in education and contribute to the current knowledge on the topic of implementing learning and teaching strategies to foster students' speaking skills in ESP contexts.

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Appendix A

Semi-structured Interview with the Main Stake-holder

Preguntas para la entrevista con la persona contacto de la carrera de Terapia Física de la Universidad de Costa Rica, la señora directora Msc. Catalina Smith Molina.

- 1. ¿Podría describir al grupo? (ocupación, sólo docencia o realizan otro trabajo)
- ¿Cuál es el nivel de inglés del grupo? (principiantes, intermedios, avanzados)
- 3. ¿Han recibido algún otro curso de inglés?
- 4. ¿Utilizan el inglés en su trabajo? y ¿En qué actividades utilizan inglés y qué tan frecuente? (utilizan más escucha, lectura, comunicarse con colegas, etc.)
- 5. ¿Qué temas/contenido le gustaría recibir en el curso? (solo terapia física u otras ciencias)
- ¿Qué tipo de actividades prefiere que se den durante el curso? (individuales, grupales) (discusiones, juegos, debates, presentaciones orales)
- ¿En qué área del inglés desea que se enfoque el curso? (hablar, vocabulario, gramática, leer, o escribir documentos, escuchar, etc.)
- Finalmente, ¿podría enviarnos material auténtico donde ocupen el uso del inglés? (o proporcionarnos links de donde obtienen el material)

Appendix B

Cuestionario sobre necesidades del uso del idioma inglés para personal docente y estudiantes de la carrera de Terapia Física de la UCR

El propósito de este cuestionario es recolectar información relevante sobre el personal docente y estudiantes de la carrera de Terapia Física de la Universidad de Costa Rica acerca de las necesidades actuales y futuras del uso del inglés con fines ocupacionales. Las respuestas enviadas serán utilizadas con el único propósito de diseñar el curso de inglés, por lo que la información brindada se manejará de manera confidencial. Le tomará de 10-15 minutos completar este cuestionario. Sus aportes serán de gran importancia para la planificación y desarrollo del curso.

Información de contacto

Nombre:	
(correo electrónico):	
Número de teléfono:	
Edad: (20-26) (27-33) (34-40) (41-47) (48-54) (+55)	
¿Se encuentra actualmente trabajando? Sí No	
Si es así, ¿qué puesto desempeña?	

I. Experiencia previa con el aprendizaje del inglés

¿Ha tomado cursos de inglés después de terminar la secundaria? Sí __ No__

Si es así, ¿dónde y cuándo realizó esos cursos? _____

¿Cuánto tiempo de instrucción recibió? _____

¿De qué nivel eran los cursos realizados? Principiante__ Intermedio__Avanzado ___

En general, ¿cuál considera que es su nivel de inglés en:

- a) Habla? Principiante____ Intermedio___ Avanzado ____
- b) Escucha? Principiante____ Intermedio___ Avanzado ____
- c) Lectura? Principiante____ Intermedio___ Avanzado ____
- d) Escritura? Principiante____ Intermedio____ Avanzado ____

II. Uso actual del inglés

¿Utiliza el inglés en sus labores actuales? Sí__ No ___

Si es así, ¿para cuáles tareas utiliza el inglés? (marque con X, puede marcar varias opciones)

- ___ leer libros / artículos académicos
- ___ leer correspondencia / correos electrónicos
- ___ escribir libros / artículos académicos
- ___ escribir correspondencia / correos electrónicos
- ___ para participar en talleres, reuniones o conferencias como asistente
- ___ para participar en talleres, reuniones o conferencias como ponente
- ___ para interactuar con colegas durante talleres, reuniones, o conferencias
- ___ seguir instrucciones de manera oral
- ____ seguir instrucciones de manera escrita
- ___ dar indicaciones de manera oral
- ___ dar indicaciones de manera escrita
- ___ comunicarse con pacientes / compañeros de trabajo de manera oral
- ___ recibir / realizar llamadas telefónicas
- ___ otro (especifique) ______

III. Áreas de mejora del idioma inglés

Por favor ordene las siguientes áreas del idioma inglés según su necesidad de mejorar en cada una. 1 es el área donde más necesita mejorar y 6 la de mayor fortaleza.

habl	hablar fluido		lectur	a						
escu	_ escuchar / entender			_	_ escri	tura				
pron	unciar corre	ectamente		V	ocabul	ario				
Otra:	(indique	donde	la	ubicaría,	ej.	entre	la	2	У	3)

IV. Preferencias de aprendizaje

 ¿Cuáles de estas actividades de clase prefiere para aprender idioma inglés? Enumere las siguientes actividades de clase de 1 a 10 (1 es la de mayor preferencia y 10 la de menor preferencia).

debates	trabajos en grupo
discusiones en clase	memorización de listas de palabras
juegos de roles	relacionar palabras con ilustraciones
juegos	hacer ejercicios de llenado de espacios
lecturas	presentaciones orales

Prefiere alguna otra actividad (especifique)

2. Por favor complete las siguientes oraciones de forma que reflejen sus preferencias de aprendizaje.

Deseo tomar el curso porque
Creo que una clase se disfruta cuando
Las clases se vuelven aburridas cuando
Creo que una clase es útil cuando
Un buen profesor es una persona que
Un buen estudiante es una persona que
Aprendo mejor cuando

- 3. ¿En cuáles áreas del inglés desea enfocarse? Enumere las siguientes actividades de clase de 1 a 10 (1 es la de mayor preferencia y 10 la de menor preferencia).
 - ___ ampliar mi vocabulario relacionado con mi profesión
 - ___ pronunciar palabras correctamente relacionadas con mi profesión
 - ___ realizar presentaciones formales de forma oral
 - ___ mejorar mi escucha del inglés para conferencias / videos acerca de mi profesión
 - ___ participar en conversaciones en inglés en temas relacionados con mi profesión

- ___ realizar / responder preguntas en inglés
- ____ seguir instrucciones / indicaciones de colegas / dirigentes / encargados
- ___ proveer información /diagnósticos a pacientes
- ___ leer textos / correos relacionados con mi profesión
- ___ escribir textos / correos relacionados con mi profesión

Otras (especifique)

V. Comentarios finales.

Si así lo desea, puede dejar un comentario adicional acerca del curso, sus preferencias, sus expectativas, etc.

¡Gracias por completar este cuestionario!

Appendix C

Participants' individual profiles

Table 16

Individual Profile: Student 1	
General information	Student 1. Age 34-40
Position at work	She is a Physical Therapy professor at UCR, and she uses English in her current work.
Description of needs	She needs English to read academic articles, participate as an attendee in conferences / meetings, and to provide and follow written instructions.
Description of wants	She wants to focus on developing her speaking and listening skills while using interactive activities like games, debates and class discussions.
Experience with English and perceived proficiency	She has taken a four-month ESP course for Intermediate students.
	Her perceived proficiency level in English is intermediate in listening, reading and writing and a beginner proficiency in speaking.
Description of lacks	She believes that she needs to improve her speaking fluency, her listening skills and her vocabulary.

Individual Profile: Student 2	
General information	Student 2. Age 20-26
Position at work	She is not currently working. She is a Physical Therapy student at UCR.
	She uses English in her studies to read academic articles.
Description of needs	Based on her current needs, she only uses English to read academic articles.
Description of wants	She wants to develop her speaking and listening skills to participate in conversations related to her field, and to read texts on that same field.
	She prefers to participate in class activities like oral presentations, relate words with images, and fill in the blank exercises.
Experience with English and perceived proficiency	She has not taken any English courses after finishing high school.
	She considers to have a beginner proficiency level in all English macro skills.
	She even considers herself a true beginner.
Description of lacks	She considers that she needs to improve in all English areas with a focus on her speaking fluency, her listening skills and her pronunciation.

Individual Profile: Student 3	
General information	Student 3. Age 27-33
Position at work	She is not currently working. She is a Physical Therapy student at UCR.
	She uses English in her studies to read academic articles.
Description of needs	Based on her current needs, she only uses English
	to read academic articles.
Description of wants	She wants to develop her speaking and listening
	skills to participate in conversation related to her
	field, and to ask and answer questions in
	conversations.
	She prefers to participate in class activities like
	memorization of word lists, relate words with
	images, and fill in the blank exercises.
Experience with English and perceived proficiency	She has not taken any English courses after finishing high school.
	She considers to have a beginner proficiency level
	in all English macro skills.
	She even considers herself as a true beginner.
Description of lacks	She considers that she needs to improve in all
	English areas with a focus on her speaking fluency,
	her listening skills and her pronunciation.

General information	Student 4. Age 27-33
Position at work	He is a medical assistant.
Description of needs	He uses English to read academic articles, write emails, and to participate and interact with colleagues in conferences / meetings.
Description of wants	He wants to expand his vocabulary, improve his vocabulary and oral skills. He prefers class activities like class discussions, reading texts and group activities.
Experience with English and perceived proficiency	He took a 6-month beginners' English course for reading strategies at UCR in 2018.
	He considers to have an Intermediate proficiency level in listening, reading and writing and a beginner proficiency in speaking.
Description of lacks	He believes that he needs to improve his speaking fluency, listening skills and his pronunciation.

General information	Student 5. Age 48-54
Position at work	He is a Physical Therapy professor at UCR, and he uses English in his current work.
Description of needs	He needs English to read academic articles, and to write and read emails.
Description of wants	He wants to improve his listening and speaking skills to participate in conferences / meetings with colleagues, and to improve his pronunciation.
	He prefers to participate in class activities like games, reading texts and group activities.
Experience with English and perceived proficiency	He received 4 years of private English lessons for intermediate learners in Spain.
	He considers to have an intermediate proficiency level in all English macro skills.
Description of lacks	He believes that he needs to improve his listening, writing and reading skills.

General information	Student 6. Age 34-40
Position at work	He is a Physical Therapy professor at UCR, and he uses English in his current work.
Description of needs	He needs English to read academic articles, participate as an attendee in conferences / meetings, follow written instructions, and to make and receive phone calls.
Description of wants	He wants to develop his reading and writing skills to read and write texts related to his field.
	He prefers to participate in activities like games, roleplays, and relating words with images.
Experience with English and perceived proficiency	He received 1 year of English instruction for beginner students at UCR.
	He considers to have a beginner proficiency level in listening, speaking and writing, and an intermediate proficiency in reading.
Description of lacks	He believes that he needs to improve his writing skills, speaking fluency, and improve his vocabulary.

General information	Student 7. Age 27-33
Position at work	She is a Physical Therapy professor at UCR, and she uses English in her current work.
Description of needs	She needs English to read academic articles.
Description of wants	She wants to improve her speaking and listening skills to participate in conversation related to her field, as well as her writing skills.
	She prefers to participate in class activities like games, fill in the blank exercises and class discussions.
Experience with English	She has not taken any English courses after
and perceived proficiency	finishing high school.
	She considers to have an advanced proficiency level in listening and reading, an intermediate proficiency in speaking and a beginner proficiency in writing.
Description of lacks	She considers that she needs to improve her writing skills, speaking fluency and her pronunciation.

General information	Student 8. Age 20-26
Position at work	He is not currently working. He is a Physical Therapy student at UCR.
Description of needs	He uses English in his studies to read academic articles and to follow written instructions.
Description of wants	He wants to be able to provide information and diagnosis to patients, improve his listening skills to understand conferences about topics in their field and he wants to expand his vocabulary.
	He prefers class activities like relating words with images, reading texts and participating in games.
Experience with English and perceived proficiency	He has not received any English courses after finishing high school.
	He believes that he has a beginner proficiency level in speaking and listening and an intermediate proficiency in reading and writing skills.
Description of lacks	He considers that he needs to improve his speaking fluency, his pronunciation and his listening skills.

Individual Profile: Student 9

General information	Student 9. Age 41-47
Position at work	She is a Physical Therapy professor at UCR, and she uses English in her current work.
Description of needs	She needs English to read academic articles at work.
Description of wants	She wants to expand her vocabulary related to her field and her speaking skills and pronunciation to make oral presentations.
	She wants to participate in class activities like debates, class discussions and roleplays.
Experience with English and perceived proficiency	She received a 12-level English course for beginner students from Fundatec 20 years ago.
	She considers to have a beginner proficiency level in all English macro skills.
Description of lacks	She believes that she needs to improve her speaking fluency, her listening skills and pronunciation.

Individual Profile: Student 10

Position at workShe is not currently working. She is a Physical Therapy student at UCR.Description of needsBased on her current needs, she uses English to read and write academic articles and emails, participate in conferences/meetings, provide and follow instructions orally and written, and to communicate with patients orally.Description of wantsShe wants to develop her pronunciation of words related to her field, and her speaking and listening skills.She prefers to participate in interactive class activities like games, class discussions and	General information	Student 10. Age 20-26
Description of needsBased on her current needs, she uses English to read and write academic articles and emails, participate in conferences/meetings, provide and follow instructions orally and written, and to communicate with patients orally.Description of wantsShe wants to develop her pronunciation of words related to her field, and her speaking and listening skills.She prefers to participate in interactive class	Position at work	She is not currently working. She is a Physical
read and write academic articles and emails, participate in conferences/meetings, provide and follow instructions orally and written, and to communicate with patients orally. Description of wants She wants to develop her pronunciation of words related to her field, and her speaking and listening skills. She prefers to participate in interactive class		Therapy student at UCR.
Description of wantsparticipate in conferences/meetings, provide and follow instructions orally and written, and to communicate with patients orally.Description of wantsShe wants to develop her pronunciation of words related to her field, and her speaking and listening skills.She prefers to participate in interactive class	Description of needs	Based on her current needs, she uses English to
follow instructions orally and written, and to communicate with patients orally. Description of wants She wants to develop her pronunciation of words related to her field, and her speaking and listening skills. She prefers to participate in interactive class		read and write academic articles and emails,
Description of wants communicate with patients orally. She wants to develop her pronunciation of words related to her field, and her speaking and listening skills. She prefers to participate in interactive class		participate in conferences/meetings, provide and
Description of wants She wants to develop her pronunciation of words related to her field, and her speaking and listening skills. She prefers to participate in interactive class		follow instructions orally and written, and to
She wants to develop her pronunciation of words related to her field, and her speaking and listening skills. She prefers to participate in interactive class		communicate with patients orally.
related to her field, and her speaking and listening skills. She prefers to participate in interactive class	Description of wants	She wants to develop her pronunciation of words
skills. She prefers to participate in interactive class		
She prefers to participate in interactive class		
debates.		
Experience with English	Experience with English	
and perceived proficiency She has not taken any English courses after		She has not taken any English courses after
finishing high school.		finishing high school.
She considers to have a beginner proficiency		She considers to have a beginner proficiency
level in speaking and writing skills and an		level in speaking and writing skills and an
intermediate level in listening and reading.		intermediate level in listening and reading.
Description of lacks She believes that she needs to improve her	Description of lacks	She believes that she needs to improve her
vocabulary, writing skills, and her pronunciation.		vocabulary, writing skills, and her pronunciation.

Individual Profile: Student 11

General information	Student 11. Age 34-40
Position at work	She is a professor and the director of the Physical
	Therapy Department at UCR, and she uses
	English in her current work.
Description of needs	She needs English to read academic articles, to
	read and write emails, and to interact with
	colleagues in conferences/meetings.
Description of wants	She wante to improve her propupaietion her
	She wants to improve her pronunciation, her
	speaking and listening skills to participate in
	conversations, and her writing skills.
	She wants to participate in class activities like fill
	in the blank exercises, roleplays and oral
Experience with English	presentations.
Experience with English	She has taken private lessons, and she received
and perceived proficiency	a 3-years English course in 2005 for intermediate
	students at Centro Cultural.
	She considers to have an intermediate proficiency
	level in speaking and writing skills, and an
	advanced level in listening and reading.
Description of lacks	She believes that she needs to improve her
	pronunciation, speaking fluency and her writing
	skills.
	skills.

Individual Profile: Student 12	
General information Position at work	Student 12. Age 34-40 He is a Physical Therapy professor at UCR, and he uses English in his current work.
Description of needs	He needs English to read and write academic articles, emails, participate and interact in conferences/meetings, to provide and follow both written and oral instructions, and to communicate with patients and colleagues.
Description of wants	He wants to improve his speaking and listening skills to participate in conversation related to his field, to make oral presentations and to improve his pronunciation.
	He prefers to participate in class activities like debates, class discussions and games.
Experience with English and perceived proficiency	He has not taken any English courses after finishing high school.
	He considers to have a beginner proficiency level in speaking and writing, and an intermediate proficiency in listening and reading.
Description of lacks	He believes that he needs to improve his writing skills, speaking fluency and pronunciation.

Appendix D

Diagnostic Test - Speaking

G. Alfaro & C. Vega

Allotted Time: 10 minutes. 5 minutes to prepare and 5 minutes to present.

Student A

Nationality	Role: professor	Your reason to attend the conference: Find partners to collaborate with your investigation.
University	Contact information Email (initial of your first name followed by your last name) @ucla.ac.us For example: <i>Christian</i> <i>Vega</i> - <u>cvega</u> @ucla.ac.us Cell phone number +1 (213) 555-7212	 Introduce yourself to your classmate. Talk about your professional or academic situation. Talk about your reason for attending the conference. Finish the conversation in a friendly way.

Diagnostic Test - Speaking

G. Alfaro & C. Vega

Allotted Time: 10 minutes. 5 minutes to prepare and 5 minutes to present.

Student B

Nationality	Role: senior student	Your reason to attend the conference: Ask for information about scholarships to study in a university in another country.
University	Contact information Email Use your actual institutional email Cell phone number Use your actual number. Don't forget the code area (+506).	 Introduce yourself to your classmate. Talk about your professional or academic situation. Talk about your reason for attending the conference. Finish the conversation in a friendly way.

Diagnostic Test - Speaking

G. Alfaro & C. Vega

Allotted Time: 10 minutes. 5 minutes to prepare and 5 minutes to present.

Student A

Nationality	Role: experienced therapist	Your reason to attend the conference: Expand your professional network.
University ŨNIVERSITAT DE BARCELONA	Contact information Email (initial of your first name followed by your last name) @uba.ac.es For example: <i>Christian Vega</i> - <u>cvega @uba.ac.es</u> Cell phone number +34 (93) 7781-623	 Introduce yourself to your classmate. Talk about your professional or academic situation. Talk about your reason for attending the conference. Finish the conversation in a friendly way.

Diagnostic Test - Speaking

G. Alfaro & C. Vega

Allotted Time: 10 minutes. 5 minutes to prepare and 5 minutes to present.

Student B

Nationality	Role: professor	Your reason to attend the conference:
		Ask for information about scholarships to study in a university in another country.
University UNIVERSIDAD SANTIAGO DE CALI	Contact information Email (initial of your first name followed by your last name) @usc.ac.co For example: <i>Christian</i> <i>Vega</i> - <u>cvega@usc.ac.co</u> Cell phone number +57 (602) 554-2522	 Introduce yourself to your classmate. Talk about your professional or academic situation. Talk about your reason for attending the conference. Finish the conversation in a friendly way.

Diagnostic Test - Listening Comprehension Allotted Time: 10 minutes

- I. You will listen to an excerpt about a new technique for pain control. Read the items below, listen once and answer. Then, listen again and confirm answers or complete missing answers.
 - 1. Scrambler therapy is a form of ______ that works to reduce chronic pain.
 - A. electrocardiogram
 - B. electroanalgesia
 - C. electrogymnastics
 - D. electroanesthesia
 - 2. The device was declared safe for usage by _____ in ____.
 - A. the US government / 2019
 - B. the U.S. Food and Drug Administration / 2009
 - C. Nationwide Drug Testing Services / 2009
 - D. the Oncologic Drugs Advisory Committee / 1999

3. Why is the treatment performed by attaching the electrodes above and below the area of pain but not on the painful area?

- A. because it will hurt the patient if administered directly in the painful area
- B. because it best reduces refractory pain within the dermatome of pain
- C. because it hastens the patient's recovery time
- D. because it prevents visceral and bone cancer metastases

4. Which of the following sources of pain has **NOT** shown benefits for reducing pain?

- A. chemotherapy-induced neuropathy
- B. head and neck cancer
- C. upper back pain
- D. neuromyelitis optica spectrum disorder

G. Alfaro & C. Vega

- 5. Which of these statements is true about scrambler therapy?
- A. It is painful because it works with electricity.
- B. It helps to reduce centralized sensitization.
- C. It increases neuroinflammatory peptides in the blood.
- D. It improves the treatment of central pain syndrome.

I. Read the following article about chronic pain management. Then, select the best option for the questions below the text.

(I) Pain is the most common symptom that prompts patients to see a physician, and the symptom may have a wide variety of causes, ranging from relatively benign conditions to acute injury, myocardial ischemia, degenerative changes, or malignancy. In most cases, after a diagnosis is made, conservative measures are prescribed, and the patient responds successfully. In others, referral to a pain medicine specialist for evaluation and treatment improves **outcomes** and conserves health care resources, and in some, surgery will be indicated. In still other situations, pain persists, and patients develop chronic pain, the cause of which remains obscure after preliminary investigations have excluded serious and life-threatening illnesses and, if warranted, surgical intervention has either failed to relieve pain or has produced a new pain syndrome. **1**.

(II) The term pain management in a general sense applies to the entire discipline of anesthesiology, but its modern usage more specifically involves management of pain throughout the perioperative period as well as nonsurgical pain in both inpatient and outpatient settings. **2.** _______. Pain medicine practice may be broadly divided into acute and chronic pain management. The former primarily deals with patients recovering from surgery or with acute medical conditions in a hospital or ambulatory surgery center setting. **3.** ______. A good example is the patient with cancer who frequently requires short- and long-term pain management in both inpatient and outpatient settings.

(III) The contemporary practice of pain management is not limited to anesthesiologists but is often team-based and includes other physicians (physiatrists, surgeons, internists, oncologists, psychiatrists, neurologists) and nonphysicians (nurses, psychologists, physical therapists, acupuncturists, hypnotists). **4.** _______. The most effective **approaches** are multidisciplinary, in which the patient is evaluated by one or more physicians who conduct an initial examination, make a diagnosis, and formulate a treatment plan, typically using the services and resources of other health care providers.

Adapted from Vrooman B. M., & Youngren K. M., (2022). Chronic pain management. In Butterworth IV J. F., Mackey D. C., & Wasnick J. D.(Eds.), *Morgan & Mikhail's clinical anesthesiology*, 7e. McGraw Hill.

- II. Select the best option to complete each question or statement.
 - 1. According to the text, why do most patients ask for medical appointments?
 - A) to get a prescription
 - B) to seek a better treatment
 - C) to alleviate pain
 - D) for an overall check-up
 - 2. What happens to patients who develop chronic pain?
 - A) surgeries relieve their pain
 - B) chronic pain can evolve into a new pain syndrome
 - C) patients respond successfully to conservative measures
 - D) patients move on because it is not a threat to their lives
 - 3. Pain medicine practice is divided into _____ and _____ pain management.
 - A) inpatient / outpatient
 - B) hospital / ambulatory
 - C) short-term / long-term
 - D) acute / chronic
 - 4. The next item is **NOT** an example of an inpatient setting:
 - A) childbirth
 - B) heart attack
 - C) respiratory failure
 - D) mammograms

5. Which item describes the correct order for the contemporary practice of pain management?

- A) an initial examination, a diagnosis, a treatment plan
- B) an appointment, a prescription, a treatment plan
- C) an initial examination, a diagnosis, a prescription
- D) an appointment, a prescription, a diagnosis
- 6. The word "outcomes" in Paragraph I is similar in meaning to
 - A) conclusions
 - B) results
 - C) issues
 - D) conditions
- 7. The word "approaches" in Paragraph III is similar in meaning to
 - A) models
 - B) ideas
 - C) programs
 - D) procedures
- 8. Where in the article can the sentence below be inserted?

"Unfortunately, this distinction is artificial and considerable overlap exists."

- A) Position 1
- B) Position 2
- C) Position 3
- D) Position 4

Diagnostic Test - Writing Allotted Time: 30 minutes

I. Read the following text about chronic pain management.

(I) Pain is the most common symptom that prompts patients to see a physician, and the symptom may have a wide variety of causes, ranging from relatively benign conditions to acute injury, myocardial ischemia, degenerative changes, or malignancy. In most cases, after a diagnosis is made, conservative measures are prescribed, and the patient responds successfully. In others, referral to a pain medicine specialist for evaluation and treatment improves outcomes and conserves health care resources, and in some, surgery will be indicated. In still other situations, pain persists, and patients develop chronic pain, the cause of which remains obscure after preliminary investigations have excluded serious and life-threatening illnesses and, if warranted, surgical intervention has either failed to relieve pain or has produced a new pain syndrome.

(II) The term pain management in a general sense applies to the entire discipline of anesthesiology, but its modern usage more specifically involves management of pain throughout the perioperative period as well as nonsurgical pain in both inpatient and outpatient settings. Pain medicine practice may be broadly divided into acute and chronic pain management. The former primarily deals with patients recovering from surgery or with acute medical conditions in a hospital or ambulatory surgery center setting, whereas the latter includes patients almost always seen in the outpatient setting. Unfortunately, this distinction is artificial and considerable overlap exists. A good example is the patient with cancer who frequently requires short- and long-term pain management in both inpatient and outpatient settings.

(III) The contemporary practice of pain management is not limited to anesthesiologists but is often team-based and includes other physicians (physiatrists, surgeons, internists, oncologists, psychiatrists, neurologists) and nonphysicians (nurses, psychologists, physical therapists, acupuncturists, hypnotists). The most effective approaches are multidisciplinary, in which the patient is evaluated by one or more physicians who conduct an initial examination, make a diagnosis, and formulate a treatment plan, typically using the services and resources of other health care providers.

Adapted from Vrooman B. M., & Youngren K. M., (2022). Chronic pain management. In Butterworth IV J. F., Mackey D. C., & Wasnick J. D.(Eds.), *Morgan & Mikhail's clinical anesthesiology*, 7e. McGraw Hill.

II. A first-year student of physical therapy wants to know what pain management consists of. In the space below, summarize the most relevant information from the reading to introduce the topic of pain management to the student.



Appendix E

Diagnostic Test - Speaking

G. Alfaro & C. Vega

Rubric

Category	Score	Criteria			
Grammar 5 points	, , , , , , , , , , , , , , , , , , , ,				
	3-4	Some errors in grammatical structures possibly caused by an attempt to use the simple and progressive tenses in present and past correctly. Some self-correction.			
	2	Frequent grammatical errors even in simple structures that at times obscure meaning. Use of isolated words, and minimal self-correction.			
	1	Frequent grammatical errors even in simple structures. Meaning is obscured. Overuse of isolated words, and no self-correction.			
Content and Vocabulary	9-10	Excellent level of description; additional details beyond the required. Wide range of vocabulary.			
10 points	6-8	Good level of description; all required information included. Uses appropriate words, phrases, and expressions.			
	4-5	Description lacks some critical details that make it difficult for the listener to understand. Vocabulary is just adequate to respond. No attempt to vary expressions.			
	1-3	Poor description that prevents the listener from understanding the message. Frequent errors make meaning too difficult to understand. Heavy L1 dependence.			
		Speech is effortless and smooth with a speed that comes close to that of a native speaker.			
	3-4	Speech is mostly smooth but with some hesitation and unevenness caused primarily by rephrasing and fumbling for words.			
	1-2	Speech is slow and often hesitant and irregular. Some sentences are incomplete, but the student is able to continue.			
Pronunciation	5	Appropriate pronunciation of vowels and			

5 points		consonants. Word stress, rhythm, intonation, and prominence help the student to convey the message. Self-correction.
	3-4	Some pronunciation errors of vowels and consonants. Word stress, rhythm, intonation, and prominence allow the student to be sufficiently intelligible. Some self-correction.
	2	Perceptible pronunciation errors of studied vowels and consonants. Word stress, rhythm, intonation, and prominence did not allow the student to convey the full message. Minimal self-correction.
	1	Poor pronunciation of vowels and consonants. Word stress, rhythm, intonation, and prominence did not help the student to convey the message. No self-correction.

Adapted from Cordero, J., Mayorga, L. Trejos, J. C., Vega, C. (2021). *Listening and speaking exercises for beginners* (Final Project). Unpublished manuscript.

Diagnostic Test - Writing

G. Alfaro &	C.	Vega
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Rubric

Category	Excellent - 4	Good - 3	Limited - 2	Poor - 1
Grammar	No mistakes or minor mistakes.	Appropriate range of structures. Several mistakes that do not affect comprehension	Limited range of grammar structures. Frequent errors that affect comprehensio n to some extent.	No or minimal use of grammar structures.
Content	All elements addressed. Central theme well outlined.	One key area undeveloped. Central theme covered.	Partially developed. Theme needs expansion.	Most key elements are missing. Theme is poorly developed.
Word Choice	Precise and descriptive. Creates clarity.	Often varied and descriptive. Some unclear word choices.	Several unclear choices affect comprehensio n to some extent	Same words used repeatedly. Affects clarity of central ideas considerably.
Organization	The summary is clearly organized. Logical sequence of ideas throughout summary with clear transitions.	Organization is mostly clear. A few ideas break logical flow. Clear transitions.	Several gaps in logical sequence affect flow of reading. Some unclear transitions.	Readability is highly impaired by mostly illogical sequence of ideas and poor transitions.
Mechanics	Correct spelling and punctuation.	Mostly correct spelling and punctuation. A few errors do not affect text quality.	Several errors in spelling and punctuation affect text quality to some extent.	Frequent errors in spelling and punctuation affect text quality considerably.

Adapted from Truemper, C. M. (2004). Using scoring rubrics to facilitate assessment and evaluation of graduate-level nursing students. *Journal of Nursing Education*, *43*(12), 562–564.

Appendix F

Student Syllabus

University of Costa Rica Master's program in Teaching

English as a Foreign Language

Instructors: Gustavo Alfaro and Christian Vega

Schedule: Tuesdays from 5:00 p.m. to 6:50 p.m.



Course name: English for Physical Therapy, an online English course for Physical Therapy students and teachers.

I. Course Description

The purpose of the course is to aid students improve their English language skills by providing a variety of real-life tasks related to their field of expertise. Such tasks are provided based on their current and future needs in the field of physical therapy. The course will address the English needs of the participants with a considerable variety of proficiency levels in the four macro skills.

The course will be taught on Tuesdays once a week and during a time span of 14 weeks throughout the second semester of 2022. Each class consists of a synchronous session of about 2 hours, taught from 5:00pm to 6:50pm. The participating students are expected to connect to every online class, and their English language progress will be evaluated in every unit of the course. In addition, the course will be taught virtually using the Zoom platform since it is currently the platform used by the university. *English for Physical Therapy* is designed to follow the components of an ESP course and the Task-based Language Teaching approach (TBLT). Thus, the course will include a variety of communicative activities and a focus on conveying meaning through the completion of different spoken and written tasks. The tasks included in the syllabus reflect frequent real-life physical therapy tasks in which the participant students need to use English in their field.

II. Statement of Goals and Objectives

Unit 1: Reading academic articles

Goal: By the end of this unit, instructors and students of the Physical Therapy major at UCR will be able to demonstrate comprehension of academic articles by analyzing abstracts and key article sections (methodology, procedures, and results) and accurately selecting specific information relevant to their professional practice. **General Objectives:**

1. By the end of the lesson, students will be able to effectively summarize specific key information from the abstract of an academic text by scanning for the key expressions and completing an outline.

2. By the end of the lesson, students will be able to successfully identify relevant specific information in an academic article by skimming and scanning the text and highlighting key phrases and terms.

3. By the end of the lesson, students will be able to accurately extract key specific information about the methodology, procedures, and results of a study by answering comprehension questions and comparing the answers with classmates.

Unit 2: Interacting with colleagues as conference attendees

Goal: By the end of this unit, students and instructors of the Physical Therapy program at UCR will be able to successfully introduce themselves to colleagues, talk about their

professional and academic backgrounds and interests, and propose collaborations at field-related conferences.

General Objectives:

1. By the end of the lesson, students will be able to effectively introduce themselves by exchanging greetings and personal information and asking follow-up questions in conversations at conferences for physical therapy professionals and students.

2. By the end of the lesson, students will be able to accurately describe their occupations, qualifications, and work experience by exchanging information about their professional and academic backgrounds and interests with fellow colleagues at conferences for physical therapy professionals and students.

3. By the end of the lesson, students will be able to successfully suggest an academic or professional collaboration by expressing interest, exploring options based on their interests, and exchanging contact information for future collaboration at conferences for physical therapy professionals and students.

Unit 3: Watching educational videos

Goal: By the end of this unit, students and instructors of the Physical Therapy program at UCR will be able to effectively demonstrate comprehension of field-related educational videos by identifying main and supporting ideas, answering comprehension questions, exchanging key information, taking notes, and reporting findings.

General Objectives:

1. By the end of the lesson, students will be able to show understanding of an educational video about a therapy by accurately identifying discourse markers to help them locate the main and supporting ideas.

2. By the end of the lesson, students will be able to successfully demonstrate understanding of a physical therapy treatment in an educational video by taking notes and correctly reporting key information to a classmate orally.

3. By the end of the lesson, students will be able to successfully demonstrate understanding of a physical therapy treatment in an educational video by extracting the main and supporting ideas in the form of a video-comprehension quiz.

III. Methodology

The course will be taught as a learner-centered ESP course with authentic materials that reflect real-life situations that the students may face in their field of physical therapy when using the English language. The class activities will consist of tasks that include authentic materials such as academic texts, videos, audios, and a variety of handouts for students to complete the different tasks in the syllabus. In class, the tasks will be carried out as individual activities, group activities and whole class activities. The tasks are divided into three units, and each unit will focus on a particular set of needs and wants identified through the needs analysis process, addressing specific English macro and micro skills. As mentioned before, the course will be taught online and will take advantage of a variety of technological tools to develop the course and create the materials. The platform Zoom will be used to teach the classes alongside any other website or App that the instructors consider appropriate to use during each class. The class instructors will guide the class, teach the contents, provide the materials and feedback to students during all synchronous sessions. The course will also include asynchronous work, for which the student teachers will also provide the necessary materials and feedback.

IV. Assessment

Evaluation of the course

Contents	Weight
Unit 1 partial exam: Reading test (midterm)	25%
Unit 2 partial exam: Speaking test (final)	25%
Unit 3 partial exam: Listening quizzes	20% (10% each)
Participation	10%
Final Project: Individual oral description about treatments or	techniques for pain

management / to improve movement	15%
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Total

100%

V. Contents

Unit 1: Reading academic articles

Unit 2: Interacting with colleagues as conference attendees

Unit 3: Watching educational videos

Appendix G

Lesson Plan - First Session

Topic: Introduction to the course

Teachers: Gustavo Alfaro and Christian Vega

Date: Tuesday, August 16th, 2022

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy)

course.

General Objective: By the end of the lesson, students will be able to show understanding and agreement on the course

content by acknowledging receipt of the course outline.

Specific objectives:

By the end of this lesson, the students will be able to...

- 1. introduce themselves orally to the rest of the class,
- 2. talk about themselves by engaging in a game,
- 3. show understanding of the course outline by confirming information and asking questions about the course content,

and



4. show understanding of the course platforms by confirming information and asking questions.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Introduction The Ts greet the Ss, introduce themselves and the course. Next, Ss introduce themselves by stating their name, occupation, where they live. Then, the Ts ask all Ss to provide a reason why they decided to study Physical Therapy.	 a) procedural Hello, my name is I am a Physical therapy student / professor I live in I studied PT because How do you say? b) real task language greeting, meeting people simple present tense because (to explain reasons) 	S L	 Meeting new people Introducing themselves Answering questions 	20 min
2	Ice-breaker Ss talk about themselves by playing a guessing game. Ss prepare 3 sentences about themselves. One sentence must be a lie, and the other two must be true. Ss read their sentences to the class, and the class has to guess the lie. The Ts demonstrate the activity by giving an example.	 a) procedural <i>I</i> am / have <i>I</i> like / prefer <i>How do you say?</i> <i>What's the word for?</i> <i>I think the lie is sentence #</i> b) real task language <i>simple present tense</i> 	W S L	 Providing self- descriptions Guessing Working collaboratively 	20 min

3	Course Outline Ss are given the course outline. The Ts call on random Ss to read the objectives, methodology, and evaluation. The Ts explain the class dynamics and resources, and any questions Ss might have about the course.	procedural How do you pronounce? What is the meaning of?	R L S	 Reading with a purpose Asking questions Confirming understanding 	min
	Course Outline				
4	Course Platforms The Ts explain how to use the Zoom platform (sharing screen and sound, joining BORs, typing in the chat, uploading/downloading documents). Next, the Ts explain how to use Drive for the asynchronous tasks (entering the link, uploading/downloading documents, making copies of the handouts). Then, the Ts explain the due dates and the method for the asynchronous work.		SL	 Asking questions Confirming understanding 	min

Materials
Google Drive Folder
https://drive.google.com/drive/u/
1/folders/1vEaRza5aFYcIHH3tB
zqpVuyncDgpLSJE

Lesson Plan - Lesson 2 - Unit #1

Topic: Reading academic abstracts in articles

Lead teacher: Gustavo Alfaro / Assistant teacher: Christian Vega

Date: Tuesday, August 23rd, 2022



Goal: By the end of this unit, instructors and students from the Physical Therapy major at UCR will be able to demonstrate

comprehension of academic articles by analyzing abstracts and key article sections (methodology, procedures, and

results) and accurately selecting specific information relevant to their professional practice.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy)

course.

General Objective: By the end of the lesson, students will be able to effectively summarize specific key information from

the abstract of an academic text by scanning for the key expressions and completing an outline.

Specific objectives:

By the end of this lesson, the students will be able to...

1. show understanding of the definition of an abstract, its location in an article, and the type of information commonly

found in abstracts by doing a multiple choice exercise,

- 2. effectively describe information and ideas about the lateral step-down test by taking part in a conversation in pairs,
- 3. accurately identify the sections of an abstract by highlighting key expressions used to introduce these sections,
- 4. identify the context for the key expressions in the abstract by completing a multiple choice exercise with 100% accuracy,
- 5. extract key information from the abstract by scanning the text and completing an outline with key vocabulary with 90% accuracy,
- 6. show understanding of the structure of an abstract by locating the sections with 100% accuracy, and
- 7. locate the key expressions in an abstract by completing a fill-in-the-blank exercise with 100% accuracy.

Note: The role of the assistant teacher is to collect Ss' errors, assist with vocabulary in the chat, provide the materials

(handouts and links), and help students while they are working in BORs.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, in BORs, Ss discuss in pairs questions about the definition,	a) procedural I think / I believe an abstract is I agree / disagree with you. You can find an abstract in You can find in an abstract. How do you say?	S L R	 Activating background knowledge Exchanging ideas 	15 min

	location, and sections commonly found in abstracts. Next, in the main session, the T asks random Ss to share their ideas with the entire class. Materials Handout #1	b) real task language Definition of an abstract The location of abstracts Examples of information that can be found in abstracts		 Working collaboratively Discussing 	
2	Pre-task 1The T asks for 2 volunteers to read the useful expressions on Handout #2 to check the meaning and pronunciation of the words.In BORs, Ss discuss in groups of 3 the questions in Handout #2 to predict the topic of the abstract. Next, the T asks for volunteers to share their ideas with the class.Materials Handout #2	 a) procedural I think/believe that In my opinion/In my point of view I agree / disagree with you. How do you say? b) real task language athletes, soccer player, tennis player, gymnast, lateral step- down test, it is used to assess the movement pattern of the legs and feet knee, leg, feet, lower-upper extremity, movement, strength, flexibility, flex, bend 	SL	 Activating background knowledge Inferencing Working collaboratively Connecting and reflecting on ideas Discussing 	20 min
3	Pre-task 2 Ss are given an abstract and a handout to work on them in pairs. In BORs, Ss read the text to identify the 5 parts of the	a) procedural I think/believe that In my opinion/In my point of view I agree / disagree with you.	R S L	 Skimming and Scanning Identifying key expressions 	20 min

	abstract. Next, Ss skim and scan the text to highlight key expressions of each section in the abstract. Then, a volunteer student shares the screen with the highlighted key expressions, while the other Ss compare their answers. The T draws Ss' attention to notice that each color represents a different section in the abstract, and explains the type of information that can be found in each section. Materials The abstract from the article <i>Simple verbal instructions are able to improve quality of movement during the lateral step-down test in healthy females.</i> Handout #3	What is the meaning of? How do you pronounce? b) real task language introduction, purpose, methods, instruments, participants, results, conclusions		 Working collaboratively 	
4	Pre-task 3 Ss are given a handout with information about possible context for the key expressions.	a) procedural I think/believe that In my opinion/In my point of view	R S L	Working collaborativelyDiscussing	15 min

	Next, Ss work with a new partner to select the correct answers for the incomplete sentences. Then, the T selects random Ss to share their answers with the entire class. Materials The abstract from the article <i>Simple verbal instructions are</i> <i>able to improve quality of</i> <i>movement during the lateral</i> <i>step-down test in healthy</i> <i>females.</i> Handout #4	I agree / disagree with you. What is the meaning of? How do you pronounce? b) real task language Infinitives of purpose good movement group, poor movement group, gerunds after prepositions, simple past tense		 Identifying continuations Showing agreement or disagreement 	
5	Main Task In BORs, Ss work in pairs to scan the text one last time to summarize key points by completing an outline. Next, the T assigns each group a different section of the outline for them to share their groups' answers. Once all the answers are collected, Ss discuss any similarities or differences with	 a) procedural # is What do you think?/ Do you agree? I agree / disagree because How do you pronounce? b) real task language body parts, quality of movement, therapeutic procedures, instructions 	R S L W	 Working collaboratively Clarifying information Scanning Negotiating meaning Sharing information Summarizing 	20 min

	the information they wrote in their own outlines.				
	Materials The abstract Simple verbal instructions are able to improve quality of movement during the lateral step-down test in healthy females.				
	Handout #5				
6 7	Post-task - Asynchronous Ss are given 2 handouts. In Handout #6, Ss complete the missing names of the sections in the abstract with the phrases provided. In Handout #7, Ss fill in the blanks in the abstract with the phrases provided.	real task language purpose, method, results, conclusions, introduction, setting, design, objectives interventions, patients, main outcome measures Infinitives of purpose gerunds after prepositions, simple past tense simple present tense	R W	 Skimming and scanning Identifying key expressions Filling in the blanks Checking understanding 	60 min
	Materials Handout #6 Handout #7				

Lesson Plan - Unit #1 - Lesson 3

Topic: Skimming and scanning academic articles

Lead teacher: Christian Vega / Assistant teacher: Gustavo Alfaro

Date: Tuesday, August 30th, 2022



Goal: By the end of this unit, instructors and students from the Physical Therapy program at UCR will be able to

demonstrate comprehension of academic articles by analyzing abstracts and key article sections (methodology,

procedures, and results) and accurately selecting specific information relevant to their professional practice.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy)

course.

General Objective: By the end of the lesson, students will be able to successfully identify relevant specific information in an academic article by skimming and scanning the text and highlighting key phrases and terms.

Specific objectives:

By the end of this lesson, the students will be able to...

- 1. successfully recall factual information about tibial head fractures by brainstorming in the Zoom chat,
- 2. effectively recognize the sounds of acronyms in English by reviewing the pronunciation of the alphabet,

- 3. identify key vocabulary related to postoperative recovery of tibial head fractures by doing a multiple choice exercise with 100% accuracy,
- 4. accurately identify the main results in the abstract of an article by skimming and highlighting,
- 5. accurately identify specific information in the introduction, methods, and results sections of the article by skimming

and highlighting key terms and phrases, and

6. locate key information from the introduction, methods, and results sections of the article by scanning for the key expressions and completing an outline with 90% accuracy.

Note: The assistant teacher is absent in this lesson because he is observing a colleague for the peer observation report.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, Ss are shown a picture about a fracture. Ss either type in the chat or say the name of the fracture. Next, Ss are asked to type in the chat the causes of tibial head fractures (THFs).	 a) procedural <i>I</i> think / I believe it is a <i>I</i> agree / disagree with you. How do you say? b) real task language Tibial head fractures (THFs) can be caused by 	S L	 Activating background knowledge Visualizing Predicting Exchanging ideas 	20 min

	Then, Ss are asked how much time (on average) it takes a patient to recover the motion of the knee after a tibial head fracture.	On average, it takes a patient days/weeks/months to recover the motion of the knee.			
2	Pre-task 1The T types the acronyms UCR,ESP, and PT in the chat. Ss tryto pronounce the acronyms.Next, Ss are given a handout forthem to repeat the sounds of theEnglish alphabet. Then, The Tselects 5 volunteers to read theacronyms below in the handout.	 a) procedural <i>I think/believe that</i> You say "" b) real task language the English Alphabet (for the acronyms) 	R S L	 Activating background knowledge Working collaboratively Discussing Pronouncing 	15 min
	Materials Handout #1				
3	Pre-task 2 Ss are given a link to a website. In pairs, Ss go to BORs to complete the multiple-choice exercise. Next, the T checks the pronunciation of the answers of the exercise.	a) procedural I think/believe that In my opinion/In my point of view I agree / disagree with you. What is that?	R S L	 Predicting Working collaboratively Discussing Pronouncing key words 	15 min
	Materials https://wordwall.net/resource/349 61935/unit-1-lesson-3-handout-2	b) real task language the English Alphabet (for the acronyms) tibial /` tɪbiəl / fracture /` fræktʃər /			

		motion / mouʃən/ range /reɪnʤ/ arthroplasty / arθrə plæsti/ reduction /ri dʌkʃən/ fixation /fɪkˈseɪʃən/ anesthesiologists / ænə sθizi aləʤəsts/ orthopedic / ɔrθə pidɪk/ trauma / trɔmə/				
4	Pre-task 3 The T shares screen with a presentation about the strategies of skimming and scanning available to all students in the Google Drive Folder. Next, the T calls on random Ss to read the slides. The T explains the information the Ss read. Then, in pairs, Ss are given a handout for them to skim the abstract of the article to locate the most relevant results. Materials <u>https://docs.google.com/presenta</u> <u>tion/d/1LVfFA5Vvv0XLki9c_e3Vt</u> W_AkER9t099w5dsUzAZHd8/ed <u>it#slide=id.p</u>	 a) procedural I think/believe that In my opinion/In my point of view I agree / disagree with you. What is the meaning of? How do you pronounce? b) real task language parts of an abstract The Knee Society Score, UCLA activity score, the EuroQoL, pain analysis, the CPM group, non-CPM group 	R S L	•	Working collaboratively Reading with a purpose Skimming Showing agreement or disagreement	20 min

	Handout #3					
5	 Main Task A. Ss are given handout #4 to skim the introduction of the article. Individually, Ss highlight the answers to the questions in the handout. Next, Ss compare their answers with a classmate. Then, T checks the answers in the handout with the entire class. B. Ss are given handout #5 to skim the methods section of the article. Individually, Ss highlight the most relevant subsections. Next, Ss compare their answers with a classmate. Then, T checks the answers in the handout with the entire class. C. Ss are given handout #6 to skim the results section of the article. Individually, Ss highlight the most relevant subsections. Next, Ss compare their answers with a classmate. Then, T checks the answers in the handout with the entire class. Materials 	 a) procedural What do you think?/ Do you agree? I agree / disagree because How do you pronounce? b) real task language definition of continuous passive motion (CPM) rehabilitation at home vs in hospital participants, interventions, outcomes, estimations, harms 	R S L W	•	Skimming Working collaboratively Discussing Showing agreement or disagreement	30 min

	Handout #4 Handout #5 Handout #6					
6	Post-task 1 AsynchronousSs are given a handout. InHandout #7, Ss scan theintroduction, methods, andresults sections to locate keypoints by completing an outline.MaterialsHandout #4Handout #5Handout #6Handout #7	real task language tibial head fractures (THFs), continuous passive motion (CPM), range of motion (ROM), open reduction and internal fixation (ORIF), conventional physical therapy, knee functionality, quality of life, flexion, extension of the knee, knee functionality	R W	•	Scanning Identifying key expressions Filling in the blanks Checking understanding	60 min

Lesson Plan - Lesson 4 - Unit #1

Topic: Identifying key information in academic articles

Lead teacher: Gustavo Alfaro / Assistant teacher: Christian Vega

Date: Tuesday, September 6th, 2022

English for Good job! Physical Therapy

Goal: By the end of this unit, instructors and students from the Physical Therapy program at UCR will be able to

demonstrate comprehension of academic articles by analyzing abstracts and key article sections (methodology,

procedures, and results) and accurately selecting specific information relevant to their professional practice.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy)

course.

General Objective: By the end of the lesson, students will be able to accurately extract key specific information about the methodology, procedures, and results of a study by answering comprehension questions and comparing the answers with classmates.

Specific objectives:

By the end of this lesson, the students will be able to...

- 1. recognize useful vocabulary related to movement illusions induced by tendon vibration after chronic stroke by answering questions in an online guiz with 90% accuracy,
- 2. identify specific information in the abstract of an article about movement illusions induced by tendon vibration after chronic stroke by doing a true or false exercise with 100% accuracy and comparing answers with the entire class,
- 3. effectively describe applications of types of technology for pain management by answering guiding questions orally and exchanging ideas and experiences in pairs,
- successfully extract key specific information about the methodology, procedures, and results sections of the article by skimming and scanning, answering comprehension questions, and comparing the answers with classmates, and
- 5. accurately locate information about the methodology, procedures, and results sections of the article by preparing notes for a group discussion.

Note: The assistant teacher is absent in this lesson because he is observing a colleague for the peer observation report.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, Ss enter a link to play an online quiz. Ss guess the location of a stroke in the body, and how a stroke happens in the brain. Next, Ss distinguish acute from chronic stroke. Then, Ss guess what virtual reality and tendon vibration are based on the images provided.	 a) procedural <i>I think / I believe it is</i> <i>I'm not sure</i> b) real task language brain, stroke, acute, chronic, virtual reality (VR), tendon vibration 	R S	 Activating background knowledge Visualizing Predicting 	15 min
	https://create.kahoot.it/details/eeb08a51- f8b6-4b83-8fd5-22c7713ae9c3				
2	Pre-task 1 Ss are directed to Handout #1. The T pronounces the underlined key terms in an abstract for Ss to repeat after the T. Next, Ss individually skim the text to complete a true or false exercise. Then, the T calls on random Ss to share their answers with the entire class.	a) procedural I think # is true/false Maybe # is true/false In my opinion # is true/false because I agree / disagree with you because	R S L	 Pronouncing Skimming Discussing Showing agreement or disagreement 	15 min
	Materials	b) real task language infinitives of purpose			

	Handout #1	moving, static, and hidden conditions illusion of movement wrist extension feedback motor rehabilitation			
		Pronunciation illusion /ɪ ˈluːʒən/ motor / moʊtər/ rehabilitation / rihə bɪlə teɪʃən/ wrist /rɪst/ virtual reality / vɜrtʃuəl ri ælə ti/ vibration /vaɪ breɪʃən/ stroke /stroʊk/			
3	Pre-task 2 Ss are given Handout #2. Next, in pairs Ss go to BORs to discuss the questions in the handout. Ss are encouraged to take notes about their discussion. Then, back in the main session, the T calls on random Ss to share their answers with the entire class.	a) procedural Yes, I have. I have used to treat a patient with / No, I haven't. I've heard / I know about to treat a patient recovering from a stroke. I would use VR / to help patients with I would like to use to attend to my patients.	S L W	 Discussing Working collaboratively Sharing information Exchanging ideas 	20 min
	Handout #2				

		b) real task language names of types of technologies for medical care names of methods to treat strokes				
4	 Main Task A. Ss are given Handout #3 to skim the adapted article. Individually, Ss locate the three sections in the adapted article. Next, T checks the answers in the handout with the entire class. B. Ss are directed to the items in part B. Individually, Ss scan the text to find the answers to the items. C. Next, in groups, Ss go to BORs to compare their answers. Then, back in the main session the T calls on random Ss to check the answers. Materials Handout #3 	 a) procedural I chose (A, B, C, D) in #1. What do you think? / What is your opinion? What did you write in #? I wrote in # In my opinion/ I think that the answer for # is I agree / disagree with you because b) real task language participants' conditions description of the procedures vibration trials moving, static, and hidden conditions the intensity of illusion the sensation of wrist movement 	R W S L	•	Skimming and scanning Discussing Working collaboratively Showing agreement or disagreement	30 min

5	Post-task - Asynchronous	real task language	R	•	Reading with a	60 min
	Ss are given a handout. In Handout #4,	written consent	W		purpose	
	Ss are given reading comprehension	stroke		•	Inferring	
	questions for them to deeply read the	brain		•	Taking notes	
	entire adapted article. Ss take notes for	visual processing			-	
	the questions to later discuss their	motor rehabilitation				
	answers with their classmates in the	moving, static, and hidden				
	Warm-up in the next session.	conditions				
		Edinburgh questionnaire				
	Meteriolo	Fugl-Meyer assessment				
	Materials	upper extremity (FMA-UE)				
	Handout #4	Likert scale				

Lesson Plan - Lesson 5 - Unit #1

Topic: Identifying key information in academic articles

Lead teacher: Christian Vega / Assistant teacher: Gustavo Alfaro

Date: Tuesday, September 13th, 2022

English for Good Jobt Physical Therapy

Goal: By the end of this unit, instructors and students from the Physical Therapy program at UCR will be able to

demonstrate comprehension of academic articles by analyzing abstracts and key article sections (methodology,

procedures, and results) and accurately selecting specific information relevant to their professional practice.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy)

course.

General Objective: By the end of the lesson, students will be able to accurately show understanding of the information in the sections of an academic article by taking a reading comprehension exam.

Specific objectives:

By the end of this lesson, the students will be able to...

1. successfully exchange information from the methodology, procedures, and results sections of the article analyzed

the previous week by interacting orally in small groups,

2. accurately explain the type of information found in each part of the abstract structure by completing a graphic

organizer and comparing answers with the entire class,

3. effectively identify key terms from an academic article about virtual reality therapies for pain relief by matching each

key term with its corresponding picture,

- 4. successfully demonstrate understanding of specific information in the sections of the academic article about virtual reality therapies for pain relief by taking a reading comprehension test, and
- 5. demonstrate understanding of the rules for question formation by reading related theory, completing questions

using given words with 100% accuracy, and formulating their own questions with 80% accuracy.

Note: The role of the assistant teacher is to collect Ss' errors, assist with vocabulary in the chat, provide the materials

(handouts and links)	, and help students	while they are working in BORs.
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Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, Ss are encouraged to ask questions about the notes they prepared for the discussion. Next, in BORs, Ss	a) procedural What do you have for question #? What do you think? / What is your opinion?	S L	 Activating background knowledge Discussing given questions 	15 min

	discuss the questions in Handout #4 (Lesson 4) by making use of the ideas they have previously prepared.	In my opinion/ I think that the actual answer is I agree / disagree with you because		•	Exchanging ideas Negotiating meaning	
	Materials Handout #4 (<u>Lesson 4</u>)	b) real task language written consent stroke brain visual processing motor rehabilitation moving, static, and hidden conditions Edinburgh questionnaire Fugl-Meyer assessment upper extremity (FMA-UE) Likert scale				
2	Pre-task 1Ss are directed to Handout #1. InBORs, Ss work in pairs tocomplete a graphic organizer withthe type of information found in thesections of an abstract. Then, backin the main session, the T calls onrandom Ss to share their answerswith the entire class.MaterialsHandout #1	a) procedural What can we write for (name of the section)? Maybe we can write What do you think? / What is your opinion? In my opinion/ I think that the type of information you can find in (name of the section) is I agree / disagree with you because	W S L	•	Activating background information Identifying key sections Exchanging ideas Negotiating meaning Showing agreement or disagreement	20 min

		b) real task language context previous work direction, reasons, or goals of a research strategies, processes, or techniques utilized in the collection of data or evidence for analysis key results or answers to the questions/hypotheses				
3	Pre-task 2SS are divided into 2 teams to play a game in the form of a competition to recognize key terms of the academic article they will read in the exam. The T says a word, then types it in the chat, and the participating student has to match the word with a number of one of the pictures on slide 2 on Jamboard. The winning team is the one with the most correct answers.Materials https://jamboard.google.com/d/1xJ 30_ML9L77KHmGhAOI5gKGh5U Nlwg1p7IOolgh46KQ/viewer?f=0	 a) procedural 1. What's the meaning of ? 2. I think it's # 3. I'm not sure. Maybe it's # 4. How do you pronounce that word? 5. Could you please repeat? b) real task language scarce /skɛrs/ emergency department (ED) /ɪ mɜrdʒənsi dɪ partmənt/ anxiety /æŋ zaɪəti/ localisations / loukələ zeɪʃənz/ measures / mɛʒərz/ user satisfaction / juzər sætə sfækʃən/ 	SL	•	Playing games Guessing Matching words with pictures	15 min

		analgesia / ænəlˈʤiziə / enroll / ɛnˈroʊl / resource /ˈ risɔrs / triage /ˈ trɪaʒ /				
4	Main TaskSs are sent 2 documents via chat.One contains the adapted articleand the other the test with theitems to answer. Next, the Texplains how the Ss complete thetest and how they can send it backwith their answers.MaterialsThe adapted academic articleVirtual Reality for Pain Relief in theEmergency Room (VIPER) – aprospective, interventionalfeasibility studyUnit 1 Partial Exam - Reading Test	 a) procedural Can I ask you a question? What is the meaning of? In my opinion/ I think that the answer for # is b) real task language scarce, measures, triage, resource, analgesia virtual reality (VR) emergency department (ED) study design and setting examples of inclusion/exclusion criteria primary and secondary outcomes pain and anxiety reduction effectiveness on pain and anxiety 	RW	•	Skimming and scanning Reading with a purpose Showing understanding of an academic article	50 min
5	Post-task - Asynchronous Ss are given a handout. In Handout #2, Ss read information about how to ask questions in the simple present and the simple	real task language yes/no questions and information questions in the simple present and the simple past	R W	•	Reading with a purpose Filling in the blanks	60 min

past. Next, Ss practice question formation by completing a fill-in- the-blanks exercise. Then, Ss go to Padlet to write 5 questions they would ask a fellow colleague to get to know him/her.	•	Asking questions	
Materials Handout #2 <u>https://padlet.com/chrisjvm93/rkmq</u> <u>vv8t3rg2dm0z</u>			

Lesson Plan - Lesson 6 - Unit #2

Topic: Meeting fellow colleagues

Lead teacher: Gustavo Alfaro / Assistant teacher: Christian Vega

Date: Tuesday, September 20th, 2022



Goal: By the end of this unit, students and instructors from the Physical Therapy program at UCR will be able to

successfully introduce themselves to colleagues, talk about their professional and academic backgrounds and interests,

and propose collaborations at field-related conferences.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy) course.

General Objective: By the end of the lesson, students will be able to effectively introduce themselves by exchanging greetings and personal information and asking follow-up questions in conversations at conferences for physical therapy professionals and students.

Specific objectives:

By the end of this lesson, the students will be able to...

- 1. organize a conversation between two physical therapists in an orderly manner by completing a virtual jigsaw activity with 100% accuracy,
- 2. exchange personal, academic, and professional information by taking part in a conversation in pairs using the questions prepared in the previous lesson,
- 3. create a conversation between two physical therapists at a conference in pairs using a provided example,
- 4. evaluate the created conversation by completing a self-assessment rubric and making corrections and improvements in pairs,
- 5. role-play in pairs the corrected version of the conversation in front of the class with 90% accuracy, and
- 6. show understanding of the rules for the intonation of questions by watching theory-related videos, writing questions

for given statements with 80% accuracy, and recording themselves asking the questions with proper intonation.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills		Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class and the reading test, Ss are given a scrambled scenario in which 2 physical	a) procedural Can you share your screen? Who do you think starts the conversation? Anna or María? In my opinion/ I think / Maybe the first intervention is "Hello,	R S L	•	Activating background knowledge Exchanging ideas	20 min

	therapists are meeting for the first time at a conference. Ss organize each therapist's interventions in the correct order. Materials Handout #1 https://wordwall.net/resource/ 35713915	I'm Anna Bakery. What's your name?" by Anna. What do you think? / Do you agree / What's your opinion? I agree with you / You are right because Anna is greeting María. I disagree with you / I'm not sure because María is not asking anything.		•	Negotiating meaning Showing agreement or disagreement	
		b) real task language greetings introductions statements and questions in the simple present tense expressions to show interest				
2	Pre-task 1 Ss are directed to the questions they wrote in the post-task of the previous lesson. The T explains the intonation for wh- and yes/no questions using the whiteboard in Zoom. Then, in pairs, Ss pretend they are meeting their classmate for the first time, and by turn-	a) procedural Dialogue Starter Oh, I see. / Wow! /That's very interesting! / Really? Tell me more. What about you? / And you? What makes you say that? Why do you feel that way? What do you mean by that?	R S L	•	Asking questions Discussing information Exchanging ideas Turn-taking	20 min
		b) real task language greetings				

	taking, they ask each other the questions in the Padlet. Materials Handout #2 <u>https://padlet.com/chrisjvm93/</u> <u>rkmqvv8t3rg2dm0z</u>	personal, academic, and professional information statements and questions in the simple present tense expressions to show interest				
3	Pre-task 2 In pairs, Ss write a conversation by pretending they are meeting at a conference and addressing the topics in the handout. Ss can make use of Handout #2 as an example, as well as the useful expressions in Handout #3.	a) procedural Can you share your screen? Who do you think can start the conversation? In my opinion/ I think / Maybe we can start the conversation with a greeting like "" What do you think? / Do you agree / What's your opinion? I agree with you / You are right, and then I can say "" I disagree with you / I'm not sure. Maybe I can say ""	W S L R	•	Writing with a purpose Drafting Exchanging and discussing ideas Showing agreement or disagreement	20 min
	 Ss complete the course evaluation either prior to the Main Task or after the break: <u>https://forms.gle/1Mf5EEGMX</u> <u>nVJh5Hh8</u> <u>https://forms.gle/peNXPWjRh</u> g2Stu266 	b) real task language greetings personal, academic, and professional information statements and questions in the simple present and the simple past tenses expressions to show interest				

	Materials Handout #3					
4	Pre-task 3Once Ss have written their conversations, they are given Handout #4 to go back to BORs to self-assess their 	 a) procedural What do you think about aspect #? / What's your opinion about aspect #? I agree with aspect # because I disagree with aspect # because I think you're right / I couldn't agree more with you. I don't agree with you / I'm not sure. b) real task language 	RW	•	Self-assessing Making corrections and improvements Exchanging and discussing ideas Showing agreement or disagreement	15 min
		greetings personal, academic, and professional information statements and questions in the simple present and the simple past tenses expressions to show interest				
5	Main Task In BORs, Ss rehearse their final version with the Ts'	a) procedural <i>What do you think about aspect #</i> ?	R W	•	Self-assessing Rehearsing Role-playing	25 min

	feedback and suggestions to later present it in the Main Session. Next, Ss present their polished conversations to the class. After each pair presents, the T chooses a random student to share feedback about the intonation of the questions used in the conversation.	/ What's your opinion about aspect #? I agree with aspect # because I disagree with aspect # because I think you're right / I couldn't agree more with you. I don't agree with you / I'm not sure.			
	Materials Handout #3 Handout #4	b) real task language greetings personal, academic, and professional information statements and questions in the simple present and the simple past tenses expressions to show interest			
6	Post-task - Asynchronous Ss are given a handout. In Handout #5, Ss find links to watch videos about intonation for questions. Next, Ss write proper questions for the statements in point B. Then, Ss go to Flip to record themselves both asking and	real task language intonation for yes/no questions and information questions in various tenses	R W S L	 Watching videos with a purpose Asking questions to given statements Recording 	60 min

answering the questions and answers in point B .	Using proper intonation
Materials Handout #5 <u>https://www.youtube.com/wat</u> <u>ch?v=WhCncdRUvLo&ab_ch</u> <u>annel=Laurensenglishcorner</u>	
https://www.youtube.com/wat ch?v=wc5U3u2inFs&ab_chan nel=mmmEnglish	
https://flip.com/1f5e47cb	

Lesson Plan - Lesson 7 - Unit #2

Topic: Exchanging information with fellow colleagues

Lead teacher: Christian Vega / Assistant teacher: Gustavo Alfaro

Date: Tuesday, September 27th, 2022



Goal: By the end of this unit, students from the Physical Therapy program at UCR will be able to successfully introduce

themselves to colleagues, talk about their professional and academic backgrounds and interests, and propose

collaborations at field-related conferences.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy) course.

General Objective: By the end of the lesson, students will be able to accurately describe their occupations, qualifications, and work experience by exchanging information about their professional and academic backgrounds and interests with fellow colleagues at conferences for physical therapy professionals and students.

Specific objectives:

By the end of this lesson, the students will be able to...

- 1. recognize vocabulary about careers by completing conversations among physical therapists with the provided word bank with 100% accuracy.
- 2. effectively formulate follow-up questions to clarify the information from the profile of a physical therapist.
- 3. successfully create a profile with their own information by completing a provided template.
- 4. show understanding of the rules for the formation of questions in the present, past, and future tenses by reading a theory-related handout and accurately writing follow-up questions to clarify the information from a classmate's profile.
- 5. appropriately describe their occupations, qualifications, and work experience to a classmate by clarifying information about their professional and academic backgrounds and interests and asking follow-up questions.
- 6. show understanding of follow-up questions by reading a theory-related handout and writing follow-up questions for given conversations between physical therapists with 100% accuracy.
- 7. show understanding of the rules for the pronunciation of the verbs in the past tense by recording themselves answering the provided questions with correct pronunciation.

Note: The role of the assistant teacher is to collect errors, assist with vocabulary in the chat, provide the materials (handouts and links), and assist students while they are working in BORs.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, Ss are given a handout with 3 conversations. In BORs, Ss work in pairs by using the vocabulary provided in the word bank to complete each blank in the conversations with the correct word. Materials Handout #1	 a) procedural Can you share your screen? In my opinion/ I think / Maybe the first blank is "" What do you think? / Do you agree / What's your opinion? I agree with you / You are right because I disagree with you / I'm not sure because b) real task language assistant /ə sɪstənt/ boss /bos/ employee /ɛm ploɪi/ employee /ɛm ploɪər/ experience /ɪk spɪriəns/ training / treɪnɪŋ/ volunteer / valən tɪr/ area of specialization / ɛriə əv spɛʃələ zeɪʃən/ languages / læŋgwəʤəz/ qualifications / kwaləfə keɪʃənz/ 	R W S L	 Activating background knowledge Exchanging ideas Negotiating meaning Filling in the blanks Showing agreement or disagreement 	20 min

2	Pre-task 1 Individually, Ss read the profile of a physical therapist. Next, Ss prepare questions about additional information they want to clarify. Then, the T calls on random Ss to share their questions and reads the submitted questions in the chat with the entire class. Materials Handout #2	 a) procedural What is the meaning of splinting? How do you pronounce? I would like to know more about What do you think? / What's your opinion? I agree with you / You are right because I disagree with you / I'm not sure because b) real task language personal information skills professional summary certifications experience education 	R W S L	•	Reading with a purpose Discussing the information in a profile Asking questions	15 min
3	Pre-task 2 Individually, Ss create their own profile by completing a provided template. Next, Ss exchange their profiles in the Zoom chat with their assigned classmate.	 a) procedural How do you say ""? How do you write/spell ""? b) real task language personal information skills professional summary 	W	•	Writing with a purpose Creating a profile Working autonomously	20 min
	Materials Handout #3	certifications experience				

		education				
4	Pre-task 3In the main session, Ss are directed to Handout #4 to review the rules for question formation of the present, past, and future tenses. The T calls on random Ss to read the information in Handout #4. Then, Ss open their assigned classmate's profile and read it. Based on the information in the profile, Ss prepare 3 or more questions about additional information they need to clarify with their classmate.Materials Handout #4 Handout #5	 a) procedural How do you say "…"? How do you write/spell "…"? b) real task language questions in the simple present, simple past, and future tenses 	R S L W	•	Reading with a purpose Analyzing the information in a profile Asking questions	20 min
5	Main Task In BORs, Ss ask each other the questions they prepared in the previous task by turn-taking. Ss address their classmate's questions by clarifying the requested information. Next, back in the main session,	a) procedural I was reading your profile, and I wanted to ask you about your previous job By reading your profile it isn't very clear to me about your certifications	S L	•	Discussing the information in a profile Asking questions Turn-taking Role-playing	25 min

	random Ss share one interesting fact about their peers and the questions they asked about. Materials Handout #5	b) real task language greetings and farewells personal, academic, and professional information statements and questions in the simple present, simple past, and future tenses expressions to show interest			
67	 Post-task - Asynchronous 1. In Handout #6, Ss read about the speaking skill for asking follow-up questions. Then, Ss write a proper follow-up question for the mini-conversations in point B. 2. In Handout #7, Ss watch a video about the pronunciation of the regular verbs in the past tense. Next, Ss answer the questions in point B by recording themselves on Flip with correct pronunciation. Materials Handout #6 	real task language follow-up questions the pronunciation of the regular verbs in the past tense	R W S L	 Reading with a purpose Asking questions to given conversations Watching a video with a purpose Recording a voice entry Using correct pronunciation of the -ed sounds 	60 min

Handout #7 https://www.youtub h?v=j32SurxnE4s8 channel=Elementa	kt=208s&ab		
https://flip.com/9f2	<u>6f6c</u>		

Lesson Plan - Lesson 8 - Unit #2

Topic: Role-playing as physical therapists at conferences

Lead teacher: Gustavo Alfaro / Assistant teacher: Christian Vega

Date: Tuesday, October 4th, 2022



Goal: By the end of this unit, students and instructors from the Physical Therapy program at UCR will be able to

successfully introduce themselves to colleagues, talk about their professional and academic backgrounds and interests,

and propose collaborations at field-related conferences.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy) course.

General Objective: By the end of the lesson, students will be able to successfully suggest an academic or professional collaboration by expressing interest, exploring options based on their interests, and exchanging contact information for future collaboration at conferences for physical therapy professionals and students.

Specific objectives:

By the end of this lesson, the students will be able to...

1. formulate questions and answers to classmates by correctly employing previously learned vocabulary,

- 2. successfully exchange academic and professional information, experiences on research collaboration, and future interests by taking part in conversations in pairs,
- 3. create a conversation in pairs between two physical therapists attending an international conference by effectively addressing the tasks in the provided role-play cards,
- 4. present the role-play prepared in pairs in front of the class by accurately using previously learned vocabulary, grammar structures, and speaking skills,
- 5. correctly evaluate a classmate's performance in the role-play by completing a peer assessment checklist and sharing the feedback, and
- 6. show understanding of the rules for statement and question formation of the present perfect by watching theoryrelated videos, completing a chart about regular and irregular past participles with 100% accuracy, doing a fill-inthe-blanks exercise with 90% accuracy, and writing related questions with 80% accuracy.

Note: The role of the assistant teacher is to collect errors, assist with vocabulary in the chat, provide the materials

(handouts and links), and assist students while they are working in BORs.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, Ss are given a link with the vocabulary studied in the previous lesson. In the main session, Ss take turns to formulate questions to their classmates using the words from the spinning wheel. Ss must first answer their classmate's questions before formulating their own ones. Materials Handout #1 https://wordwall.net/resource/362 88591/unit-2-lesson-8-warm-up	 a) procedural I'll go first, second, next. I want to ask (classmate) a question. b) real task language assistant /ə sɪstənt/ boss /bɔs/ employee /ɛm plɔɪi/ employee /ɛm plɔɪər/ experience /ɪk spɪriəns/ training / treɪnɪŋ/ volunteer / valən tɪr/ area of specialization / ɛriə əv spɛʃələ zeɪʃən/ languages / læŋgwəʤəz/ qualifications 	S L	 Activating background knowledge Formulating questions and answers Describing professional and academic backgrounds Incorporating previously learned vocabulary 	20 min
2		/ kwaləfə keɪʃənz/	<u> </u>	Imprometu	05 min
2	Pre-task 1 In BORs, Ss take turns asking and answering questions about academic and professional information. Next, back in the main session, the T chooses random Ss to briefly share with	 a) procedural Do you want to ask me the first/next question? What would you like to ask me / know about me? b) real task language 	SL	 Impromptu speaking Formulating questions and answers Describing professional and 	25 min

	the class the information they discussed with their classmates. Then, Ss are sent back to BORs in new pairs to ask and answer questions about experiences on research collaboration and future interests. Back in the main session, the T calls on the Ss who didn't participate in the previous round to briefly share the information they discussed with their classmates.	greetings and farewells academic, and professional information experiences on research collaboration statements and questions in the simple present, simple past, present perfect, and future tenses follow-up questions expressions to show interest		academic backgrounds • Sharing experiences	
3	Handout #2 Pre-task 2 In BORs, Ss work in pairs to prepare a conversation between two physical therapy colleagues by addressing the information in the role-play cards (Student A - Student B). Materials Handout #3	 a) procedural How do you say ""? We can start the conversation by We can finish the conversation by saying "" b) real task language greetings and farewells contact information academic/professional background 	R S L	 Preparing a role- play Exchanging ideas Deciding on speaking strategies Working collaboratively 	20 min

		reasons to attend a conference statements and questions in the simple present, simple past, present perfect, and future tenses follow-up questions expressions to show interest				
4 5	Main Task In the main session, Ss take turns presenting their role-plays. Prior to the presentation of the role-plays, Ss are directed to Handout #4 for peer feedback provision. Ss are assigned a classmate to pay attention to and evaluate his/her performance based on the assessment form. After all pairs present their role- plays, Ss upload their assessment forms in the corresponding folder in Drive. Materials Handout #3 Handout #4	 a) procedural We want to go first Can we present first/second/next? b) real task language greetings and farewells contact information academic/professional background reasons to attend a conference statements and questions in the simple present, simple past, present perfect, and future tenses follow-up questions expressions to show interest compliments 	SL	•	Role-playing Impromptu speaking Formulating questions and answers Turn-taking Using previously learned vocabulary and speaking strategies	30 min

	https://drive.google.com/drive/fol ders/1zEebSTXJYI1w0G2flVky2 LWW3EMqFwLq				
6	Post-task - Asynchronous In Handout #6, Ss watch a video about regular and irregular past participles. Next, Ss complete a table with the corresponding verb inflection of the provided conjugations. 	real task language regular and irregular past participles statements and questions in the present perfect tense	R L W	 Watching videos with a purpose Completing a table Filling in the blanks Formulating questions 	60 min

https://www.youtube.com/watch? v=5jFgiS4mvyc&ab_channel=Ea syTeaching		
https://www.youtube.com/watch? v=_5z9Y3OWodA&ab_channel= PaperEnglish-EnglishDanny		

Lesson Plan - Lesson 9 - Unit #2

Topic: Role-playing as physical therapists at conferences

Lead teacher: Christian Vega / Assistant teacher: Gustavo Alfaro

Date: Tuesday, October 11th, 2022

es Alfaro

Goal: By the end of this unit, students and instructors from the Physical Therapy program at UCR will be able to

successfully introduce themselves to colleagues, talk about their professional and academic backgrounds and interests,

and propose collaborations at field-related conferences.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy) course.

General Objective: By the end of the lesson, students will be able to successfully exchange greetings, personal and contact information, ask follow-up questions, express interest, and explore options based on their interests for future collaboration by role-playing as attendees at a conference for physical therapy professionals and students..

Specific objectives:

By the end of this lesson, the students will be able to...

Abbreviations: ESP= English for Specific Purposes T = teacher Ss = students L = listening S = speaking R = reading W = writing BORs = break-out rooms

English for

1. successfully show understanding of the appropriateness of conversation topics with fellow colleagues by

brainstorming their own ideas and examples,

- 2. effectively exchange information about academic and professional achievements and experiences by taking part in a conversation in pairs using the guestions prepared in the previous lesson,
- 3. successfully determine the requirements for having a conversation with a fellow colleague at a conference for physical therapists by discussing provided questions,
- 4. successfully exchange personal, academic, and professional information and field-related purposes by role-playing as attendees at a conference for physical therapists and accurately using previously studied vocabulary, structures, and speaking strategies, and
- show understanding of the rules for using the present perfect versus the simple past tenses by watching a theoryrelated video, doing a fill-in-the-blanks exercise with 100% accuracy, and recording answers to related questions with 100% accuracy.

Note: The role of the assistant teacher is to collect Ss' errors, assist with vocabulary in the chat, provide the materials (handouts and links), and help students while they are working in BORs. <u>Only for this lesson, the assistant teacher</u> <u>explains the post-task to the Ss waiting for their turn to take the speaking exam.</u>

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, the T shares the whiteboard on Zoom. First, Ss categorize the given topics as "appropriate" or "inappropriate" by dragging and dropping using the whiteboard on Zoom. Second, Ss share their own topics to add to the whiteboard Ss are given a link with the vocabulary studied in the previous lesson. Then, the T sums up the information on the whiteboard. Materials	 a) procedural I think/believe religion is an inappropriate topic to speak about. I think/believe studies are an appropriate topic to speak about. b) real task language appropriate topics to speak about (e.g. work, studies, experiences) inappropriate topics to speak about (age, religion, politics) 	SL	 Activating background knowledge Brainstorming Working collaboratively Showing understanding of the appropriateness of the topics Showing agreement or disagreement 	15 min
	Whiteboard on Zoom	<u> </u>			
2	Pre-task 1 In BORs, Ss take turns asking and answering the questions they prepared in the previous lesson. Prior to sending the Ss to the BORs, the T explains how	a) procedural Ok / So / Well, go ahead. Ask me the first question. What is your second question?	S L R	 Discussing prepared questions Describing professional and academic 	25 min

	to answer questions with the present perfect, and may use the whiteboard for further explanations about academic and professional information. Next, back in the main session, the T chooses random Ss to briefly share with the class the information they discussed with their classmates. Materials Handout #5 - Post- task (Lesson 8)	Continue with the following/next question, please. Oh, I see. Wow! That's very interesting! Really? Tell me more. What sbout you? / And you? What about you expand on that, please? What do you mean by that? b) real task language statements and questions in the present perfect and the simple past tenses follow-up questions expressions to show interest		experiences and achievements • Showing interest • Asking follow- up questions	
3	Pre-task 2 In BORs, Ss work in groups of 3 to discuss the questions in Handout #1. Ss discuss the structure of a conversation between fellow colleagues at a conference for physical therapists. Next, back in the main session, the T chooses	 a) procedural Can you share your screen? Can you ask me / read question #? What do you think about question #? b) real task language greetings and farewells contact information 	S L R	 Discussing provided questions Exchanging ideas Showing agreement or disagreement Working collaboratively 	20 min

	random Ss to share their ideas with the entire class. Materials Handout #1	academic/professional background reasons to attend a conference statements and questions in the simple present, simple past, present perfect, and future tenses follow-up questions expressions to show interest			
4	Main Task Ss are divided into pairs for the oral exam. In BORs, Ss are given role-play cards for them to read the cards to show understanding of the instructions. Next, Ss prepare their conversation for 5 minutes. Then, Ss present the conversation to the teachers for about 5 minutes. Finally, the Ts provide immediate feedback to the Ss. The task is repeated with the remaining pairs. The Ss waiting to take their oral test stay with the assistant teacher for him to explain to them the post-task procedures.	 a) procedural How do you say "…"? What is the meaning of "…"? b) real task language greetings and farewells contact information academic/professional background reasons to attend a conference statements and questions in the simple present, simple past, present perfect, and future tenses follow-up questions expressions to show interest compliments 	S L R	 Role-playing Impromptu speaking Formulating questions and answers Turn-taking Using previously learned vocabulary and speaking strategies 	60 min

	Materials Role-play Cards				
5	Post-task - Asynchronous In Handout #2, Ss watch a video about the difference in use of the present perfect and the 	real task language statements and questions in the present perfect and the simple past tenses	R L W S	 Watching a video with a purpose Filling in the blanks Recording themselves Formulating answers about personal, academic, and professional experiences and achievements 	60 min
	https://flip.com/4258a780				

Lesson Plan - Lesson 10 - Unit #3

Topic: Watching videos for main and supporting ideas

Lead teacher: Gustavo Alfaro / Assistant teacher: Christian Vega

Date: Tuesday, October 18th, 2022



Goal: By the end of this unit, students and instructors from the Physical Therapy program at UCR will be able to effectively

demonstrate comprehension of field-related educational videos by identifying main and supporting ideas, answering

comprehension questions, exchanging key information, taking notes, and reporting findings.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy)

course.

General Objective: By the end of the lesson, students will be able to show understanding of an educational video about a

therapy by accurately identifying discourse markers to help them locate the main and supporting ideas.

Specific objectives:

By the end of this lesson, the students will be able to...

1. appropriately describe characteristics of plantar fasciitis and possible treatments by exchanging ideas orally with the entire class,

- 2. recognize vocabulary related to plantar fasciitis by completing a matching exercise with words and pictures with 100% accuracy,
- 3. effectively identify discourse markers in a video about plantar fasciitis by accurately highlighting the key expressions heard in the introduction of the video,
- 4. accurately identify the main and supporting ideas of the video about plantar fasciitis by predicting and comparing their answers in a multiple-choice listening exercise with classmates,
- 5. successfully justify their preferred treatment option for plantar fasciitis by exchanging opinions about the treatments in the video during a group discussion, and
- 6. successfully paraphrase the information watched in the video about plantar fasciitis by recording themselves using at least 7 out of the 10 vocabulary words studied in the lesson.

Note: The role of the assistant teacher is to collect Ss' errors, assist with vocabulary in the chat, provide the materials (handouts and links), and help students while they are working in BORs.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	 Schema activation After receiving delayed feedback from the previous class, the T shares his screen displaying the PPT Unit 3 - Lesson 10 - Warm- up - Plantar Fasciitis. The T prompts the Ss to share any piece of information they know about plantar fasciitis by exchanging ideas in an open discussion with the entire class. <u>As a back-up</u>, the T would explain the vocabulary words on the last slide in the presentation. 	 a) procedural Plantar fasciitis is Plantar fasciitis happens when To treat plantar fasciitis, you have to To combat plantar fasciitis, you can b) real task language plantar fasciitis / plæntar 'faʃi aɪrɪz/ iontophoresis / ajantəfə 'rɪsɪz/ stretch /strɛtʃ/ dorsiflexion / dɔrsɪ 'flek.ʃən/ calcaneus /kæl keɪ.ni.əs/ dosage / dousədʒ/ oscillate / asə leɪt/ mobilize / moubə laɪz/ inflammation / ɪnflə meɪʃən/ medication / mɛdə keɪʃən/ heel bone /hil boun/ pressure / prɛʃər/ 	SL	 Activating background knowledge Discussing pain treatments Exchanging ideas 	15 min
	Materials PPT <i>Unit 3 - Lesson 10 -</i> <i>Warm-up - Plantar Fasciitis</i>				

2	Pre-task 1 Ss are given a link to Wordwall to do a matching exercise in pairs. In BORs, Ss match the vocabulary word to its corresponding picture. Back in the main session, the T addresses the Ss' questions about the exercise and helps them practice the correct pronunciation of the words. Materials https://wordwall.net/resource /33776109/plantar-fasciitis- vocabulary	 a) procedural I think the first picture is What do you think? / Do you agree? I think you're right / Yes, it's that one I'm not very sure / I think you're wrong b) real task language plantar fasciitis / plæntar 'faſi aɪrɪz/ iontophoresis / ajantəfə 'rɪsɪz/ stretch /strɛtʃ/ dorsiflexion / dorsɪ 'flek.ʃən/ calcaneus /kæl keɪ.ni.əs/ dosage / dousədʒ/ oscillate / asə leɪt/ mobilize / moubə laɪz/ inflammation / ɪnflə meɪʃən/ medication / mɛdə keɪʃən/ heel bone /hil boun/ pressure / prɛʃər/ 	S L R	 Activating background knowledge Working collaborativel y Matching words with pictures 	15 min
3	Pre-task 2 Using Handout #1, the T explains the importance of paying attention to discourse markers. Next, random Ss read the uses of the discourse markers to be recognized in a video about plantar fasciitis. Then, the Ss	a) procedural What discourse markers did you highlight? I think I heard "by and large." Me too / I heard that one too. I didn't hear that one / I think the speaker didn't say that one.	R L S	 Recognizing discourse markers Watching a video with a purpose Comparing answers 	20 min

	watch the introduction of the video twice (the first 2 minutes) to highlight all the discourse markers used by the speaker. In BORs, Ss compare their answers in pairs. Finally, the T asks a random student to share his/her screen with the correct answers. Materials Handout #1 <u>https://www.youtube.com/wa</u> <u>tch?v=kHWLi_4Qgv0&ab_ch</u> annel=ChoosePT	b) real task language discourse markers for: giving examples, listing, generalizing, sequencing, and indicating time.		•	Showing agreement or disagreement	
4	Main Task Individually, Ss read the items in Handout #2 to predict the answers based on the speaker's explanation in the video about plantar fasciitis. In BORs, Ss compare their predictions for the video in pairs. Next, the T plays the video twice for the Ss to either confirm or	a) procedural What option did you select for #? I think / Maybe the correct option is "" I agree with you / I think that's what we will hear in the video. I disagree with you / I think the speaker won't say that one.	R L S	•	Predicting Exchanging ideas Watching a video with a purpose	30 min

	reject the predictions they made. Then, the T calls on random Ss to check the answers to the items in the handout. Materials Handout #2 <u>https://www.youtube.com/wa</u> <u>tch?v=kHWLi_4Qgv0&ab_ch</u> <u>annel=ChoosePT</u>	b) real task language athletes an inner band of tissue, a middle band of tissue, and an outer band of tissue heel pain along the border of the heel The pain is worse when patients wake up and put their feet on the ground, adding weight on the heel. massages, iontophoresis, various stretches and exercises.			
5	Post-task 1 - Synchronous Ss are given Handout #3 for them to choose 1 out of the 3 treatments for plantar fasciitis explained in the video. Next, Ss work in groups of 3 in BORs to explain to their classmates the treatment they would probably apply to their patients and the rationale for their choice. Materials	 a) procedural I would probably / absolutely use Treatment 1 because it can reduce pain, and improve circulation. I agree with Catalina because most of my patients actually prefer the massage over a machine transmitting electricity. b) real task language massages, iontophoresis, various stretches and exercises. 	S	 Discussing a higher-order thinking (HOTS) question Exchanging ideas Showing agreement or disagreement 	10 min

	Handout #3					
6	Post-task 2 - Asynchronous Ss go to <i>Flip</i> to record themselves using the recently learned words and discourse markers to paraphrase the information seen in the video about plantar fasciitis.Materials Handout #4https://www.youtube.com/wa tch?v=kHWLi_4Qgv0&ab_ch annel=ChoosePThttps://flip.com/a21f952f	real task language plantar fasciitis / plæntar faʃi aɪrɪz/ iontophoresis / ajantəfə rɪsɪz/ stretch /strɛtʃ/ dorsiflexion / dɔrsɪ flek.ʃən/ calcaneus /kæl keɪ.ni.əs/ dosage / dousədʒ/ oscillate / asə leɪt/ mobilize / moubə laɪz/ inflammation / ɪnflə meɪʃən/ medication / mɛdə keɪʃən/ heel bone /hil boun/ pressure / prɛʃər/ statements in the simple present tense discourse markers	S L	•	Watching a video with a purpose Recording themselves Using previously learned vocabulary Using discourse markers Summarizing Paraphrasing	60 min

Lesson Plan - Lesson 11 - Unit #3

Topic: Watching videos to report key information

Lead teacher: Christian Vega / Assistant teacher: Gustavo Alfaro

Date: Tuesday, October 25th, 2022



Goal: By the end of this unit, students and instructors from the Physical Therapy program at UCR will be able to effectively

demonstrate comprehension of field-related educational videos by identifying main and supporting ideas, answering

comprehension questions, exchanging key information, taking notes, and reporting findings.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy)

course.

General Objective: By the end of the lesson, students will be able to successfully demonstrate understanding of a

physical therapy treatment in an educational video by taking notes and correctly reporting key information to a classmate

orally.

Specific objectives:

By the end of this lesson, the students will be able to...

- 1. describe information and experiences about physical therapy for stroke recovery and pediatric physical therapy by taking part in a conversation in pairs,
- 2. recognize vocabulary related to physical therapy for stroke recovery or pediatric physical therapy by completing a matching exercise with words and pictures with 100% accuracy,
- 3. show understanding of the recently studied vocabulary about physical therapy for stroke recovery or pediatric physical therapy by completing a fill-in-the-blanks exercise with 80% accuracy,
- 4. accurately extract key information from an educational video about physical therapy for stroke recovery or pediatric physical therapy by taking notes for provided guiding questions in pairs,
- 5. show understanding of physical therapy for stroke recovery and pediatric physical therapy by reporting orally key information from their assigned video to a classmate,
- 6. identify discourse markers in an educational video about physical therapy for stroke recovery or pediatric physical therapy by accurately extracting key expressions heard in the video, and
- show understanding of the use of modals and modal-like phrases by classifying key expressions from an educational video about physical therapy for stroke recovery or pediatric physical therapy into their correct category with 90% accuracy.

Note: The role of the assistant teacher is to collect Ss' errors, assist with vocabulary in the chat, provide the materials

(handouts and links), and help students while they are working in BORs.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, Ss are given Handout #1 for them to go in BORs and in pairs exchange information and experiences about physical therapy for stroke recovery and pediatric physical therapy. Then, back in the main session, the T asks random Ss about their experiences treating patients with the previously stated conditions.	 a) procedural A stroke is a medical condition that happens when Pediatric PT helps kids improve their Working with patients recovering from a stroke is/was challenging because Working with children is/was difficult because b) real task language stroke recovery pediatric physical therapy statements with the simple present, the simple past and the present perfect tenses 	S L	 Activating background knowledge Discussing medical conditions Exchanging ideas and experiences 	15 min
	 <u>Note</u>: after the warm-up, Ss are divided into <i>Student A</i> and <i>Student</i> 				

	B for the rest of the lesson.				
	Materials Handout #1				
2	Pre-task 1 Ss are given a link to Wordwall to do a matching exercise in pairs. In BORs, Ss match the vocabulary word to its corresponding picture. Back in the main session, the T addresses the Ss' questions about the exercise and helps them practice the correct pronunciation of the words.	 a) procedural I think the first picture is What do you think? / Do you agree? I think you're right / Yes, it's that one I'm not very sure / I think you're wrong b) real task language Student A: rail /reɪl/ treadmill / trɛd mɪl/ 	S L R	 Activating background knowledge Working collaboratively Matching words with pictures 	15 min
	Materials Student A: <u>https://wordwall.net/resource/</u> <u>37092325/unit-3-lesson-11-</u> <u>vocabulary-student-a</u>	consumers / kənˈsumərz/ recovery / rɪˈkʌvri/ injury / ɪnʤəri/ database / ˈ deɪtə beɪs / task specificity / tæsk			
	Student B: <u>https://wordwall.net/resource/</u> <u>37092280/unit-3-lesson-11-</u> <u>vocabulary-student-b</u>	spɛsə fɪsəti/ lite gait trainer /laɪt geɪt 'treɪnər/ bionis vector / baɪənɪs 'vɛktər/ exo gait trainer / ɛksoʊ geɪt 'treɪnər/	lister		

		Student B: involved in /ɪn 'valvd ɪn/ outpatient clinic / aut peɪʃənt 'klınık/ group effort /grup `ɛfərt/ motor movement / moutər 'muvmənt/ integrated / ɪntə greɪtəd/ quadriceps muscles / kwadrə sɛps ˈmʌsəlz/ caretaker / kɛr teɪkər/ wide range /waɪd reɪndʒ/ transition /træn zɪʃən/ strengthen / strɛŋθən/			
3	Pre-task 2Ss are given another link to Wordwall to complete a fill-in- the-blanks exercise in pairs.In BORs, Ss insert the vocabulary word to its corresponding sentence.Back in the main session, the T addresses the Ss' questions about the exercise and helps them practice the correct pronunciation of the words.Materials	 a) procedural <i>I</i> think # is <i>W</i>hat do you think? / Do you agree? <i>I</i> think you're right / Yes, it's that one <i>I'm</i> not very sure / I think you're wrong b) real task language Student A: rail /reɪl/ treadmill / 'trɛd mɪl/ consumers /kən 'sumərz/ recovery /rɪ 'kʌvri/ 	S L R	 Negotiating meaning Filling in the blanks with key vocabulary Showing agreement or disagreement 	20 min

	Student A: https://wordwall.net/resource/ 37092924/unit-3-lesson-11- vocabulary-in-context- student-a Student B: https://wordwall.net/resource/ 37093067/unit-3-lesson-11- vocabulary-in-context- student-b	injury / Indyəri/ database / deɪtə beɪs/ task specificity /tæsk spɛsə fɪsəti/ lite gait trainer /laɪt geɪt 'treɪnər/ bionis vector / baɪənɪs 'vɛktər/ exo gait trainer / ɛksoʊ geɪt 'treɪnər/ Student B: involved in /ɪn 'valvd ɪn/ outpatient clinic / aut peɪʃənt klɪnɪk/ group effort /grup 'ɛfərt/ motor movement / moutər 'muvmənt/ integrated / ɪntə greɪtəd/ quadriceps muscles / kwadrə sɛps 'mʌsəlz/ caretaker / kɛr teɪkər/ wide range /waɪd reɪndʒ/ transition /træn zɪʃən/ strengthen / strɛŋθən/			
4	Pre-task 2 Ss are given a link to <i>Liveworksheets</i> to go in BORs and in pairs watch a	a) procedural Let's write What can we add here/in this question?	L S R	 Watching a video with a purpose Taking notes 	20 min

video about physical therapy for stroke recovery or pediatric physical therapy. First, Ss read the questions in Handout #2. Second, Ss watch the video once. Third, Ss watch the video again to take as many notes as possible for the guiding questions in the handout. Next, Ss exchange and discuss their notes with their classmate. Back in the main session, the T clarifies the information in the videos if needed.	What do you think? Did you get the answer for question? b) real task language key vocabulary studied for stroke recovery and pediatric physical therapy statements with the simple present, the simple past and the present perfect tenses	•	Comparing notes Showing agreement or disagreement	
Materials Student A: Handout #2 https://www.liveworksheets.c om/vp3224631ti				
Student B: Handout #2 <u>https://www.liveworksheets.c</u> <u>om/mq3224634qm</u>				

 5 Main Task Ss are paired up with a classmate who has a different topic (e.g., a Student A with a Student B). In the new pairs, Ss go to BORs to describe a type of physical therapy to their classmate by making use of the notes they took to report the most relevant information extracted from their assigned video. Back in the main session, the T chooses 1 student A and 1 student B to briefly report what they learned from their partner's explanation. Materials Student A: Handout #2 https://www.liveworksheets.c om/vp3224631ti Student B: Handout #2 https://www.liveworksheets.c om/mg3224634qm 	 a) procedural The video we watched was about This treatment is used when It is used to treat/help patients when b) real task language key vocabulary studied for stroke recovery and pediatric physical therapy statements with the simple present, the simple past and the present perfect tenses 	SL	•	Reporting key information Describing a physical therapy and possible treatments Exchanging ideas Turn-taking	30 min
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6	Post-task - Asynchronous	real task language	L	•	Watching a	60 min
7	The T explains that for this	discourse markers	R		video with a	
	task Ss are going to change	modals and modal-like phrases			purpose	
	topics (e.g. Student A is	to express possibility, necessity,		•	Recognizing	
	going to work with the	and ability			discourse	
	video he/she hasn't				markers	
	watched, and vice versa). In			•	Classifying	
	Handout #3, Ss watch a video				modals and	
	about physical therapy for				modal-like	
	stroke recovery or pediatric				phrases	
	physical therapy to extract 1					
	example of the requested					
	discourse markers in point 1 .					
	Next, in point 2 , Ss classify					
	sentences with modals and					
	modal-like phrases according					
	to their corresponding use.					
	Materials					
	Handout #3					
	https://www.youtube.com/wat					
	ch?v=s31CglbheoY					
	https://www.youtube.com/wat					
	ch?v=Ock2HTMkP9w&t=19s					
	<u>&ab_channel=ChoosePT</u>					

Lesson Plan - Lesson 12 - Unit #3

Topic: Watching videos to extract key information

Lead teacher: Gustavo Alfaro / Assistant teacher: Christian Vega

Date: Tuesday, November 1st, 2022



Goal: By the end of this unit, students from the Physical Therapy program at UCR will be able to effectively demonstrate

comprehension of field-related educational videos by identifying main and supporting ideas, answering comprehension

questions, exchanging key information, taking notes, and reporting findings.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy) course.

General Objective: By the end of the lesson, students will be able to successfully demonstrate understanding of a physical therapy treatment in an educational video by extracting the main and supporting ideas in the form of a video-comprehension quiz.

Specific objectives:

By the end of this lesson, the students will be able to...

- 1. determine whether they can correctly recognize the use of discourse markers and modals in videos about physical therapy for stroke recovery and pediatric by checking their homework.
- 2. recall key vocabulary, ideas, and facts about hydrotherapy by brainstorming and writing them in the chat with proper spelling and grammar.
- 3. recognize key vocabulary related to hydrotherapy by looking at pictures and guessing from hints and provided letters with 90% accuracy.
- 4. successfully demonstrate understanding of hydrotherapy by extracting the main and supporting ideas in the form of a video-comprehension quiz.
- 5. show understanding of the use of the present continuous tense and the future with *be going to* to explain the steps of a therapy procedure by organizing key expressions chronologically from an educational video about physical therapy for shoulder pain with 90% accuracy.

Note: The role of the assistant teacher is to collect Ss' errors, assist with vocabulary in the chat, provide the materials (handouts and links), and help students while they are working in BORs.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, Ss share their answers for the exercises in the post- task of the previous lesson by means of a group discussion with the entire class. The T leads the discussion and clarifies all questions the Ss might have.	a) procedural An example of a discourse marker for <u>giving examples</u> is I hear the expression "" for indicating time. I agree with César / I think Angélica is right I'm not sure / I believe the actual discourse marker for listing is ""	R S L	 Discussing answers for the homework Recognizing discourse markers Classifying modals and modal-like phrases Showing agreement or disagreement 	15 min
	Materials Handout #3 - Student A (Post-task, Lesson 11) Handout #3 - Student B (Post-task, Lesson 11)	b) real task language discourse markers modals and modal-like phrases to express possibility, necessity, and ability			
2	Pre-task 1 Ss are told that the topic for the quiz is about hydrotherapy. The T then instructs the Ss to write in the chat words, phrases, or facts they can recall about	 a) procedural How do you write/spell "…"? How do you say "…"? b) real task language vocabulary related to hydrotherapy, such as: 	R S L	 Activating background knowledge Working collaboratively Exchanging ideas 	15 min

	hydrotherapy. Next, the T allows some time for the Ss to think and participate in the brainstorming task. Then, the T reads and asks Ss about their opinions for the ideas their classmates wrote in the chat.	swimming, warm water, floats, noodles, etc statements in the simple present tense				
	Zoom chat					
3	Pre-task 2 The T shows the ppt with pictures, hints, and missing letters for Ss to guess the words they will see in the quiz. Ss are encouraged to participate and say the word that matches the information displayed. If needed, the T explains the meaning of the words. Materials PPT Unit 3 - Lesson 12 - Pre- Task #2	 a) procedural I think the word is Maybe it is I'm not sure. What is the meaning of? How do you say ""? b) real task language hydrotherapy haɪdrou θεrəpi/ floats /flouts/ noodles / nudəlz/ suitable / sutəbəl/ polytrauma / pali 'tromə/ screening / skrinıŋ/ tracking hoist / trækıŋ hoist/ platform lift / plæt form lift/ buoyancy / boitansi/ 	R S L	•	Negotiating meaning Guessing Matching pictures with words Working collaboratively	20 min

		edema / ɪˈdimə / swelling /ˈ swɛlɪŋ /				
4	Main Task Ss are sent the quiz via chat. Next, the T has the Ss read the instructions and the items (parts 1, 2, and 3) and clarify any questions about the task. Then, the T plays the video twice and a third time if necessary. Finally, the Ss send the T their quizzes with their answers via email. Materials Unit 3 Listening Quiz #1 - Lesson 12 https://www.youtube.com/wat ch?v=nbelX9A61gg&ab_chan nel=PhysioFunction	 a) procedural I have a question, "?" I don't understand this part "" What is the meaning of ""? Can you explain again? b) real task language hydrotherapy / haɪdrou 'θεrəpi/ floats /flouts/ noodles / 'nudəlz/ suitable / 'sutəbəl/ polytrauma / 'pali 'trɔmə/ screening / 'skrinɪŋ/ tracking hoist / 'trækɪŋ hɔɪst/ platform lift / 'plæt form lɪft/ buoyancy / 'bɔɪənsi/ edema /ɪ 'dimə/ swelling / 'swɛlɪŋ/ 	R L W	•	Watching a video with a purpose Show understanding of a type of physical therapy Taking a listening quiz	30 min
5	Post-task - Asynchronous In Handout #1, Ss watch a video about physical therapy for shoulder pain to:	real task language vocabulary related to physical therapy for shoulder pain	R L W	•	Watching a video with a purpose Identifying key vocabulary	60 min

about the procedure of	statements in the present continuous and future with be going to tenses	Organizing steps chronologically
Final Oral Presentations (on November 15th): Ss read the document Instructions for the Final Oral Presentation. The T addresses any questions regarding the instructions. Next, Ss choose a topic and an appointment to give their final oral presentations.		
Materials Handout #1 <u>https://www.youtube.com/wat</u> <u>ch?v=Hr-</u> <u>9biVEEYo&t=1s&ab_channel</u> <u>=PhysicalTherapyatSt.Luke%</u> <u>27s</u>		

Instructions for the Final Oral Presentation		
Topics for the Final Oral Presentation: <u>https://docs.google.com/docu</u> <u>ment/d/1ZCU_aLSi1T1rLHOb</u> <u>ji6h3_qclSCC_DOEDMPSJ1f</u> <u>1638/edit</u>		

Lesson Plan - Lesson 13 - Unit #3

Topic: Watching videos to extract key information

Lead teacher: Christian Vega / Assistant teacher: Gustavo Alfaro

Date: Tuesday, November 8th, 2022



Goal: By the end of this unit, students and instructors from the Physical Therapy program at UCR will be able to effectively

demonstrate comprehension of field-related educational videos by identifying main and supporting ideas, answering

comprehension questions, exchanging key information, taking notes, and reporting findings.

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy) course.

General Objective: By the end of the lesson, students will be able to successfully demonstrate understanding of a physical therapy treatment in an educational video by extracting the main and supporting ideas and answering critical-thinking questions in the form of a video-comprehension quiz.

Specific objectives:

By the end of this lesson, the students will be able to...

- 1. determine whether they can correctly recognize the chronological order of key expressions in an educational video about physical therapy for shoulder pain by checking their homework with the entire class,
- 2. effectively describe information and experiences about physical therapy for seniors by taking part in a conversation in pairs,
- 3. recognize key vocabulary related to physical therapy for seniors' upper body by acting out given words and phrases with 100% accuracy and reading examples from an educational video,
- 4. successfully demonstrate understanding of physical therapy for seniors' upper body by extracting the main and supporting ideas and answering critical-thinking questions in the form of a video-comprehension quiz, and
- 5. show understanding of how to give a presentation using a PPT by watching a theory-related video and extracting suggestions and recommendations to be used in their final oral presentations.

Note: The role of the assistant teacher is to collect Ss' errors, assist with vocabulary in the chat, provide the materials (handouts and links), and help students while they are working in BORs.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, Ss share their answers for the exercises in the post-task of the previous lesson by exchanging their ideas with the entire class. The T leads the discussion and clarifies all questions the Ss might have. Materials Handout #1 (Lesson 12)	 a) procedural For question a/b/c, I wrote I think the best/correct answer is I agree with because I'm not sure that is the correct answer because b) real task language vocabulary related to physical therapy for shoulder pain statements in the present continuous and future with be going to tenses 	S R L	 Checking homework Providing multiple, possible answers Organizing key expressions chronologically Showing agreement or disagreement 	15 min
2	Pre-task 1 Ss are given Handout #1 for them to go to BORs and in pairs exchange information and experiences about physical therapy for senior patients. Then, back in the main session, the T asks random Ss about their	a) procedural Seniors are people older than Their bone and mass density is more fragile than Working with senior patients was challenging because Some senior patients can't lift a lot of weight, some can't	S L R	 Activating background knowledge Discussing facts about senior patients Exchanging ideas and experiences 	15 min

	experiences treating senior patients. Materials Handout #1	 Physical therapists carefully design sessions b) real task language adjectives to describe physical appearances statements in the simple present, simple past, and present perfect tenses modal can to express ability 				
3	Pre-task 2 The T shares his screen with the presentation. Ss are instructed to perform the actions they see on the slides. If they don't know the meaning of the word, then the T performs the	a) procedural What is that? / What are you doing? What is the meaning of? Can you repeat the pronunciation of?	R S L	•	Negotiating meaning Acting out Practicing the pronunciation of keywords	20 min
	action for the Ss to mimic him. Next, random Ss read the sentences on the slides to practice the correct pronunciation of the words.	b) real task language arm circles /arm 's3rkəlz/ posture / pastfər/ breathe /brið/ bicep curls / baɪsɛp k3rlz/ extend /ɪk 'stɛnd/				
	Materials PPT Unit 3 - Lesson 13 - Pre-task 2	bend / bɛnd / count out loud / kaʊnt aʊt laʊd /				

		straighten (something) all the way out / streitən ˈsʌmθiŋ ɔl ðə wei aut/ squeeze /skwiz/ push out /puʃ aut/ pull back /pul bæk/ dips /dips/			
4	Main Task Ss are sent the quiz via chat. Next, the T has the Ss read the instructions and the items (parts 1, 2, and 3) and clarify any questions about the task. Then, the T plays the video twice and a third time if necessary. Finally, the Ss send the T their quizzes with their answers via email. Materials Unit 3 Listening Quiz #2 - Lesson 12 <u>https://www.youtube.com/</u> watch?v=eo4g6eRTd-	 a) procedural I have a question, "?" I don't understand this part "" What is the meaning of ""? Can you explain again? b) real task language arm circles /arm 's3rkəlz/ posture / 'pastfər/ breathe /brið/ bicep curls / 'baɪsɛp k3rlz/ extend /ɪk 'stɛnd/ bend /bɛnd/ count out loud /kaʊnt aʊt laʊd/ straighten (something) all the way out / 'streɪtən 'sʌmθɪŋ ɔl ðə weɪ aʊt/ squeeze /skwiz/ push out /pʊʃ aʊt/ 	R L W	 Watching a video with a purpose Show understanding of a type of physical therapy Taking a listening quiz 	

	w&ab_channel=24HourHo meCare	pull back / pul bæk / dips / dɪps / statements in the simple present tense			
		modals to express possibility and suggestions			
5	Post-task - Asynchronous Ss watch a video to extract the most useful tips they may use in their final oral presentations the following week. • Note: Ss are given a time-saving task, so they can take advantage of the extra time and prepare their final oral presentations. Materials Handout #2	real task language suggestions and recommendations to give a presentation using a PPT	L R W	 Watching a video with a purpose Extracting useful information Preparing for the final oral presentations 	60 min

https://www.youtube.com/		
watch?v=grJ0FbpfvOw&ab channel=HubSpotMarketi		
ng		

Lesson Plan - Lesson 14 - Final Oral Presentations

Topic: Giving an oral presentation related to the field of physical therapy

Lead teacher: Gustavo Alfaro / Assistant teacher: Christian Vega

Date: Tuesday, November 15th, 2022

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy)

course.

General Objective: By the end of the lesson, students will be able to successfully demonstrate understanding of a

physical therapy treatment by giving an oral presentation, using visual aids, and addressing questions and comments

about their topic from the student-teachers and their classmates.

Specific objectives:

By the end of this lesson, the students will be able to...

- 1. accurately recall key vocabulary learned in the course or related to physical therapy by playing a chain game with the entire class,
- 2. effectively describe information and ideas about the presentations they are going to give later in the lesson by

taking part in a conversation in pairs,



3. successfully demonstrate understanding of a physical therapy treatment by giving an oral presentation, using visual

aids, and addressing questions and comments about their topic from the audience, and

4. successfully evaluate their own performance in the final oral presentations by completing a self-assessment form

and submitting their final reflection.

Note: The role of the assistant teacher is to collect Ss' errors, assist with vocabulary in the chat, provide the materials

(handouts and links), and help students while they are working in BORs.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation After receiving delayed feedback from the previous class, the T explains the instructions of the game "vocabulary chain": Ss say a word learned in the course or related to physical therapy (e.g., iontophoresis). Then, the next student says another word (with the same requisites) that starts with the last letter of the word given by his/her classmate (e.g. spinal cord). Next, the following student says a word that starts	 a) procedural Can you repeat the explanation? Can you give us an example? How do you say ""? b) real task language vocabulary learned in the course or related to physical therapy 	S L	 Activating background knowledge Playing a game Recalling key vocabulary Lowering stress and anxiety levels 	15 min

	with " <i>d</i> ," and so on. Ss are given roughly 10 seconds to say a word. If they can't come up with a word, they are eliminated from the game. The winner of the game is the last standing student.				
2	Pre-task 1 Ss go to BORs to discuss the questions in Handout #1. Then, back in the main session, the T asks random Ss what presentation strategies they are going to implement in their final oral presentations. Materials Handout #1	 a) procedural Today, I'm going to talk about Watsu. I chose to talk about Watsu because First, I'm going to start with Next, I'm going to continue my presentation with / by I'm going to tell you a personal story I have shared stories before. / I saw it on last week's video. b) real task language statements and questions in the simple future with be going to, the simple past, and the present perfect tenses 	S L	 Activating background knowledge Exchanging ideas and information Discussing about presentation strategies 	15 min

3	Main Task Ss share their screens and give their presentations based on the already established appointments for this lesson. Ss have between 3-5 minutes to present, plus 3-5 more minutes to address questions and comments from the audience. Materials Ss' prepared presentations	 a) procedural Good afternoon/good evening. Today I'm going to give a presentation about Thank you for your attention What questions do you have about my presentation? b) real task language vocabulary learned in the course or related to physical therapy statements and questions in the simple present, the simple past, the present perfect, and the simple future tenses modals to express possibility, ability, and suggestions 	S	•	Giving a presentation Using key vocabulary with correct pronunciation Show understanding of a type of physical therapy Addressing questions and comments from the audience	90 min
4	Post-task - Asynchronous Ss evaluate their own performance in the final oral presentations by completing a self-assessment form. Materials	real task language criteria for self-assessment in the final oral presentations recommendations and suggestions in the past	RW	••	Self-evaluating Reflecting on aspects to improve	30 min

https://forms.gle/Ykncha437CJ WyFGF9		
Handout #2		
• <u>Note</u> : Handout #2 might be used as a backup in case the Google form fails to work correctly.		

Lesson Plan - Lesson 15 - Final Day of Classes

Topic: Closing of the course

Lead teachers: Gustavo Alfaro / Christian Vega

Date: Tuesday, November 22nd, 2022

English for Good Job! Physical Therapy

Target Population: Young to middle-aged adults in an ESP low-intermediate level (English for Physical Therapy)

course.

General Objective: By the end of the lesson, students appropriately evaluate the course *English for Physical Therapy* by completing a questionnaire, discussing perceptions and experiences about the course, and providing final oral comments and observations to the student-teachers.

Specific objectives:

By the end of this lesson, the students will be able to...

- 1. accurately recall key information learned in the course by playing a jeopardy online game with the entire class,
- 2. accurately correct mistakes from their final oral presentations by completing a table with the help of the studentteachers and their classmates in a discussion with the entire class.

3. appropriately assess the contents, methodology, evaluation, and class dynamics of the course by completing an

online questionnaire, and

4. successfully demonstrate understanding of the logistics for the course graduation by asking questions and giving

comments to the student-teachers' explanation.

Objective	Procedures	Language (Vocabulary, expressions, useful language, grammatical or phonetic features)	Skills	Strategies	Time
1	Schema activation Ss are divided into 2 teams. The T then shares his screen and explains the jeopardy game. Next, Ss choose the questions they want to answer from the game board. If they answer the questions correctly, they earn money (the amount of money depends on the difficulty of the questions). The winning team is the one who collects more money. Materials https://www.playfactile.com/lalr 6kt12l/play	 a) procedural We want to be pineapples Category "" for "\$" What do you think/say guys? Which category? / How much? b) real task language key vocabulary learned in the course statements and questions in the simple present and with modals 	SL	 Activating background knowledge Recalling key information learned in the course Playing a game Showing agreement or disagreement 	30 min

2	Pre-task 1 Ss are given Handout #1 where they can find a collection of mistakes from their final oral presentations. As a class task, Ss take turns correcting the grammar and vocabulary mistakes, or pronouncing correctly the marked words. Ss have to pay attention to the corrections and take notes of them in their handout, so in the end, all the class has the same corrections. Materials Handout #1	 a) procedural I think the correction is "…" I don't see any mistakes there How do you say "…"? b) real task language feedback from the Ss' final oral presentations 	SL	•	Activating background knowledge Self-correcting Working collaboratively	20 min
3	Main Task Ss are sent a Google Forms link in the chat for them to assess the course in aspects such as contents, methodology, evaluation, and class dynamics. The Ts address any questions the Ss may have or clarify the information in any of the items.	 a) procedural <i>I</i> don't understand this question Can I write "…"? b) real task language qualitative data for the final research report 	S L	•	Completing a questionnaire Using their mother tongue Assessing the course	30 min
	Materials					

	 <u>https://forms.gle/EEJKGC4QQb</u> <u>Note</u>: Handout #2 might be used as a backup in case the Google form fails to work correctly. 				
4	 Post-task - Synchronous The Ts explain how the course graduation takes place. Ss are encouraged to ask any questions about the logistics and to volunteer as presenters the following week at the graduation ceremony. <u>Note</u>: 10 minutes will be allotted to the student who couldn't give his final oral presentation on the assigned date, so he can also present to the class. Materials The student's prepared presentation	 a) procedural Do we have to ? What if we ? b) real task language logistics and other information for the graduation ceremony 	R W	 Asking questions Showing understanding Showing agreement or disagreement 	20 min



Instructions: Complete the following definitions by choosing the correct option.

- 1. An abstract is _____
- A. a summary of the main points of an academic article
- B. an explanation of the background of an academic article
- C. an interpretation of the collected data of an academic article

2. An abstract can be found at _____

- A. the end of an academic article
- B. the cover of an academic article
- C. the beginning of an academic article, prior to the introduction

3. An abstract contains information _____

A. only about the results and discussion of an academic article

B. about the background, purpose, methods, results, and conclusions of an academic article

C. only about the description of the participants and the researchers of an academic article

4. The section with important search terms, that can be found in abstracts and articles, is called: _____.

- A. word bank
- B. key phrases
- C. keywords

5. The information provided in the abstract is important for the researchers because_____.

A. it will help them decide if they purchase the article or not

B. it will help them decide if they read the whole research paper or not

C. it should lack essential elements to prevent understanding of the research conducted

- 1. An abstract is _____
- A. a summary of the main points of an academic article
- B. an explanation of the background of an academic article
- C. an interpretation of the collected data of an academic article
 - 2. An abstract can be found at _____
- A. the end of an academic article
- B. the cover of an academic article
- C. the beginning of an academic article, prior to the introduction
 - 3. An abstract contains information _____
- A. only about the results and discussion of an academic article
- B. about the background, purpose, methods, results, and conclusions of an academic article

C. only about the description of the participants and the researchers of an academic article

4. The section with important search terms, that can be found in abstracts and articles, is called: ______.

- A. word bank
- B. key phrases
- C. keywords

5. The information provided in the abstract is important for the researchers

because_____.

A. it will help them decide if they purchase the article or not

B. it will help them decide if they read the whole research paper or not

C. it should lack essential elements to prevent understanding of the research conducted

Good

English for

Physical Thera



Instructions: Look at the pictures and the box with useful language and answer the questions.

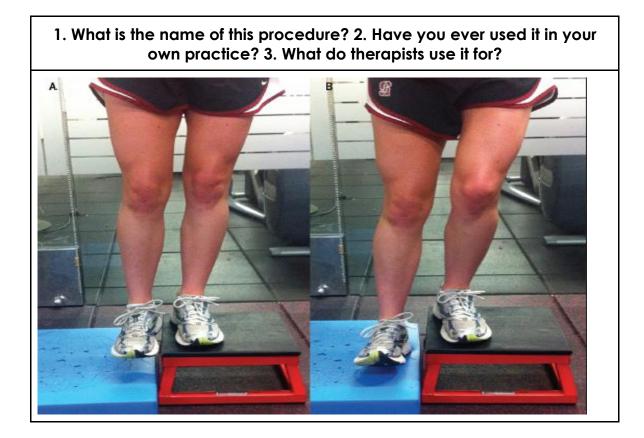


Useful Expressions

- I think / I believe / In my opinion ...
- She is (a-an)/ They are (athletes, soccer player, basketball player, gymnast, dancer)
- The (first, second, third) woman is / They all are ... (strong, healthy, fast, athletic)



Instructions: Look at the pictures and the box with useful language and answer the questions.



Useful Expressions

- This procedure / technique is called ...
- I have (never) used this procedure / technique to...
- Therapists normally use the lateral step-down test to...
- knee, leg, feet, lower-upper, extremity, movement, strength, flexibility, flex, bend...



Instructions: Complete the following tasks with the abstract.

- 1. What are the 5 parts of the abstract?
 - •
 - •

2. Find and highlight in green the expressions "It is possible that" and "it remains unknown whether."

3. Find and highlight in yellow the expression "To investigate whether."

4. Find and highlight in cyan the expressions "34 healthy females were assessed," "Participants were divided," and "Data analyses were performed."

5. Find and highlight in blue the expressions "Feedback immediately improved," "The PG showed," and "Quality of movement had positive correlations with."

6. Find and highlight in magenta the expressions "Verbal feedback improved," "Females with worst movement quality showed," and "which are often found in individuals with"



Instructions: Complete the following tasks with the abstract.

- 1. What are the 5 parts of the abstract?
 - Introduction
 - Purpose
 - <u>Methods</u>
 - <u>Results</u>
 - <u>Conclusions</u>

Abstract

Introduction: Altered movement patterns during weight-bearing activities have been associated with knee injuries and can be clinically assessed using the lateral step-down test (LSD). It is possible that verbal feedback can improve movement patterns, but it remains unknown whether verbal feedback can improve movement quality during the LSD. Purpose: To investigate whether verbal feedback can immediately improve visual movement quality and trunk, pelvis and lower limb kinematics in healthy females during the LSD. Methods: 34 healthy females were assessed visually and with 3D kinematics while performing the LSD. Participants were divided into Good Movement Group and Poor Movement Group based on the LSD score. The feedback involved verbal instructions aimed at improving trunk, pelvis, hip and knee alignment during the test. Lower limb flexibility and strength were assessed for group comparisons and to investigate associations between all variables. Data analyses were performed using repeated-measures two-way ANOVAs and Spearman correlation tests.

<u>Results</u>: Feedback immediately improved movement quality, especially in participants of the GG. The PG showed greater pelvic drop, greater hip adduction and less hip flexion than the GG. Quality of movement had positive correlations with pelvic drop, hip adduction, and hip flexion kinematics. <u>Conclusions</u>: Verbal feedback improved movement quality during the LSD in healthy females. Females with worst movement quality showed greater pelvic drop and hip adduction, which are often found in individuals with knee disorders.



Instructions: Fill in the blanks by choosing the correct option to complete each of the following expressions.

- 1. The purpose of the article is
- A. improve visual movement quality during the lateral step-down test
- B. researching trunk, pelvis, and lower limb kinematics in healthy females

C.	to investigate whether verbal feedback can immediately improve
visual	movement quality

2. Participants were divided into _____ and _____ based on the lateral step-down test score.

- A. good movement group / poor movement group
- B. examiners / examinees
- C. healthy females / unhealthy females
 - **3.** The feedback involved verbal instructions aimed at _____ during the test.
- A. improving trunk, pelvis, hip and knee alignment
- B. to enhance visual movement quality
- C. investigate associations between all variables

For the <u>results section</u>, quality of movement ______ positive

correlations with pelvic drop, hip adduction, and hip flexion kinematics.

- A. have
- B. had
- C. will have



Instructions: Fill in the blanks by choosing the correct option to complete each of the following expressions.

- 1. The purpose of the article is
- A. improve visual movement quality during the lateral step-down test

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For the <u>results section</u>, quality of movement ______ positive

correlations with pelvic drop, hip adduction, and hip flexion kinematics.

- A. have
- B. <mark>had</mark>
- C. will have



Instructions: Complete the outline with the missing information from the **abstract**.

Introduction:

- It is possible that _____ can improve movement patterns.
- It is unknown if verbal feedback can improve ______ during the LSD.

Purpose:

• The purpose of this article is ______ visual movement quality and trunk, pelvis and lower limb kinematics in healthy females during the LSD.

Methods:

- _____ healthy females were assessed visually and with 3D kinematics while performing the LSD.
- Participants were divided into _____ and _____
- The feedback involved verbal instructions aimed at improving ______ during the LSD.

Results:

- Feedback immediately improved _____ in ____ participants.
- The PG showed greater ______ than the GG.
- Quality of movement had positive correlations with
 ______ kinematics.

Conclusions:

- Verbal feedback improved movement quality during the LSD in
- Females with worst movement quality showed greater pelvic drop and hip adduction, which are often found in _____.



Instructions: Complete the outline with the missing information from the **abstract**.

Introduction:

- It is possible that verbal feedback can improve movement patterns.
- It is unknown if verbal feedback can improve **movement quality** during the LSD.

Purpose:

• The purpose of this article is **to investigate whether verbal feedback can immediately improve** visual movement quality and trunk, pelvis and lower limb kinematics in healthy females during the LSD.

Methods:

- <u>34</u> healthy females were assessed visually and with 3D kinematics while performing the LSD.
- Participants were divided into <u>Good Movement Group</u> and <u>Poor</u> <u>Movement Group</u>.
- The feedback involved verbal instructions aimed at improving <u>trunk</u>, <u>pelvis</u>, <u>hip and knee alignment</u> during the LSD.

Results:

- Feedback immediately improved <u>movement quality</u> in <u>GG</u> participants.
- The PG showed greater **pelvic drop**, greater hip adduction and less hip flexion than the GG.
- Quality of movement had positive correlations with <u>pelvic drop, hip</u> <u>adduction, and hip flexion</u> kinematics.

Conclusions:

- Verbal feedback improved movement quality during the LSD in <u>healthy females</u>.
- Females with worst movement quality showed greater pelvic drop and hip adduction, which are often found in <u>individuals with knee</u> <u>disorders.</u>



Journal of Bodywork & Movement Therapies

journal homepage: www.elsevier.com/jbmt



Simple verbal instructions are able to improve quality of movement during the lateral step-down test in healthy females

Abstract

Introduction: Altered movement patterns during weight-bearing activities have been associated with knee injuries and can be clinically assessed using the lateral step-down test (LSD). It is possible that verbal feedback can improve movement patterns, but it remains unknown whether verbal feedback can improve movement quality during the LSD. Purpose: To investigate whether verbal feedback can immediately improve visual movement quality and trunk, pelvis and lower limb kinematics in healthy females during the LSD. Methods: 34 healthy females were assessed visually and with 3D kinematics while performing the LSD. Participants were divided into Good Movement Group and Poor Movement Group based on the LSD score. The feedback involved verbal instructions aimed at improving trunk, pelvis, hip and knee alignment during the test. Lower limb flexibility and strength were assessed for group comparisons and to investigate associations between all variables. Data analyses were performed using repeated-measures two-way ANOVAs and Spearman correlation tests.

<u>Results</u>: Feedback immediately improved movement quality, especially in participants of the GG. The PG showed greater pelvic drop, greater hip adduction and less hip flexion than the GG. Quality of movement had positive correlations with pelvic drop, hip adduction, and hip flexion kinematics. <u>Conclusions</u>: Verbal feedback improved movement quality during the LSD in healthy females. Females with worst movement quality showed greater pelvic drop and hip adduction, which are often found in individuals with knee disorders.

Adapted from R. Lemos, D. Maia, R. de Oliveira & R. Scattone. Simple verbal instructions are able to improve quality of movement during the lateral step-down test in healthy females, *Journal of Bodywork and Movement Therapies*, Volume 27, 2021, Pages 207-215, ISSN 1360-8592, <u>https://doi.org/10.1016/j.jbmt.2021.02.006</u>.

Glossary

- 1. ANOVA: analysis of variance.
- 2. hip adduction: a movement to bring your legs inward.
- 3. **hip stiffness**: feeling that your hip joint doesn't move as easily as it once did, and it's generally painful.
- 4. **kinematics**: a branch of physics that describes the motion of points, objects, and systems.
- 5. LSD: lateral step-down test.
- 6. **pelvic drop**: improper pelvis leveling.



Instructions. A) Complete the missing names of the sections (1-9) with the following phrases:

Results	Conclusions	Introduction	Setting	Design	Objectives	
	Interventions	Patients	Main outcome measures			



Parkinsonism & Related Disorders Volume 18, Issue 3, March 2012, Pages 247-251



Functional movement disorders: Successful treatment with a physical therapy rehabilitation protocol

Abstract.

1.

Functional ("psychogenic") gait and other movement disorders have proven very difficult to treat.

2. _

Describe the Mayo Clinic functional movement disorder motorreprogramming protocol conducted in the Department of Physical Medicine and Rehabilitation (PMR), and assess short-term and long-term outcomes.

3. _

Historical-cohort-study assessing non-randomized PMR intervention.

4. ___

Tertiary care center.

5. _

Interventional group: 60 consecutive patients with a chronic functional movement disorder that underwent the PMR protocol between January 2005 and December 2008.

6. ____

An outpatient, one-week intensive rehabilitation program based on the concept of motor-reprogramming following a comprehensive diagnostic neurological evaluation, including psychiatric/psychological assessment.

7. _____

Improvement of the movement disorder by the end of the week-long program (patient- and physician-rated), plus the long-term outcome (patient-rated).

Patient demographics: female predominance (76.7%); mean age 45 years (range, 17–79). Physician-rated outcomes after the one-week treatment program documented 73.5% were markedly improved, nearly normal or in remission, similar to the patient-ratings (68.8%). Long-term treatment outcomes revealed 60.4% were markedly improved or almost completely normal/in remission, compared to 21.9% of controls.

9. ____

Short-term and long-term successful outcomes were documented in the treatment of patients with functional movement disorders by a rehabilitative, goal-oriented program with intense physical and occupational therapy. The rapid benefit, which was sustained in most patients, suggests substantial efficacy that should be further assessed in a prospective, controlled, clinical trial.

Adapted from Czarnecki, K., Thompson, J., Seime, R., Geda, Y., Duffy, R., & Ahlskog, E. (2012). Functional movement disorders: successful treatment with a physical therapy rehabilitation protocol, *Parkinsonism & Related Disorders*, Volume 18, Issue 3, Pages 247-251, ISSN 1353-8020, <u>https://doi.org/10.1016/j.parkreldis.2011.10.011</u>.

Abstract.

1. Introduction

English for Good job! Physical Therapy

Functional ("psychogenic") gait and other movement disorders have proven very difficult to treat.

2. Objectives

Describe the Mayo Clinic functional movement disorder motorreprogramming protocol conducted in the Department of Physical Medicine and Rehabilitation (PMR), and assess short-term and long-term outcomes.

<u>3. Design</u>

Historical-cohort-study assessing non-randomized PMR intervention.

<u>4. Setting</u>

Tertiary care center.

5. Patients

Interventional group: 60 consecutive patients with a chronic functional movement disorder that underwent the PMR protocol between January 2005 and December 2008.

6. Interventions

An outpatient, one-week intensive rehabilitation program based on the concept of motor-reprogramming following a comprehensive diagnostic neurological evaluation, including psychiatric/psychological assessment.

7. Main outcome measures

Improvement of the movement disorder by the end of the week-long program (patient- and physician-rated), plus the long-term outcome (patient-rated).

8. Results

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Short-term and long-term successful outcomes were documented in the treatment of patients with functional movement disorders by a rehabilitative, goal-oriented program with intense physical and occupational therapy. The rapid benefit, which was sustained in most patients, suggests substantial efficacy that should be further assessed in a prospective, controlled, clinical trial.



Instructions: 1) Complete the empty spaces in the abstract with the following phrases. There are <u>NO</u> extra options.

we measured	can help improve	to investigate
a total of 338 surveys	the majority (88%) of respondents	although the majority of respondents
identifying and addressing barriers	an online survey	and thus promote

Physiotherapy Canada



Examining the Use of Constraint-Induced Movement Therapy in Canadian Neurological Occupational and Physical Therapy

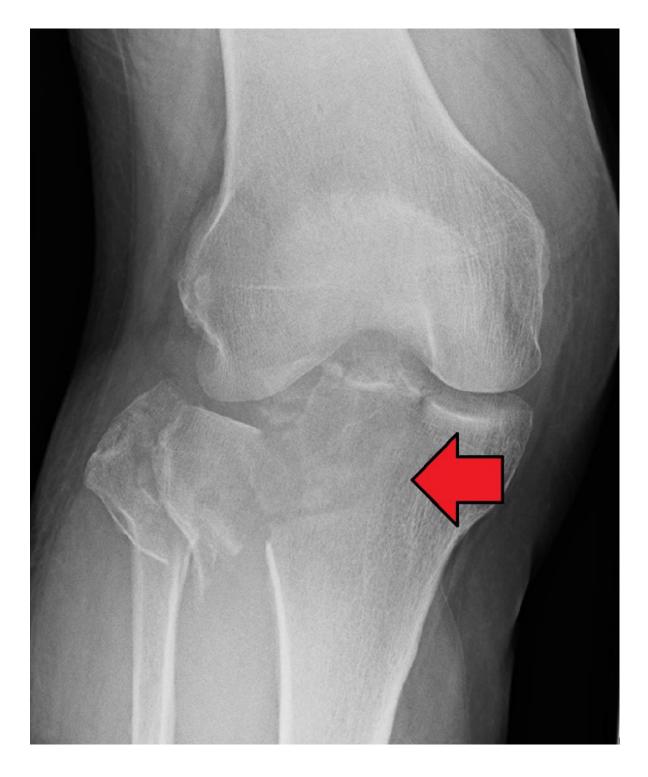
_____ the use of constraint-induced Abstract. Purpose: ____ movement therapy (CIMT) in Canadian neurological occupational and physical therapy. Method: was completed by occupational and physical therapists practicing in Canadian adult _____ participants' practices, neurological rehabilitation. perceptions, and opinions in relation to their use of CIMT in clinical practice. _____ were returned for a 13% response rate; 92% Results: ____ of respondents knew of CIMT, and 43% reported using it. The majority (88%) of respondents using CIMT employed a non-traditional protocol. Self-rating of level of CIMT knowledge was found to be a significant predictor of CIMT use. Commonly identified barriers to use included "patients having cognitive challenges that prohibit use of this treatment" and "lack of knowledge

regarding treatment." <u>Conclusions</u>: ______ knew about CIMT, less than half reported using it. Barriers to CIMT use include lack of knowledge about the treatment and institutional resources to support its use. ______ to CIMT use—for example, by using continuing professional education to remediate knowledge gaps or developing new protocols that require fewer institutional resources—______ the feasibility of CIMT, ______ its clinical application.

Adapted from Fleet, A., Che, M., MacKay-Lyons, M., MacKenzie, D., Page, S., Eskes, G., McDonald, A., Boyce, J., & Boe, S. (2014). Examining the use of constraint-Induced movement therapy in Canadian neurological occupational and physical therapy, *Physiotherapy Canada*, Volume 66, Issue 1, Pages 60-71, <u>https://doi.org/10.3138/ptc.2012-61</u>



Abstract. Purpose: To investigate the use of constraint-induced movement therapy (CIMT) in Canadian neurological occupational and physical therapy. Method: An online survey was completed by occupational and physical therapists practicing in Canadian adult neurological rehabilitation. We measured participants' practices, perceptions, and opinions in relation to their use of CIMT in clinical practice. Results: A total of 338 surveys were returned for a 13% response rate; 92% of respondents knew of CIMT, and 43% reported using it. The majority (88%) of respondents using CIMT employed a non-traditional protocol. Self-rating of level of CIMT knowledge was found to be a significant predictor of CIMT use. Commonly identified barriers to use included "patients having cognitive challenges that prohibit use of this treatment" and "lack of knowledge regarding treatment." Conclusions: Although the majority of respondents knew about CIMT, less than half reported using it. Barriers to CIMT use include lack of knowledge about the treatment and institutional resources to support its use. Identifying and addressing barriers to CIMT use—for example, by using continuing professional education to remediate knowledge gaps or developing new protocols that require fewer institutional resources—can help improve the feasibility of CIMT, and thus promote its clinical application.





Instructions: A) Practice the pronunciation of the sounds of the English alphabet. Repeat each sound after the teacher.

The English Alphabet (Acronyms)							
Aa	Bb	Cc	Dd	Ee	Ff	Gg	
[eɪ]	[bi:] [si:]	[di:]	[i:]	[ɛf]	[dʒi:]	
Hh	li	Jj	Kk	Ll	Mm	Nn	
[eɪt	∫] [a1]	[dʒeɪ]	[k ^h eɪ]	[ε1]	[ɛm]	[ɛn]	
00	Рр	Qq	Rr	Ss	Tt	Uu	
[0ʊ]	[p ^h i:]	[k ^j u:]	[u]	[ɛs]	[ti:]	[ju:]	
	Vv	Ww	Xx	Yу	Zz		
	[vi:] ['	d∧bəl ju	:] [ɛks] [wai] [zi:]		

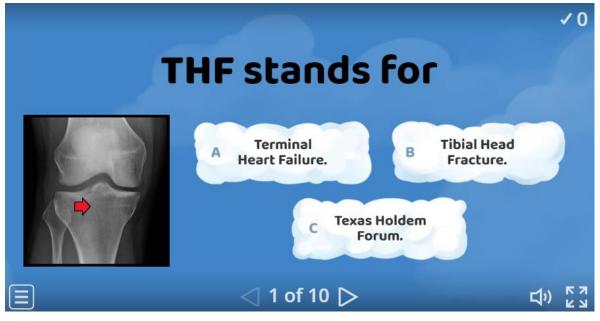
Note: In English, short acronyms are pronounced letter by letter (3 letters or less). For example: *ROM* reads as "R-O-M." Longer acronyms (more than 4 letters and pronounceable) can be pronounced as words. For example: *ORIF* reads as "O-RIF."



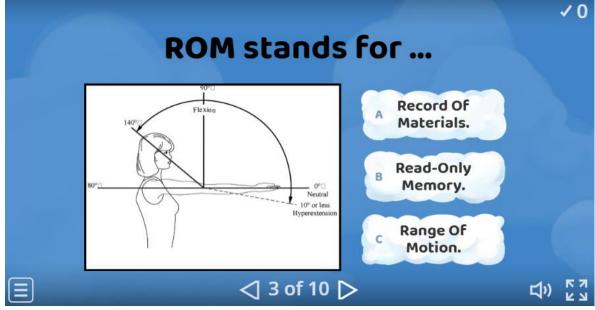
Instructions: B) Practice the pronunciation of these acronyms:

THF	СРМ
ROM	TKA
ORIF	KSS
OKS	UCLA
ASA	ΟΤΑ



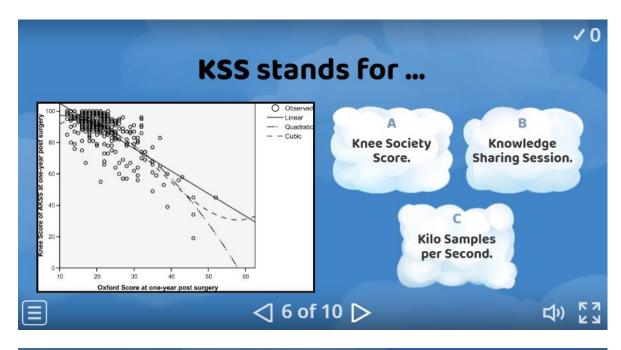


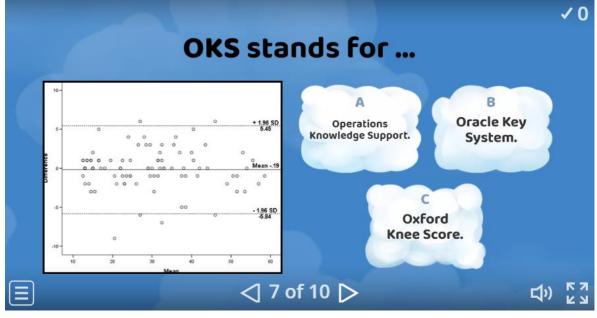




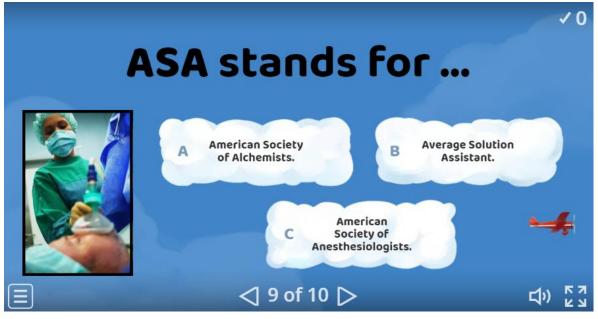
















Skimming and Scanning Get the Work Done Fast!!!

Skimming and scanning involve reading quickly and skipping over a great deal of the text in order to find certain information. Familiarize yourself with the main uses of skimming and scanning in order to maximize your reading time.

Skimming Uses:





- Familiarize yourself with a chapter by looking at the headings, pictures, graphs, etc.
- Preview an academic article to find what information is inside by looking at the abstract, keywords, front and back covers, and table of contents.



-



Skimming is used to find the main ideas of the text quickly or to simply familiarize yourself with a text that you have never read before. The purpose of **skimming** is to get an idea of what is contained in a text before reading it word by word.

Rather than reading everything word for word, when **skimming**, you would focus more on specific aspects.

Scanning u

- Use scanning to locate text you have previou
- Find specific words yo for on a worksheet by eyes quickly across th
- Use scanning to find a questions on a worksł

If you need to locate a specific piece of information quickly, you would use **scanning**. When **scanning**, you know exactly what you're looking for, you just have to find it. To scan when reading, look for specific words or information.

Alle-

Lat vour avec run ranidly over coveral lines of text

Quick Tip!

When skimming and scanning, you don't need to and shouldn't read everything word by word. Reading word by word should be used when reading for comprehension.

Adapted from: Quick, T., Zimmer, M., & Hocevar, D. (2007) Making Reading Relevant: The Art of Connecting. Pearso

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 3 - Handout #3



Instructions: Skim the abstract of the article. What results did the CPM group obtain in comparison to the non-CPM group? Highlight your answer. *Research Article*

Prolonged Application of Continuous Passive Movement Improves the Postoperative Recovery of Tibial Head Fractures: A Prospective Randomized Controlled Study

Abstract.

Background. Tibial head fracture (THF) rehabilitation is still a challenge in clinical practice. Short-term use of continuous passive motion (CPM) postoperatively for THFs can increase knee range of motion (ROM) immediately, and its effect on enhanced rehabilitation also ended when the CPM application was discontinued. Purpose. The aim of this study was to investigate the effect on the recovery of prolonged use of CPM in the postoperative treatment of THFs. Methods. 60 patients with THFs were randomly and equally divided into the CPM group and non-CPM group. Both groups immediately received CPM and conventional physical therapies during hospitalization. After discharge, the non-CPM group was treated with conventional physical therapy alone, while the CPM group received conventional physical training in combination with CPM treatment. At 6 weeks and 6 months postoperatively, the primary outcome which was knee ROM and the secondary outcome which was knee functionality and quality of life were evaluated. **<u>Results</u>**. The CPM group had a significantly increased ROM at both follow-up time points. The Knee Society Score, UCLA activity score, and the EuroQoL as well as the pain analysis showed significantly better results of the CPM group than the non-CPM group. <u>Conclusions.</u> The prolonged application of CPM therapy is an effective method to improve the postoperative rehabilitation of THFs.

Adapted from: Kabst, C., Tian, X., Kleber, C., Amlang, M., Findeisen, L., Lee, G., & Zwingenberger, S. (2022). Prolonged application of continuous passive movement improves the postoperative recovery of tibial head fractures: A prospective randomized controlled study. *BioMed Research International*, 2022, 1236781. https://doi-org.ezproxy.sibdi.ucr.ac.cr/10.1155/2022/1236781

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 3 - Handout #3 - Answer Key



Instructions: Skim the abstract of the article. What results did the CPM group obtain in comparison to the non-CPM group? <u>Underline your answer</u>. *Research Article*

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University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 3 - Handout #4



Instructions: Skim the introduction of the article. **A)** What is Continuous passive motion (CPM)? **B)** What alternative is there to the insufficient time of rehabilitation in hospital? Highlight the two answers.

Research Article

Prolonged Application of Continuous Passive Movement Improves the Postoperative Recovery of Tibial Head Fractures: A Prospective Randomized Controlled Study

Introduction

Tibial head fractures (THFs) can be caused by high energy trauma incidents, mostly motor vehicle accidents, as well as low energy falls of geriatric patients with osteoporotic bone. They often require surgical treatment, and its main objectives are to restore the articular surface and axial relationships, avoid long-term immobilization, and ultimately restore the function of the injured knee joint as soon as possible. However, it is reported that the average motion of the knee is still limited 15 months after THF surgery, when compared with the healthy population (105° vs. 150°). Knee joint movement limitation caused by THFs severely restrict the patient's daily life, since high mobility is required to manage daily tasks, such as climbing stairs and sitting and standing from chairs requiring 90-120° of flexion and entering a bathtub requiring at least 135° of flexion. How to increase the range of motion (ROM) and the functionality of the knee as much as possible has become the focus of postoperative rehabilitation of THFs. Continuous passive motion (CPM) is an external device that enables joints to move passively on a preset arc of motion. Currently, CPM is widely used in postoperative rehabilitation that limits the ROM of the joint, mainly including fracture repair,

rotator cuff repair, hand rehabilitation, reconstruction rehabilitation of the anterior cruciate ligament, total knee arthroplasty (TKA), and adhesive capsulitis. However, there is still no consensus on the clinical functional recovery outcome and standard intervention measures of CPM. Regarding the rehabilitation of CPM for THFs, a study of intra-articular knee fractures involving proximal tibial fractures showed that, compared with the non-CPM group, the CPM group, which used CPM for 48 hours, had significantly increased knee ROM at short-term post-operation, but there was no significant difference at other longer follow-up time points. However, whether prolonged CPM application affects postoperative rehabilitation after THFs remains unknown. In addition, with the development of surgical technology and enhanced recovery after surgery, the patient's length of hospital stay has been reduced, which led to a reduction of recovery time in the hospital. Rehabilitation at home becomes very important and a supplement to the insufficient time of rehabilitation in hospital. CPM is now more and more used in the post-clinical home situation and has become a part of daily care plan. The purpose of this study is to explore whether the prolonged application of CPM in the home situation will improve midterm postoperative rehabilitation after THFs. We hypothesized that prolonged use of CPM in the home situation is beneficial in the postoperative recovery of THFs.

Adapted from: Kabst, C., Tian, X., Kleber, C., Amlang, M., Findeisen, L., Lee, G., & Zwingenberger, S. (2022). Prolonged application of continuous passive movement improves the postoperative recovery of tibial head fractures: A prospective randomized controlled study. *BioMed Research International*, 2022, 1236781. https://doi-org.ezproxy.sibdi.ucr.ac.cr/10.1155/2022/1236781

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 3 - Handout #4 - Answer Key



Instructions: Skim the introduction of the article. **A)** What is Continuous passive motion (CPM)? **B)** What alternative is there to the insufficient time of rehabilitation in hospital? <u>Underline the two answers</u>.

Research Article

Prolonged Application of Continuous Passive Movement Improves the Postoperative Recovery of Tibial Head Fractures: A Prospective Randomized Controlled Study

1. Introduction

Tibial head fractures (THFs) can be caused by high energy trauma incidents, mostly motor vehicle accidents, as well as low energy falls of geriatric patients with osteoporotic bone. They often require surgical treatment, and its main objectives are to restore the articular surface and axial relationships, avoid long-term immobilization, and ultimately restore the function of the injured knee joint as soon as possible. However, it is reported that the average motion of the knee is still limited 15 months after THF surgery, when compared with the healthy population (105° vs. 150°). Knee joint movement limitation caused by THFs severely restrict the patient's daily life, since high mobility is required to manage daily tasks, such as climbing stairs and sitting and standing from chairs requiring 90-120° of flexion and entering a bathtub requiring at least 135° of flexion. How to increase the range of motion (ROM) and the functionality of the knee as much as possible has become the focus of postoperative rehabilitation of THFs. Continuous passive motion (CPM) is an external device that enables joints to move passively on a preset arc of motion. Currently, CPM is widely used in postoperative rehabilitation that limits the ROM of the joint, mainly including fracture repair, rotator cuff repair, hand rehabilitation, reconstruction rehabilitation of the anterior cruciate ligament, total knee arthroplasty (TKA), and adhesive capsulitis. However, there is still no consensus on the clinical functional recovery outcome and standard intervention measures of CPM. Regarding the rehabilitation of CPM for THFs, a study of intra-articular knee fractures involving proximal tibial fractures showed that, compared with the non-CPM group, the CPM group, which used CPM for 48 hours, had significantly increased knee ROM at short-term post-operation, but there was no significant difference at other longer follow-up time points. However, whether prolonged CPM application affects postoperative rehabilitation after THFs remains unknown. In addition, with the development of surgical technology and enhanced recovery after surgery, the patient's length of hospital stay has been reduced, which led to a reduction of recovery time in the hospital. Rehabilitation at home becomes very important and a supplement to the insufficient time of rehabilitation in hospital. CPM is now more and more used in the post-clinical home situation and has become a part of daily care plan. The purpose of this study is to explore whether the prolonged application of CPM in the home situation will improve midterm postoperative rehabilitation after THFs. We hypothesized that prolonged use of CPM in the home situation is beneficial in the postoperative recovery of THFs.

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University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 3 - Handout #5



Instructions: Skim the methods section of the article. What subsections contain the most relevant information? Highlight your answers. *Research Article*

Prolonged Application of Continuous Passive Movement Improves the Postoperative Recovery of Tibial Head Fractures: A Prospective Randomized Controlled Study

Methods. *Study Design*. A prospective, non blinded, controlled single-center trial of 60 patients who had been surgically treated for THF was performed at the University Hospital Carl Gustav Carus at TU Dresden, Germany. They were randomized into 2 groups of 30 patients each (CPM group and non-CPM group). CPM and conventional physical therapies started on the first postoperative day in both groups. Whereas the CPM group intensified its training with an additional CPM therapy for 21 days after discharge, the non-CPM group received conventional physical therapy only. Follow-up points were set 6 weeks and 6 months post-operatively.

Participants. This trial included all patients undergoing tibial head surgery from February 2017 to October 2018 at the University Hospital Carl Gustav Carus at TU Dresden, Germany. All patients had open reduction and internal fixation (ORIF), with the operative and fixation method decided by their surgeons. Further inclusion criteria were an age of 18 years or older, a radiologically assured THF (OTA 41 type A/B/C), free motion of the knee joint prior to injury. and a healthy, freely movable contralateral knee joint. All patients with a previous knee injury, pathological fracture, open tibial physis, pelvic fracture, spinal injury, hip injury, and other diseases hindering the use of CPM were excluded. Patients were randomly divided into the CPM group and non-CPM group on a one-to-one ratio by the block randomization method.

Interventions. All patients received conventional physical therapy and CPM therapies from the first postoperative day. The conventional physical therapy comprising of 30 minutes of training with stretching exercises and muscle strength (2-3 times/week) and CPM therapy were performed 3 times a day per 30 minutes. The CPM therapy was performed by using a Kinetec Optima S4 device (S&U Medi-zintechnik GmbH, Zottenheim, Germany). After being discharged from the hospital, the non-CPM group was treated with conventional physical therapy alone. In addition to the conventional physical therapy alone. In addition program during the hospitalization to enable home training for 21 days after being discharged from the hospital. The ROM of CPM could be set individually using a remote control. Altogether, a ROM from -10° to 120° was covered by the CPM device. All patients were encouraged to move their knee joints on the first day after the operation, with partial weight-bearing within the first six weeks and full weight-bearing thereafter.

Outcomes. The therapy was assessed at 6 weeks and 6 months postoperatively. The primary outcome of the investigation was the ROM of the knee. For this purpose, a goniometer was used which measured the ROM of the injured and contralateral healthy knee. Knee functionality and the life patient's quality of were determined as secondary outcome measurements which were assessed by the Knee Society Score (KSS), the Oxford Knee Score (OKS), the EuroQoL, and the University of California at Los Angeles (UCLA) activity score difference. Specially, the UCLA activity score difference was the difference between the preinjury status score and follow-up time point score, and the scoring rules were based on the previous standards.

Sample Size. When calculating the sample size, ROM was used as the main outcome parameter. The average knee ROM after tibial head fracture was 105°, and the clinically significant increase of ROM was 15°. Using an alpha of 0.05, a statistical power of 80%, 20% rate of dropouts, and combined with previous studies, sample size of 60 patients had statistical significance and was used in this study.

Statistical Methods. The data were performed by using SPSS software (SPSS Inc., Chicago, IL, USA). The normality of distribution of continuous variables was tested by one sample Kolmogorov-Smirnov test. Continuous variables with normal distribution were presented as mean ± standard deviation and range. The mean of ROM, knee flexion, knee extension, functional outcome score, and baseline data of the CPM group and non-CPM group were compared at each follow-up time point by independent samples Student's t test. The mean of ROM among 6 weeks and 6 months postoperative and the contralateral uninjured knee in the non-CPM group and CPM group were compared by a one-way ANOVA, followed by Tukey's post hoc test for multiple com- parisons. A value of p < 0:05 was considered significant.

Adapted from: Kabst, C., Tian, X., Kleber, C., Amlang, M., Findeisen, L., Lee, G., & Zwingenberger, S. (2022). Prolonged application of continuous passive movement improves the postoperative recovery of tibial head fractures: A prospective randomized controlled study. *BioMed Research International*, 2022, 1236781. <u>https://doi-org.ezproxy.sibdi.ucr.ac.cr/10.1155/2022/1236781</u>

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 3 - Handout #5 - Answer Key



Instructions: Skim the methods section of the article. What subsections contain the most relevant information? Highlight your answers. *Research Article*

Prolonged Application of Continuous Passive Movement Improves the Postoperative Recovery of Tibial Head Fractures: A Prospective Randomized Controlled Study

Methods. *Study Design*. A prospective, non blinded, controlled single-center trial of 60 patients who had been surgically treated for THF was performed at the University Hospital Carl Gustav Carus at TU Dresden, Germany. They were randomized into 2 groups of 30 patients each (CPM group and non-CPM group). CPM and conventional physical therapies started on the first postoperative day in both groups. Whereas the CPM group intensified its training with an additional CPM therapy for 21 days after discharge, the non-CPM group received conventional physical therapy only. Follow-up points were set 6 weeks and 6 months post-operatively.

Participants. This trial included all patients undergoing tibial head surgery from February 2017 to October 2018 at the University Hospital Carl Gustav Carus at TU Dresden, Germany. All patients had open reduction and internal fixation (ORIF), with the operative and fixation method decided by their surgeons. Further inclusion criteria were an age of 18 years or older, a radiologically assured THF (OTA 41 type A/B/C), free motion of the knee joint prior to injury. and a healthy, freely movable contralateral knee joint. All patients with a previous knee injury, pathological fracture, open tibial physis, pelvic fracture, spinal injury, hip injury, and other diseases hindering the use of CPM were excluded. Patients were randomly divided into the CPM group and non-CPM group on a one-to-one ratio by the block randomization method.

Interventions. All patients received conventional physical therapy and CPM therapies from the first postoperative day. The conventional physical therapy comprising of 30 minutes of training with stretching exercises and muscle strength (2-3 times/week) and CPM therapy were performed 3 times a day per 30 minutes. The CPM therapy was performed by using a Kinetec Optima S4 device (S&U Medi-zintechnik GmbH, Zottenheim, Germany). After being discharged from the hospital, the non-CPM group was treated with conventional physical therapy alone. In addition to the conventional physical therapy alone training for 21 days after being discharged from the hospital. The ROM of CPM could be set individually using a remote control. Altogether, a ROM from -10° to 120° was covered by the CPM device. All patients were encouraged to move their knee joints on the first day after the operation, with partial weight-bearing within the first six weeks and full weight-bearing thereafter.

Outcomes. The therapy was assessed at 6 weeks and 6 months postoperatively. The primary outcome of the investigation was the ROM of the knee. For this purpose, a goniometer was used which measured the ROM of the injured and contralateral healthy knee. Knee functionality and the of life patient's quality were determined as secondary outcome measurements which were assessed by the Knee Society Score (KSS), the Oxford Knee Score (OKS), the EuroQoL, and the University of California at Los Angeles (UCLA) activity score difference. Specially, the UCLA activity score difference was the difference between the preinjury status score and follow-up time point score, and the scoring rules were based on the previous standards.

Sample Size. When calculating the sample size, ROM was used as the main outcome parameter. The average knee ROM after tibial head fracture was 105°, and the clinically significant increase of ROM was 15°. Using an alpha of 0.05, a statistical power of 80%, 20% rate of dropouts, and combined with previous studies, sample size of 60 patients had statistical significance and was used in this study.

Statistical Methods. The data were performed by using SPSS software (SPSS Inc., Chicago, IL, USA). The normality of distribution of continuous variables was tested by one sample Kolmogorov-Smirnov test. Continuous variables with normal distribution were presented as mean ± standard deviation and range. The mean of ROM, knee flexion, knee extension, functional outcome score, and baseline data of the CPM group and non-CPM group were compared at each follow-up time point by independent samples Student's t test. The mean of ROM among 6 weeks and 6 months postoperative and the contralateral uninjured knee in the non-CPM group and CPM group were compared by a one-way ANOVA, followed by Tukey's post hoc test for multiple com- parisons. A value of p < 0:05 was considered significant.

Adapted from: Kabst, C., Tian, X., Kleber, C., Amlang, M., Findeisen, L., Lee, G., & Zwingenberger, S. (2022). Prolonged application of continuous passive movement improves the postoperative recovery of tibial head fractures: A prospective randomized controlled study. *BioMed Research International*, 2022, 1236781. <u>https://doi-org.ezproxy.sibdi.ucr.ac.cr/10.1155/2022/1236781</u>

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 3 - Handout #6



Instructions: Skim the results section of the article. What subsections contain the most relevant information? Highlight your answers.

Research Article

Prolonged Application of Continuous Passive Movement Improves the Postoperative Recovery of Tibial Head Fractures: A Prospective Randomized Controlled Study

Results. *Recruitment*. From February 2017 to October 2018, 60 patients were recruited in this study. The follow-up ended 6 months postoperatively, because that is our typical follow-up time for every patient with THF. According to the internal hospital standards, follow-up of the patients was performed 6 months postoperatively. To assess short-term influence, a 6-week follow-up point was additionally chosen during which patients were just with partial weight-bearing. The trial was completed in April 2019.

Participants. 60 patients were recorded and split into two treatment groups. All 60 patients completed 6-week follow-up. At 6 months postoperatively, the group size of the non- CPM group decreased from 30 to 24 due to follow-up loss. 27 out of the initial 30 patients were analyzed in the CPM group. Reasons were reoperation (non-CPM group: 4 patients and CPM group: 1 patient) and patients' request to discontinue the trial (non-CPM group: 2 patients and CPM group: 2 patients).

Outcomes and Estimations. The ROM of the contralateral uninjured knee in the CPM group and the non-CPM group was equivalent. At 6 weeks after

surgery, the CPM group had a significant increase in ROM compared with the non-CPM group. The different values could also be observed for knee flexion and knee extension. At 6 months after surgery, the CPM group also had a significant increase in ROM compared with the non-CPM group. The knee flexion of the non-CPM group appeared to be significantly smaller than that of the CPM group. The extension of CPM patients was only marginally better than that of the non-CPM group. In addition, both in the non-CPM and CPM groups, the recovery effect of 6 months after surgery was better than that of 6 weeks after surgery, including ROM, flexion, and extension of the knee. However, the ROM of injured knee joint in the two groups was still lower than the ROM of contralateral knee joint even after 6 months. Comparing the improvements from 6 weeks to 6 months after surgery, it was found that the motion of the knee, including ROM, flexion, and extension, in the CPM group was not better than that of in the non-CPM group. There were significant differences in the analysis of KSS and the EQ-5D-3L part of EuroQoL score at both follow-up time points. OKS and visual analog scale (VAS) part of the EuroQoL score in the CPM group showed better results than the non-CPM group, but there was only a significant difference at 6-month follow-up. At both follow-up time points, the pain score of the CPM group also showed better results in pain points of KSS. The UCLA activity score difference demonstrated better results in the CPM group, but there was no significant difference at both time points. The improvements of knee functionality and the patient's quality of life from 6 weeks to 6 months post-operation showed that the results were similar between the two groups, and there was no statistical difference in all results.

Harms. No direct harms and unintended effects due to physical therapy occurred in both groups. In total, 5 patients underwent reoperations for the

following reasons: repeated trauma (non-CPM group: 1 patient), revision of osteochondral defect (non-CPM group: 1 patient), and revision by compartment syndrome (CPM-group: 2 patients and non- CPM group: 1 patient).

Adapted from: Kabst, C., Tian, X., Kleber, C., Amlang, M., Findeisen, L., Lee, G., & Zwingenberger, S. (2022). Prolonged application of continuous passive movement improves the postoperative recovery of tibial head fractures: A prospective randomized controlled study. *BioMed Research International*, 2022, 1236781. https://doi-org.ezproxy.sibdi.ucr.ac.cr/10.1155/2022/1236781

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 3 - Handout #6-Answer Key



Instructions: Skim the results section of the article. What subsections contain the most relevant information? Highlight your answers. *Research Article*

Prolonged Application of Continuous Passive Movement Improves the Postoperative Recovery of Tibial Head Fractures: A Prospective Randomized Controlled Study

Results. *Recruitment*. From February 2017 to October 2018, 60 patients were recruited in this study. The follow-up ended 6 months postoperatively, because that is our typical follow-up time for every patient with THF. According to the internal hospital standards, follow-up of the patients was performed 6 months postoperatively. To assess short-term influence, a 6-week follow-up point was additionally chosen during which patients were just with partial weight-bearing. The trial was completed in April 2019.

Participants. 60 patients were recorded and split into two treatment groups. All 60 patients completed 6-week follow-up. At 6 months postoperatively, the group size of the non- CPM group decreased from 30 to 24 due to follow-up loss. 27 out of the initial 30 patients were analyzed in the CPM group. Reasons were reoperation (non-CPM group: 4 patients and CPM group: 1 patient) and patients' request to discontinue the trial (non-CPM group: 2 patients and CPM group: 2 patients).

Outcomes and Estimations. The ROM of the contralateral uninjured knee in the CPM group and the non-CPM group was equivalent. At 6 weeks after surgery, the CPM group had a significant increase in ROM compared with the non-CPM group. The different values could also be observed for knee flexion and knee extension. At 6 months after surgery, the CPM group also had a significant increase in ROM compared with the non-CPM group. The knee flexion of the non-CPM group appeared to be significantly smaller than that of the CPM group. The extension of CPM patients was only marginally better than that of the non-CPM group. In addition, both in the non-CPM and CPM groups, the recovery effect of 6 months after surgery was better than that of 6 weeks after surgery, including ROM, flexion, and extension of the knee. However, the ROM of injured knee joint in the two groups was still lower than the ROM of contralateral knee joint even after 6 months. Comparing the improvements from 6 weeks to 6 months after surgery, it was found that the motion of the knee, including ROM, flexion, and extension, in the CPM group was not better than that of in the non-CPM group. There were significant differences in the analysis of KSS and the EQ-5D-3L part of EuroQoL score at both follow-up time points. OKS and visual analog scale (VAS) part of the EuroQoL score in the CPM group showed better results than the non-CPM group, but there was only a significant difference at 6-month follow-up. At both follow-up time points, the pain score of the CPM group also showed better results in pain points of KSS. The UCLA activity score difference demonstrated better results in the CPM group, but there was no significant difference at both time points. The improvements of knee functionality and the patient's quality of life from 6 weeks to 6 months post-operation showed that the results were similar between the two groups, and there was no statistical difference in all results.

Harms. No direct harms and unintended effects due to physical therapy occurred in both groups. In total, 5 patients underwent reoperations for the following reasons: repeated trauma (non-CPM group: 1 patient), revision of osteochondral defect (non-CPM group: 1 patient), and revision by

compartment syndrome (CPM-group: 2 patients and non- CPM group: 1 patient).

Adapted from: Kabst, C., Tian, X., Kleber, C., Amlang, M., Findeisen, L., Lee, G., & Zwingenberger, S. (2022). Prolonged application of continuous passive movement improves the postoperative recovery of tibial head fractures: A prospective randomized controlled study. *BioMed Research International*, 2022, 1236781. <u>https://doi-org.ezproxy.sibdi.ucr.ac.cr/10.1155/2022/1236781</u>

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 3 - Handout #7



Instructions: Complete the outline with the missing information from the introduction, methods, and results sections (Handouts #4, #5, and #6).

Introduction

- Tibial head fractures (THFs) can be caused by ______,
 ______, as well as low energy falls of geriatric patients with osteoporotic bone.
- It is reported that the average motion of the knee is still limited
 ______ after THF surgery, when compared with the healthy
 population.
- Continuous passive motion (CPM) is
- With the development of ______ and _____ after surgery, the patient's length of hospital stay has been reduced, which led to a reduction of ______ in the hospital.

Methods

Participants

- All patients had ______, with the operative and fixation method decided by their surgeons.
- Patients were randomly divided into ______ and _____ on a one-to-one ratio by the block randomization method.

Interventions

- All patients received _____ and _____ and ______ from the first postoperative day.
- After being discharged from the hospital, the non-CPM group was treated with ______.
- The CPM group continued the same rehabilitation program during the hospitalization to enable home training for ______ after being discharged from the hospital.

Outcomes

- The primary outcome of the investigation was ______
- and _____ were determined
 as secondary outcome measurements.

Results

Participants

- At 6 months postoperatively, the group size of the non- CPM group decreased from _____ to ____ due to follow-up loss.
- Reasons were _____ and _____I.

Outcomes and Estimations

- At 6 weeks after surgery, the CPM group had a significant increase in _____ compared with the non-CPM group.
- At 6 months after surgery, the CPM group also had a significant increase in _____ compared with the non-CPM group.
- Both in the non-CPM and CPM groups, the recovery effect of 6 months after surgery was better than that of 6 weeks after surgery, including _____, _____, and _____.
- Comparing the improvements from 6 weeks to 6 months after surgery, it was found that the motion of the knee, including ROM, flexion, and extension, in the CPM group was _____.
- The improvements of ______ and

_____ from 6 weeks to 6 months post-

operation showed that the results were similar between the two groups.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 3 - Handout #7 - Answer Key

Introduction

- Tibial head fractures (THFs) can be caused by <u>high energy trauma</u> <u>incidents, mostly motor vehicle accidents</u>, as well as low energy falls of geriatric patients with osteoporotic bone.
- It is reported that the average motion of the knee is still limited <u>15</u> <u>months</u> after THF surgery, when compared with the healthy population.
- Continuous passive motion (CPM) is <u>an external device that enables</u> joints to move passively on a preset arc of motion.
- With the development of <u>surgical technology</u> and <u>enhanced</u> <u>recovery</u> after surgery, the patient's length of hospital stay has been reduced, which led to a reduction of <u>recovery time</u> in the hospital.

Methods

Participants

- All patients had <u>open reduction and internal fixation (ORIF)</u>, with the operative and fixation method decided by their surgeons.
- Patients were randomly divided into <u>the CPM group</u> and <u>non-CPM</u> <u>group</u> on a one-to-one ratio by the block randomization method.

Interventions

- All patients received <u>conventional physical therapy</u> and <u>CPM</u> <u>therapies</u> from the first postoperative day.
- After being discharged from the hospital, the non-CPM group was treated with **conventional physical therapy alone**.
- The CPM group continued the same rehabilitation program during the hospitalization to enable home training for <u>21 days</u> after being discharged from the hospital.

Outcomes

- The primary outcome of the investigation was the ROM of the knee.
- <u>Knee functionality</u> and <u>the patient's quality of life</u> were determined as secondary outcome measurements.

Results

Participants

- At 6 months postoperatively, the group size of the non- CPM group decreased from <u>30</u> to <u>24</u> due to follow-up loss.
- Reasons were <u>reoperation</u> and <u>patients' request to discontinue the</u> <u>trial</u>.



Outcomes and Estimations

- At 6 weeks after surgery, the CPM group had a significant increase in <u>ROM</u> compared with the non-CPM group.
- At 6 months after surgery, the CPM group also had a significant increase in <u>**ROM**</u> compared with the non-CPM group.
- Both in the non-CPM and CPM groups, the recovery effect of 6 months after surgery was better than that of 6 weeks after surgery, including **ROM**, flexion, and **extension of the knee**.
- Comparing the improvements from 6 weeks to 6 months after surgery, it was found that the motion of the knee, including ROM, flexion, and extension, in the CPM group was <u>not better than that of in the non-</u> <u>CPM group</u>.
- The improvements of <u>knee functionality</u> and <u>the patient's quality of</u> <u>life</u> from 6 weeks to 6 months post-operation showed that the results were similar between the two groups.

1 - Quiz This is a	30 s
heart attack	×
neuron	×
stroke	~
brain tumor	×

2 - Quiz A stroke is a medical condition that happens in the	30 s
L liver	×
heart	×
brain	~
back	×

3 - Qu A stro	iz oke happens when the brain doesn't receive enough	30 s
	water	×
♦	blood	1
	CO ₂	×
	cells	×

iz is the name of the initial phase of a stroke which lasts 2 weeks he injury?	60 s
ischaemic stroke	×
chronic stroke	×
acute stroke	~
haemorrhagic stroke	×

5 - Qu 	uiz refers to the period of recovery that takes place six months the initial stroke event.	Exposition
	Haemorrhagic stroke	×
♦	Ischaemic stroke	×
	Acute stroke	×
	Chronic stroke	1

6 - Qu	iz is the structure which joins the muscle to the bone.	30 s
	ligament	×
•	fracture	×
	wrist	×
	tendon	~

7 - Quiz This is the	30 s
finger	×
ring	×
wrist	~
palm	×

8 - Qu What	is the name of this treatment?	30 s
	electric motor	×
•	tendon vibration	~
	electroconvulsive therapy	×
	blood pressure monitor	×

9 - Quiz What is the name of this type of technology?	30 s
virtual reality	1
tactile technology	×
video games	×
sensor technology	×

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 4 - Handout #1



Instructions: Skim the abstract of the article. Then, mark true or false on the statements below. Compare your answers with your classmates.

RESEARCH

Open Access

Visual feedback improves movement illusions induced by tendon vibration after chronic stroke



Background: <u>Illusion</u> of movement induced by tendon <u>vibration</u> is commonly used in <u>rehabilitation</u> and seems valuable for <u>motor</u> <u>rehabilitation</u> after <u>stroke</u>, by playing a role in cerebral plasticity. The aim was to study if congruent visual cues using <u>Virtual Reality</u> (VR) could enhance the <u>illusion</u> of movement induced by tendon vibration of the <u>wrist</u> among participants with stroke.

Methods: We included 20 chronic stroke participants. They experienced tendon vibration of their <u>wrist</u> (100 Hz, 30 times) inducing the <u>illusion</u> of movement. Three VR visual conditions were added to the vibration: a congruent moving virtual hand (Moving condition); a static virtual hand (Static condition); or no virtual hand at all (Hidden condition). The participants evaluated for each visual condition the intensity of the illusory movement using a Likert scale, the sensation of wrist's movement using a degree scale and they answered a questionnaire about their preferred condition. **Results**: The Moving condition was significantly superior to the Hidden condition and to the Static condition in terms of <u>illusion</u> of movement and the wrist's extension. There was no significant difference

between the Hidden and the Static condition for these 2 criteria. The Moving condition was considered the best one to increase the illusion of movement (in 70% of the participants). Two participants did not feel any <u>illusion</u> of movement. **Conclusions**: This study showed the interest of using congruent cues in VR in order to enhance the consistency of the <u>illusion</u> of movement induced by tendon vibration among participants after stroke, regardless of their clinical severity. By stimulating the brain motor areas, this visuo-proprioceptive feedback could be an interesting tool in <u>motor</u> <u>rehabilitation</u>.

Keywords: Stroke, Rehabilitation, Tendon vibration, Illusory movement, Virtual reality

Adapted from: Le Franc, S., Bonan, I., Fleury, M., Butet, S., Barillot, C., Lécuyer, A., & Cogné, M. (2021). Visual feedback improves movement illusions induced by tendon vibration after chronic stroke. *Journal of Neuroengineering and Rehabilitation*, 18(1), 156. https://doiorg.ezproxy.sibdi.ucr.ac.cr/10.1186/s12984-021-00948-7

1. The purpose of the research was to study if congruent visual cues using Virtual Reality (VR) could enhance the illusion of movement induced by tendon vibration of the wrist among participants with stroke.

A. True B. False

2. Moving, static, and hidden were the three visual conditions added to the tendon vibration on the patients' writs.

A. True

B. False

3. The Hidden condition was considered the best condition to increase the illusion of movement.

- A. True
- B. False

4. The experimental group of the study showed more positive results compared to the control group.

A. True

B. False

5. The use of congruent cues in VR showed enhancement in the illusion of movement induced by tendon vibration among participants after stroke.

A. True

B. False

Useful Expressions

- I think # <u>1</u> is **true/false**.
- Maybe # <u>2</u> is true/false.
- In my opinion #<u>3</u> is false because the information in the abstract says otherwise.
- I agree / disagree with you because I can't find that information in the abstract.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 4 - Handout #1 - Answer Key



1. The purpose of the research was to study if congruent visual cues using Virtual Reality (VR) could enhance the illusion of movement induced by tendon vibration of the wrist among participants with stroke.

<mark>A. True</mark>

B. False

2. Moving, static, and hidden were the three visual conditions added to the tendon vibration on the patients' writs.

<mark>A. True</mark>

B. False

3. The Hidden condition was considered the best condition to increase the illusion of movement.

A. True

<mark>B. False</mark>

4. The experimental group of the study showed more positive results compared to the control group.

A. True

<mark>B. False</mark>

5. The use of congruent cues in VR showed enhancement in the illusion of movement induced by tendon vibration among participants after stroke.

<mark>A. True</mark>

B. False

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 4 - Handout #2



Instructions: Discuss the following questions with your partner. You may take some notes to share with the class.

- 1. Have you ever used technology to treat patients? If so, what kind of technology?
 - Yes, I have. I have used (name of the technology) to treat a patient with (condition). / No, I haven't.

2. What methods are there to treat a patient with a stroke to recover body motion?

• I've heard / I know about (name of the method) to treat a patient recovering from a stroke.

3. For what other conditions would you use virtual reality (VR) or similar technologies?

• I would use VR / (name of other technologies) to help patients with (name of the condition(s)).

4. Are there any types of technologies that you would like to use to treat your patients? Which ones?

• I would like to use (name of the technology) to attend to my patients.



You may refer to the following types of technology or discuss others based on your experience.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 4 - Handout #3



Instructions: A) Skim the adapted text. What sections are there in this adapted article? Highlight the **three** of them.

RESEARCH

Visual feedback improves movement illusions induced by tendon vibration after chronic stroke



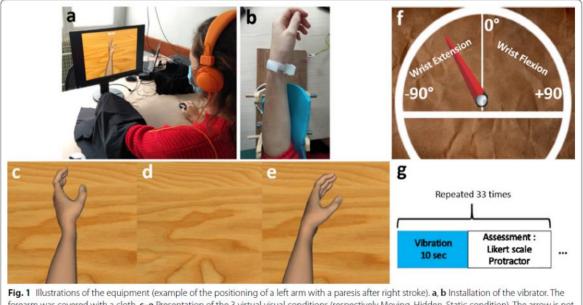


Materials and methods

Study design

We planned a monocentric randomized controlled pilot study in the Rehabilitation Unit of Rennes University Hospital in France. The Rennes University Hospital Center promoted the study and the Ethics Committee of Strasbourg University, France approved it on October 8th, 2019. The participants received an information letter and each signed a written consent prior to testing. This study has been recorded in Clinical Trials under the record number NCT04130711, registered on October 17th 2019. *Participants*

The participants were recruited in the Rehabilitation unit of Rennes University Hospital, France. A total of 20 participants with a mean age of 58.70 years old (Min = 35, Max = 78) participated in the study, including 6 women (30%). All the participants fulfilled the following inclusion criteria: age between 18 and 80 years old, first unilateral ischemic or hemorrhagic hemispheric cerebral stroke, stroke occurring more than 6 months prior to enrollment (considered to be a period in which there is less expected recovery of the upper limb from conventional rehabilitation), mild to severe upper limb deficiency with Fugl-Meyer Assessment Upper Extremity (FMA-UE) score \leq 60. Non-inclusion criteria were: ischemic or hemorrhagic damage to the posterior fossae, complete motor deficit of the upper limb, epicritical or proprioceptive anesthesia, comprehension disorders limiting participation in the study; participants deprived of freedom and with a legal incapacity were also excluded from this study.



forearm was covered with a cloth. c-e Presentation of the 3 virtual visual conditions (respectively Moving, Hidden, Static condition). The arrow is not visible during the experiment. f Protractor to measure the sensation of wrist's displacement. «-90°» signifies a maximal wrist extension for the left upper limb. The description «values of degree» and « wrist extension, wrist flexion» are not seen by the participant during the trial. g Chronology of the trial

Experimental procedure

Procedures

Before the experiment, we asked the participants about their laterality before and since the stroke by using an Edinburgh questionnaire. We also recorded several clinical aspects: pain in the disabled arm, articular limitation, epicritical and proprioceptive sensibility, arm spasticity, visual field, and motor function which was evaluated by using the FMA-UE. The participants sat in an office chair in front of a computer screen. They placed their paretic arm on a cylindrical arm-holder (Fig. 1a, b), and their hand was covered with a black cloth, to not see it, with a vibrator applied

on their flexor carpi tendon (Fig. 1a). We applied tendon vibration during 10 s at the frequency of 100 Hz to induce some illusions of movement. For each vibration trial, one visual virtual cue among three was shown to the participants on the computer screen in a randomized order. The virtual cues could be: (1) a virtual hand moving in the same direction as the wrist extension (Moving condition) (corresponding to the expected feeling of illusion induced by the tendon vibration); (2) no hand at all with an empty screen (Hidden condition); (3) a static virtual hand (Static condition) (Fig. 1c-e). The participants answered two questions after each vibration trial: the intensity of illusion felt by using a Likert scale from 1 to 7 (with 1 = noillusion at all; 4 = moderate intensity of illusion of movement; 7 = strong intensity of illusion of movement); the sensation of wrist movement in degrees by using a virtual protractor (Fig. 1f). Each participant tested 33 vibration trials (Fig. 1g), but the first three trials were not included in the analysis, considering the participants needed some time to focus on the vibration to feel illusions of movement and to make sure they had well understood the evaluation modalities. The participants were asked to fill out a questionnaire at the end of the protocol to get some information about their preferred visual conditions and subjective data on vibration comfort and feeling. Concerning the instructions, we explained orally to the participants the vibration modalities, without specifying which movement they could feel (hand, finger) nor in which direction it would occur. Then, we gave the same written instructions. We reminded the participants to focus on their upper limb sensations during the experiment. Visual feedback

The visual cues were displayed on a 17 inch-LCD monitor by using Unity software. The virtual hand appeared as a natural generic skin upper limb avatar, in order to correspond to the participants' own perspective. The virtual scene depended on the condition: (1) an extension of the non-

dominant wrist at speed of 3 degrees per second, congruent with the illusory movement expected by the vibration on the flexor carpi tendon (Moving condition) (Fig. 1c).; (2) an empty surface (Hidden condition) (Fig. 1d).; a static hand (Static condition) (Fig. 1e). The device was available for both hands depending on the deficient side after the stroke.

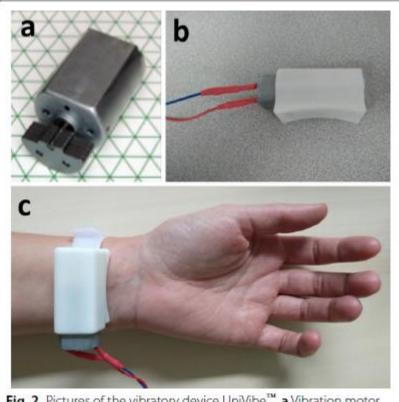


Fig. 2 Pictures of the vibratory device UniVibe[™]. a Vibration motor. b Vibration device linked to the Arduino[®] and sound isolated. c Wrist positioning

Vibratory device

The vibratory unit was a UniVibe[™] Model 320–105 (Fig. 2). The device was composed of an actuator positioned on the flexor carpi tendon and was kept with a hook-and-loop fastener on the skin. The vibrator was inserted in a homemade sound box created by 3D print to protect the skin from the motor and to enhance the sensation of vibration. An Arduino® controlled the vibration motor. The vibration frequency was determined by the rotation of the mass. The diameter of the skin tactor was 25 mm. The parameters used were: frequency of 100 Hz, amplitude of 5G, voltage of 3.3 V in order to elicit the movement's illusion.

Collection of the data

Main measure consisted of the intensity of illusion of movement using the Likert scale after each trial. Secondary outcome criteria were: the extent of movement experienced in degrees during each trial and their chosen visual condition. For the angle of motion, the participants could steer the needle of the protractor by using a computer mouse with their free functional hand. They positioned the needle from -90° to + 90° with all possible shades of degrees (Fig. 1f). If there were no illusions, they steered the needle to 0° (resting position). The protractor was available for both sides. Due to the study design, we examined only the short-term effect in this study, and not the long-term effect. Data was collected in the Data Archiving and Networked Services (DANS) database.

Statistical analysis

We performed a descriptive analysis of all variables used in the study. We described qualitative variables with frequencies and their related percentages, as well as quantitative variables using the mean ± standard deviation. The R software version 3.6.2 performed statistical tests. A non-parametric approach was used due to the repeated measures analysis of variance (ANOVA) which did not violate the assumption of sphericity according to Mauchly's test for the main judgment criterion. We conducted a within-group analysis based on the Friedman tests comparing the 3 visual conditions and then we used the 2 by 2 conditions based on post-hoc tests (Wilcoxon signed rank test) corrected with Bonferroni. A Mann–Whitney test was used to perform others between-group comparisons.

Results

Intensity of the illusion of movement

The mean (± SD) Likert ranking was respectively 3.40 (± 1.67) for the Moving condition, 2.98 (± 1.78) for the Hidden condition and 2.79 (± 1.70) for the Static condition (Fig. 4), averaged in all participants. A Friedman test showed a statistically significant difference between the 3 visual conditions concerning the Likert scale ranking. Post-hoc analysis showed that the Moving condition induced a higher intensity of illusion of movement than the Hidden condition and the Static condition. We did not find any difference between the Hidden condition and the Static condition. Then we used a Mann–Whitney test to make other between-group comparisons. We split the group in two, depending on their upper limb dysfunction (severe or moderate dysfunction), and we compared the data concerning the intensity of the illusion of movement (in the Moving condition). We did not find any significant difference between the group with severe motor function disability compared to that with moderate motor function disability. Then, by separating right- and left-hemispheric stroke (right: n = 9), we found a significant difference concerning the intensity of illusion of movement with higher illusions in the right stroke group. Further analysis showed that the upper limb motor function (measured by FMA-UE) was better in the right stroke group compared to that of the left one. We did not find higher illusions of movement among participants with normal to moderate sensibility disorders compared to those with severe disorders (n = 14 and n = 6 respectively). Concerning the effect of spasticity, there was no significant difference between participants with severe spasticity (n = 12)and weak to moderate spasticity (n = 8) concerning the intensity of illusion of movement.

Sensation of wrist's extension

The mean value of the sensation of wrist's extension of the participants in degrees was respectively -13.80 (\pm 20.91) for the Moving condition, -4.40 (\pm 19.18) for the Hidden condition and -1.02 (\pm 17.12) for the Static condition, averaged in all participants (Fig. 5). A Friedman test showed a statistically significant difference between the three conditions. Posthoc analysis showed that the Moving condition induced a higher sensation of wrist's extension than the Hidden condition and the Static condition. There was no significant difference between the Hidden condition and the Static condition. There was no significant difference between the Hidden condition and the Static condition concerning the sensation of wrist's movement. We performed a Spearman correlation between the intensity of illusion of movement and the sensation of wrist's extension. We found a moderate significant negative correlation between these 2 parameters for the Training condition (Spearman's correlation coefficient rho = -0.61).

Subjective reports of the participants

At the end of the protocol, the participants answered a questionnaire. Among the 20 participants included, 6 of them (30%) had already had a small experience of illusion of movement induced by neck muscle vibrations (used in clinical practice for reducing unilateral neglect). The Moving condition was the participants' preferred condition to enhance the illusion of movement (n = 14, 70%), then the Hidden one (n = 1, 5%). Some participants did not prefer any of the 3 conditions (n = 5, 25%) and no participants preferred the Static condition. Concerning the type of illusion of movement, they mainly felt a wrist's extension (n = 7, 39%), then a wrist's supination (n = 4, 22%), then a wrist's flexion (n = 3, 17%) or an ulnar's deviation (n = 3, 17%) and a fingers' extension (n = 1, 6%). Two participants (P11 and P15) did not feel any illusion of movement at all. During the experiment, all the participants reported a correct feeling of vibration (n =

20, 100%), and no participants declared any uncomfortable feeling of paresthesia or itching.

Adapted from: Le Franc, S., Bonan, I., Fleury, M., Butet, S., Barillot, C., Lécuyer, A., & Cogné, M. (2021). Visual feedback improves movement illusions induced by tendon vibration after chronic stroke. *Journal of Neuroengineering and Rehabilitation*, 18(1), 156. <u>https://doiorg.ezproxy.sibdi.ucr.ac.cr/10.1186/s12984-021-00948-7</u> Instructions: B) Scan the adapted text. Find the answers to these questions.

1. Which of these actions did the participants have to do during the vibration trials? You can choose several options.

A. The participants sat in front of a computer screen.

B. The participants' hands were covered with a cloth and a vibrator on their flexor carpi tendon.

C. Participants were applied tendon vibration during 15 s at the frequency of 120 Hz to induce some illusions of movement.

D. For each vibration trial, three visual virtual cues were shown to the participants on the computer screen in a randomized order.

2. What inclusion characteristics did the participants have? Mention 3 of them.

Α.	
В.	
C.	

3. What virtual cues were the participants given during the vibration trials?

Α.	
В.	
C.	

4. What results did the study throw? Mention 2 of them.

A		 	
B.			

Instructions: **C)** Share your answers with the class. Use the following expressions.

Useful Expressions					
 I chose <u>A</u> in #1. 					
 What do you think? / What is your opinion? 					
 What did you write in <u>#2</u>? 					
 I wrote the age had to be between 18 and 80 years old in #2. 					
 In my opinion/ I think that the answer for <u>#3</u> is <u>the Moving condition</u> 					
induced a higher sensation of the wrist's extension.					
 I agree / disagree with you because it's stated in the results 					
sections, paragraph <u>#2</u> .					

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 4 - Handout #3 - Answer Key



Instructions: A) Skim the adapted text. What sections are there in this adapted article? Highlight the **three** of them.

RESEARCH

Visual feedback improves movement illusions induced by tendon vibration after chronic stroke





Materials and methods

Study design

We planned a monocentric randomized controlled pilot study in the Rehabilitation Unit of Rennes University Hospital in France. The Rennes University Hospital Center promoted the study and the Ethics Committee of Strasbourg University, France approved it on October 8th, 2019. The participants received an information letter and each signed a written consent prior to testing. This study has been recorded in Clinical Trials under the record number NCT04130711, registered on October 17th 2019. *Participants*

The participants were recruited in the Rehabilitation unit of Rennes University Hospital, France. A total of 20 participants with a mean age of 58.70 years old (Min = 35, Max = 78) participated in the study, including 6 women (30%). All the participants fulfilled the following inclusion criteria: age between 18 and 80 years old, first unilateral ischemic or hemorrhagic hemispheric cerebral stroke, stroke occurring more than 6 months prior to enrollment (considered to be a period in which there is less expected recovery of the upper limb from conventional rehabilitation), mild to severe upper limb deficiency with Fugl-Meyer Assessment Upper Extremity (FMA-UE) score \leq 60. Non-inclusion criteria were: ischemic or hemorrhagic damage to the posterior fossae, complete motor deficit of the upper limb, epicritical or proprioceptive anesthesia, comprehension disorders limiting participation in the study; participants deprived of freedom and with a legal incapacity were also excluded from this study.

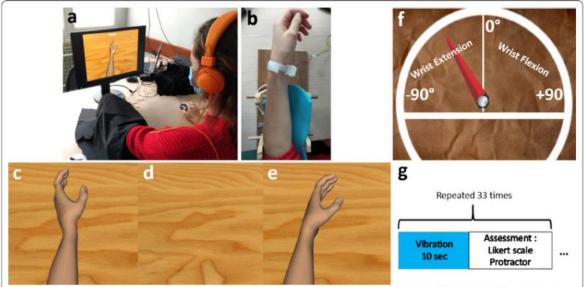


Fig. 1 Illustrations of the equipment (example of the positioning of a left arm with a paresis after right stroke). **a**, **b** Installation of the vibrator. The forearm was covered with a cloth. **c**–**e** Presentation of the 3 virtual visual conditions (respectively Moving, Hidden, Static condition). The arrow is not visible during the experiment. **f** Protractor to measure the sensation of wrist's displacement. «-90°» signifies a maximal wrist extension for the left upper limb. The description «values of degree» and « wrist extension, wrist flexion» are not seen by the participant during the trial. **g** Chronology of the trial

Experimental procedure

Procedures

Before the experiment, we asked the participants about their laterality before and since the stroke by using an Edinburgh questionnaire. We also recorded several clinical aspects: pain in the disabled arm, articular limitation, epicritical and proprioceptive sensibility, arm spasticity, visual field, and motor function which was evaluated by using the FMA-UE. The participants sat in an office chair in front of a computer screen. They placed their paretic arm on a cylindrical arm-holder (Fig. 1a, b), and their hand was covered with a black cloth, to not see it, with a vibrator applied on their flexor carpi tendon (Fig. 1a). We applied tendon vibration during 10 s at the frequency of 100 Hz to induce some illusions of movement. For each vibration trial, one visual virtual cue among three was shown to the participants on the computer screen in a randomized order. The virtual cues could be: (1) a virtual hand moving in the same direction as the wrist extension (Moving condition) (corresponding to the expected feeling of illusion induced by the tendon vibration); (2) no hand at all with an empty screen (Hidden condition); (3) a static virtual hand (Static condition) (Fig. 1c-e). The participants answered two questions after each vibration trial: the intensity of illusion felt by using a Likert scale from 1 to 7 (with 1 = no illusion at all; 4 = moderate intensity of illusion of movement; 7 = strong intensity of illusion of movement); the sensation of wrist movement in degrees by using a virtual protractor(Fig. 1f). Each participant tested 33 vibration trials (Fig. 1g), but the first three trials were not included in the analysis, considering the participants needed some time to focus on the vibration to feel illusions of movement and to make sure they had well understood the evaluation modalities. The participants were asked to fill out a questionnaire at the end of the protocol to get some information about their preferred visual conditions and subjective data on vibration comfort and feeling. Concerning the instructions, we explained orally to the participants the vibration modalities, without specifying which movement they could feel (hand, finger) nor in which direction it would occur. Then, we gave the same written instructions. We reminded the participants to focus on their upper limb sensations during the experiment.

Visual feedback

The visual cues were displayed on a 17 inch-LCD monitor by using Unity software. The virtual hand appeared as a natural generic skin upper limb avatar, in order to correspond to the participants' own perspective. The virtual scene depended on the condition: (1) an extension of the non-dominant wrist at speed of 3 degrees per second, congruent with the illusory movement expected by the vibration on the flexor carpi tendon (Moving condition) (Fig. 1c).; (2) an empty surface (Hidden condition) (Fig. 1d).; a static hand (Static condition) (Fig. 1e). The device was available for both hands depending on the deficient side after the stroke.

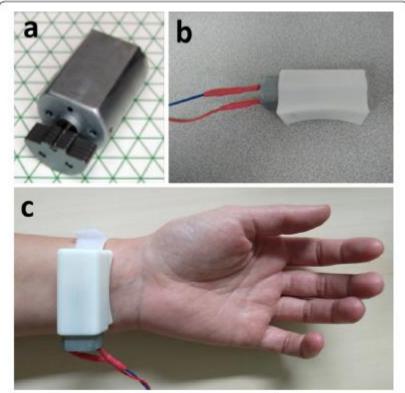


Fig. 2 Pictures of the vibratory device UniVibe[™]. a Vibration motor. b Vibration device linked to the Arduino[®] and sound isolated. c Wrist positioning

Vibratory device

The vibratory unit was a UniVibe[™] Model 320–105 (Fig. 2). The device was composed of an actuator positioned on the flexor carpi tendon and was kept with a hook-and-loop fastener on the skin. The vibrator was inserted in a homemade sound box created by 3D print to protect the skin from the motor and to enhance the sensation of vibration. An Arduino® controlled the vibration motor. The vibration frequency was determined by the rotation of the mass. The diameter of the skin tactor was 25 mm. The parameters used were: frequency of 100 Hz, amplitude of 5G, voltage of 3.3 V in order to elicit the movement's illusion.

Collection of the data

Main measure consisted of the intensity of illusion of movement using the Likert scale after each trial. Secondary outcome criteria were: the extent of movement experienced in degrees during each trial and their chosen visual condition. For the angle of motion, the participants could steer the needle of the protractor by using a computer mouse with their free functional hand. They positioned the needle from -90° to + 90° with all possible shades of degrees (Fig. 1f). If there were no illusions, they steered the needle to 0° (resting position). The protractor was available for both sides. Due to the study design, we examined only the short-term effect in this study, and not the long-term effect. Data was collected in the Data Archiving and Networked Services (DANS) database.

Statistical analysis

We performed a descriptive analysis of all variables used in the study. We described qualitative variables with frequencies and their related percentages, as well as quantitative variables using the mean ± standard deviation. The R software version 3.6.2 performed statistical tests. A non-parametric approach was used due to the repeated measures analysis of variance (ANOVA) which did not violate the assumption of sphericity

according to Mauchly's test for the main judgment criterion. We conducted a within-group analysis based on the Friedman tests comparing the 3 visual conditions and then we used the 2 by 2 conditions based on post-hoc

tests (Wilcoxon signed rank test) corrected with Bonferroni. A Mann–Whitney test was used to perform others between-group comparisons.

<mark>Results</mark>

Intensity of the illusion of movement

The mean (\pm SD) Likert ranking was respectively 3.40 (\pm 1.67) for the Moving condition, 2.98 (± 1.78) for the Hidden condition and 2.79 (± 1.70) for the Static condition (Fig. 4), averaged in all participants. A Friedman test showed a statistically significant difference between the 3 visual conditions concerning the Likert scale ranking. Post-hoc analysis showed that the Moving condition induced a higher intensity of illusion of movement than the Hidden condition and the Static condition. We did not find any difference between the Hidden condition and the Static condition. Then we used a Mann–Whitney test to make other between-group comparisons. We split the group in two, depending on their upper limb dysfunction (severe or moderate dysfunction), and we compared the data concerning the intensity of the illusion of movement (in the Moving condition). We did not find any significant difference between the group with severe motor function disability compared to that with moderate motor function disability. Then, by separating right- and left-hemispheric stroke (right: n = 9), we found a significant difference concerning the intensity of illusion of movement with higher illusions in the right stroke group. Further analysis showed that the upper limb motor function (measured by FMA-UE) was better in the right stroke group compared to that of the left one. We did not find higher illusions of movement among participants with normal to moderate sensibility disorders compared to those with severe disorders (n =

14 and n = 6 respectively). Concerning the effect of spasticity, there was no significant difference between participants with severe spasticity (n = 12) and weak to moderate spasticity (n = 8) concerning the intensity of illusion of movement.

Sensation of wrist's extension

The mean value of the sensation of wrist's extension of the participants in degrees was respectively -13.80 (\pm 20.91) for the Moving condition, -4.40 (\pm 19.18) for the Hidden condition and -1.02 (\pm 17.12) for the Static condition, averaged in all participants (Fig. 5). A Friedman test showed a statistically significant difference between the three conditions. Posthoc analysis showed that the Moving condition induced a higher sensation of wrist's extension than the Hidden condition and the Static condition. There was no significant difference between the Hidden condition and the Static condition. There was no significant difference between the Hidden condition and the Static condition concerning the sensation of wrist's movement. We performed a Spearman correlation between the intensity of illusion of movement and the sensation of wrist's extension. We found a moderate significant negative correlation between these 2 parameters for the Training condition (Spearman's correlation coefficient rho = -0.61).

Subjective reports of the participants

At the end of the protocol, the participants answered a questionnaire. Among the 20 participants included, 6 of them (30%) had already had a small experience of illusion of movement induced by neck muscle vibrations (used in clinical practice for reducing unilateral neglect). The Moving condition was the participants' preferred condition to enhance the illusion of movement (n = 14, 70%), then the Hidden one (n = 1, 5%). Some participants did not prefer any of the 3 conditions (n = 5, 25%) and no participants preferred the Static condition. Concerning the type of illusion of movement, they mainly felt a wrist's extension (n = 7, 39%), then a wrist's supination (n = 4, 22%), then a wrist's flexion (n = 3, 17%) or an ulnar's deviation (n = 3, 17%) and a fingers' extension (n = 1, 6%). Two participants (P11 and P15) did not feel any illusion of movement at all. During the experiment, all the participants reported a correct feeling of vibration (n = 20, 100%), and no participants declared any uncomfortable feeling of paresthesia or itching.

Instructions: B) Scan the adapted text. Find the answers to these questions.

- 1. Which of these actions did the participants have to do during the vibration trials? You can choose several options.
- A. The participants sat in front of a computer screen.

B. The participants' hands were covered with a cloth and a vibrator on their flexor carpi tendon.

C. Participants were applied tendon vibration during 15 s at the frequency of 120 Hz to induce some illusions of movement.

D. For each vibration trial, three visual virtual cues were shown to the participants on the computer screen in a randomized order.

2. What inclusion characteristics did the participants have? Mention 3 of them. **Answers vary.**

A. age between 18 and 80 years old.

- B. first unilateral ischemic or hemorrhagic hemispheric cerebral stroke.
- C. stroke occurring more than 6 months prior to enrollment.

D. <u>mild to severe upper limb deficiency with Fugl-Meyer Assessment</u> Upper Extremity (FMA-UE) score ≤ 60 .

3. What virtual cues were the participants given during the vibration trials?

A. <u>a virtual hand moving in the same direction as the wrist extension</u> (Moving condition)

B. no hand at all with an empty screen (Hidden condition)

C. <u>a static virtual hand (Static condition)</u>

4. What results did the study throw? Mention 2 of them. Answers vary.

A. <u>It showed that the Moving condition induced a higher intensity of</u> <u>illusion of movement than the Hidden condition and the Static condition.</u>

B. <u>Further analysis showed that the upper limb motor function was better</u> in the right stroke group compared to that of the left one.

C. <u>Post-hoc analysis showed that the Moving condition induced a higher</u> <u>sensation of wrist's extension than the Hidden condition and the Static</u> <u>condition.</u>

D. <u>The participants' preferred condition to enhance the illusion of</u> <u>movement was the Moving condition.</u> University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 4 - Handout #4



Instructions: Read the questions below. Prepare some notes to share your answers with the class in our next session.

RESEARCH

Visual feedback improves movement illusions induced by tendon vibration after chronic stroke



Open Access

 Why did the participants have to sign a written consent prior to testing?

2. Why did the participants have to meet the inclusion criteria?

3. Why couldn't the participants see their paretic arm during the vibration trials?

4.	Did the vibrator work on both hands?			
5.	Write two instruments used by the researchers to collect data from			
the p	patients during the study. Mention the purpose of the two instruments.			
A				
Purp	ose:			
В.				

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 4 - Handout #4 - Answer Key



Instructions: Read the questions below. Prepare some notes to share your answers with the class in our next session.

RESEARCH

Open Access

Visual feedback improves movement illusions induced by tendon vibration after chronic stroke



 Why did the participants have to sign a written consent prior to testing? <u>Answers vary.</u>
 <u>Because it ensures that patients have an informed choice about their</u>

participation in a research study.

2. Why did the participants have to meet the inclusion criteria?

Answers vary.

Because the researchers needed the key features that only the target population would give them.

3. Why couldn't the participants see their paretic arm during the

vibration trials? Answers vary.

Because the induced movement illusions can help the researchers to understand how visual processing works in the normal brain and also in the diseased brain to improve motor rehabilitation.

4. Did the vibrator work on both hands?

Yes, it did. The device was available for both hands depending on the deficient side after the stroke.

5. Write two instruments used by the researchers to collect data from

the patients during the study. Mention the purpose of the two instruments.

Answers vary.

A. <u>an Edinburgh questionnaire</u>

Purpose: to collect information about the patients' laterality before and since the stroke.

B. the FMA-UE

Purpose: to record several clinical aspects.

C. <u>a Likert scale</u>

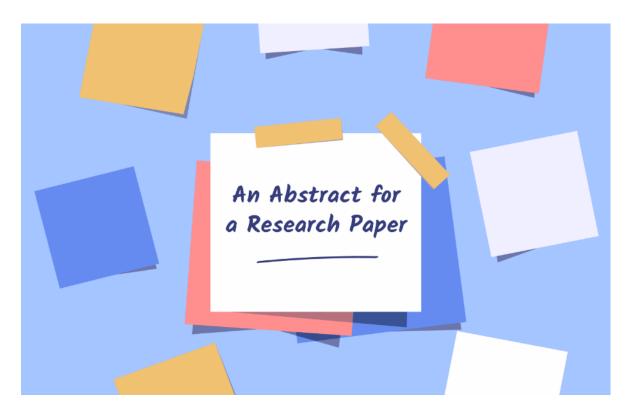
Purpose: to measure the intensity of illusion felt by the patients

D. <u>a questionnaire at the end of the protocol</u>
 Purpose: <u>to get information about the patients' preferred visual</u>
 <u>conditions and subjective data on vibration comfort and</u>
 <u>feeling.</u>

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 5 - Handout #1

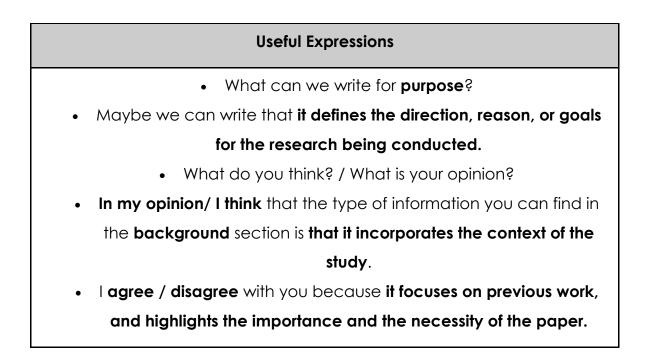


Instructions: Complete the outline of an abstract by filling in the blanks with the type of information you can find in each section.



- Background / Introduction
- Purpose / Objective

- Results
- Keywords



University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 5 - Handout #1 - Answer Key



Instructions: Complete the outline of an abstract by filling in the blanks with the type of information you can find in each section. **Answers vary.**

- Background / Introduction
 <u>It incorporates the context of the study, focuses on previous</u>
 <u>work, and highlights the importance and the necessity of the</u>
 <u>paper.</u>
- Purpose / Objective
 <u>It clearly defines the direction, reason, or goals for the research</u>
 <u>being conducted.</u>
- Methods / Methodology
 <u>Methods are the strategies, processes, or techniques utilized in</u>
 <u>the collection of data or evidence for analysis in order to reveal</u>
 <u>new information or create better understanding of a topic.</u>
- Results

Its purpose is to objectively present key results or answers to the questions/hypotheses, without interpretation, and in an orderly and logical sequence using both illustrative materials (Tables and Figures) and text.

• Keywords

<u>They help other researchers find your paper when they are</u> <u>conducting a search on the topic.</u>

Instructions

1. Look at the pictures on the next slide (slide 2).

2. When it's your turn to participate, select the number of the picture that matches the word the teacher is saying.

3. Remember to use the useful expressions in the pink box to say your answer.

Useful Expressions

#4 MOST URGENT 1. What's the meaning of _____? URGENT 2. I think it's #__. 3. I'm not sure. Maybe it's # __. LESS 4. How do you pronounce that word? URGENT 5. Could you please #8 #10 repeat?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 5 - Handout #2



How to ask questions

To ask yes/no questions, we often put the verb before the subject. This is called inversion.

Affirmative	Yes/No Question
I am a physical therapist.	Am I a physical therapist?
l can help you.	Can I help you?
She is stretching her arm.	Is she stretching her arm?
We have met before.	Have we met before?

Yes/No Question	Question with question word
Are you late for the conference?	Why are you late for the conference?
Was she in rehabilitation?	When was she in rehabilitation?
Can I help you?	How can I help you?
Have we met before?	Where have we met before?

If there is a question word (why, what, where, how, etc.), it goes before the verb.

This is true for sentences with be, sentences that have auxiliary verbs (e.g. They are waiting. She has finished.) and sentences with modal verbs (can, will, should, might, etc.).

Questions in the simple present

For other verbs in the simple present, we use the auxiliary verb do/does in the question.

Affirmative	Yes/No Question	Question with question word
You work at Clínica Bíblica Hospital.	Do you work at Clínica Bíblica Hospital?	Where do you work?
The equipment cost <u>s</u> \$1,000.	Does the equipment cost \$1,000?	How much does the equipment cost?

Questions in the simple past

We use the auxiliary verb did in the simple past.

Affirmative	Question	Question with question word
She studied at UCR.	Did she study at UCR?	Where did she study?
They went to the consultation room.	Did they go to the consultation room?	Where did they go?

Subject questions

Some questions ask about the person or thing doing the action. There is no inversion of subject and verb in those questions.

Who broke the valve? (válvula)

What **was** your first symptom?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 5 - Handout #2



Instructions: Complete the questions with the words in the box. There are **NO** extra options.

can	who	have	like
go	going	where	what

- 1. _____ do you live?
- 2. _____ you ever attended other conferences?
- 3. Are you ______ to give a speech today?
- 4. What time do you _____ to work?
- 5. _____ you see any of your colleagues from here?
- 6. _____ happened? I want to know more.
- 7. Would you _____ to meet again?
- 8. _____ do you work with?

<u>Please, write your questions in this link:</u> https://padlet.com/chrisjvm93/rkmqvv8t3rg2dm0z



Instructions: Complete the questions with the words in the box. There are **NO** extra options.

can	who	have	like
go	going	where	what

- 1. Where do you live?
- 2. <u>Have you ever attended other conferences?</u>
- 3. Are you going to give a speech today?
- 4. What time do you go to work?
- 5. <u>Can</u> you see any of your colleagues from here?
- 6. <u>What happened</u>? I want to know more.
- 7. Would you <u>like</u> to meet again?
- 8. <u>Who</u> do you work with?



Instructions: Anna and María are meeting at a conference for physical therapists in New York. Go to the link:

https://wordwall.net/resource/35713915 and organize the scrambled conversation by dragging and dropping the sentences in the correct order.

Useful Expressions		
 Can you share your screen? 		
 Who do you think starts the conversation? Anna or María? 		
 In my opinion/ I think / Maybe the first sentence is 		
"Hello, I'm Anna Bakery. What's your name?" by Anna.		
 What do you think? / Do you agree / What's your opinion? 		
 I agree with you / You are right because Anna is greeting María. 		
 I disagree with you / I'm not sure because María is not asking 		
anything.		

Conversation between Anna and María:

María: What a small world! I am also a physical therapist at Hospital Samaritano in Rio.	María: I am María Santos.
Anna: Hello, I am Anna Bakery. What's your name?	Anna: That's nice! A colleague from another country.
Anna: Oh, really? I live right here in New York. I am a physical therapist at Lenox Hill Hospital.	Anna: Where are you from?
María: Right! It has been nice meeting you.	María: I am from Rio, in Brazil.



Instructions: Anna and María are attending a conference for physical therapists in New York. Go to the link:

<u>https://wordwall.net/resource/35713915</u> and organize the scrambled conversation by dragging and dropping the sentences in the correct order.

Anna: Hello, I am Anna Bakery. What's your name?

María: I am María Santos.

Anna: Where are you from?

Anna: I am from Rio, in Brazil.

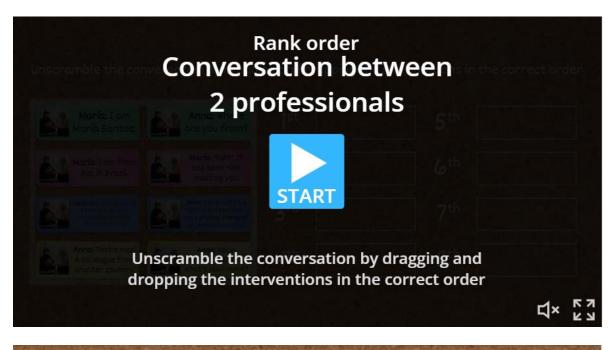
Anna: Oh, really? I live right here in New York. I am a physical therapist at

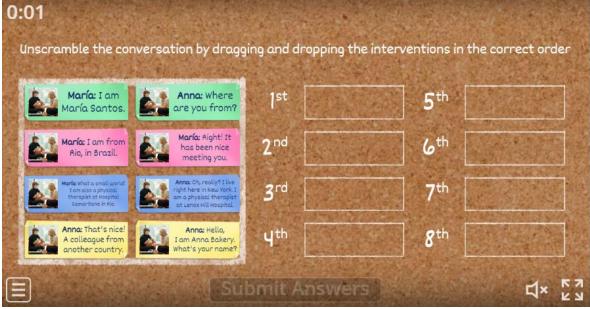
Lenox Hill Hospital.

Anna: What a small world! I am also a physical therapist at Hospital Samaritano in Rio.

Anna: That's nice! A colleague from another country.

Anna: Right! It has been nice meeting you.







Instructions: Go to Padlet and find the questions you wrote to meet a fellow colleague: <u>https://padlet.com/chrisjvm93/rkmqvv8t3rg2dm0z</u>. In pairs, take turns asking each other the questions with the corrections made by the teachers. For the activity, <u>pretend you don't know anything about your partner since it's the first time you are meeting.</u>

Conversation Starter		
A: Hi there, how is everything going?		
B: Hello, I'm actually doing fine. What about you?		
A: I'm also fine, thank you for asking.		
B: Nice so, tell me about yourself. At what university did you study?		
A: I haven't graduated yet. I'm currently majoring in Physical Therapy at UCR.		
B: Oh, I see! It's nice to meet a fellow colleague.		
A: Right! And, what about you? What did you study?		
B: I also studied at UCR. I majored in Physical Therapy.		

Useful Expressions		
 Oh, I see. Wow! That's very interesting! Really? Tell me more. 	 What about you? / And you? What makes you say that? Why do you feel that way? What do you mean by that? 	



Instructions: You and your partner are meeting at a conference for physical therapists in New York. Create a short conversation between the two of you. You can use **Handout #2** as a model for your conversation.

Possible Topics for the Conversation

- Academic and Professional Background
- Academic and Professional Interests
- Career Aspirations
- Contact Information



Useful Expressions

- Can you share your screen?
- Who do you think can start the conversation?
- In my opinion/ I think / Maybe we can start the conversation with a greeting like "Hello, I'm Catalina Smith. What's your name?"
 - What do you think? / Do you agree / What's your opinion?
 - I agree with you / You are right, and then I can say "I'm César Alfaro, very nice to meet you, Catalina."
- I disagree with you / I'm not sure. Maybe I can say "Greetings, my name is César Alfaro. Pleased to meet you, Ms. Smith."



Instructions: In this task you will familiarize with the proper intonation for question formation in English. Complete all the steps in this handout.

Intonation Who Yes / No for When Questions Why How

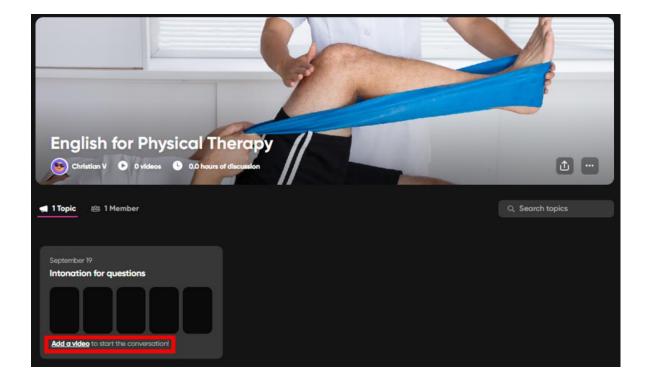
A. Watch these two videos:

https://www.youtube.com/watch?v=WhCncdRUvLo&ab_channel=Laurens englishcorner

https://www.youtube.com/watch?v=wc5U3u2inFs&ab_channel=mm mEnglish **B.** Write a proper question for the following statements. There may be several options for the questions. Follow the example.

		Example	
	1.	ś	,
		I studied physical therapy at the University of Costa Rica.	
	1.	<u>Where did you study?</u>	
		I studied physical therapy at the University of Costa Rica.	
1.			Ş
		I work as an instructor at the University of Costa Rica.	
2.			Ś
		My favorite speaker was Peter McCaullin.	
3.			Ś
		Yes, I do. I attend conferences all around Europe and Nor	th
		America.	
4.			Ś
		I am interested in novel treatments for pain management	and
		virtual reality (VR) to treat patients with chronic stroke.	
5.			Ś
		No, I haven't. But I would like to collaborate with colleagu	es on
		research about hydrotherapy.	

C. Go to Flipgrid to record yourself asking the questions you wrote in the previous exercise with proper intonation: <u>https://flip.com/1f5e47cb</u>





C. Write a proper question for the following statements. There may be several options for the questions. <u>Follow the example</u>. <u>Answers vary</u>.

<u>What do you do?</u> / <u>Where do you work?</u> I work as an instructor at the University of Costa Rica.

2. <u>Who was your favorite speaker?</u> / <u>Which speaker did you like the</u> <u>most?</u>

My favorite speaker was Peter McCaullin.

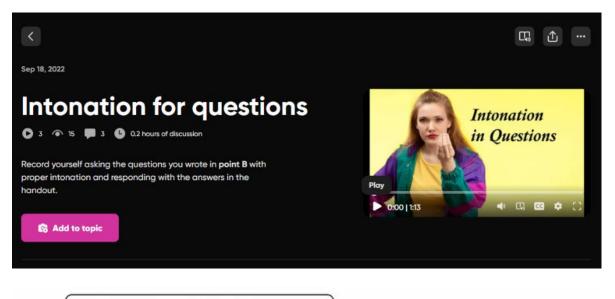
3. <u>Do you attend conferences?</u> / <u>Do you go to conferences?</u> Yes, I do. I attend conferences all around Europe and North America.

4. <u>What are your main interests?</u> / <u>What are you interested in?</u>

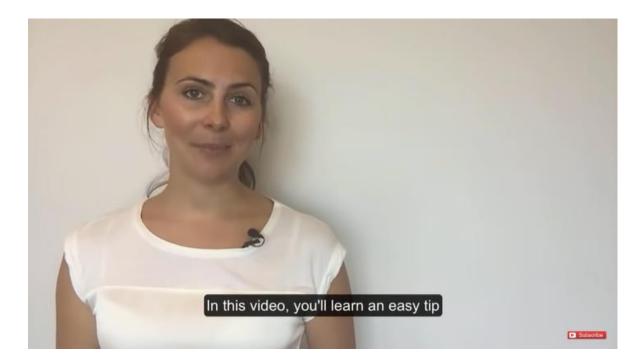
I am interested in novel treatments for pain management and virtual reality (VR) to treat patients with chronic stroke.

5. <u>Have you collaborated with fellow colleagues?</u> / <u>Have you worked</u> <u>on research with other colleagues?</u>

No, I haven't. But I would like to collaborate with colleagues on research about hydrotherapy.









Instructions: Fill in the blanks with a word from the **Word Bank** to complete the 3 conversations. There are NO extra options.

Word Bank

assistant	boss	employee	employer	experience
training	volunteer	area of specialization	languages	qualifications

Conversation 1

A: Tell me more about yourself.

B: Well, I speak 4 _____, and I have worked as a paramedic for the Red Cross.

A: That sounds very interesting. Were you a ______ paramedic?

B: Yes, I was. I worked for the Red Cross for 3 years while I was a student at

college. What about you? What can you tell me about your current work
?

A: I work at San Juan de Dios Hospital as a physical therapist for patients recovering from chronic stroke.

B: Wow! Very nice! Is pain management your _____?

A: Yes, it is. I have a Master's Degree in Pain Management from the University

of Glasgow, Scotland.

B: That's cool. I have just graduated from the Physical Therapy major at UCR.

Conversation 2

A: Who was your former _____?

B: Oh, it was ERT Legacy.

A: ERT Legacy? What is that?

B: It's a company that specializes in clinical services and medical devices to

pharmaceutical and healthcare organizations.

A: What did you have to do there? Were you a patient's _____?

B: No, I wasn't. I started as an ______ for site user's consultation.

A: Really? For how long?

B: Just a couple of years. I received tons of _____, so I ended up being

a Lead Consultant for the site users.

Conversation 3

A: I don't know what to write in my resume.

B: Why don't you describe your main _____

A: Well, I have very little work experience. Can you help me, please? You

Ś

have sent a lot of resumes many times before!

B: Hey! Not a lot, just some... Anyways, if you want to impress your future

you have to include hard and soft skills, languages you speak,

and other traits that make you stand out from the other candidates.

A: Thanks, man! I really appreciate it.

Useful Expressions

- Can you share your screen?
- In my opinion/I think / Maybe the first blank is "Well, I speak 4 languages"
- What do you think? / Do you agree / What's your opinion?
- I agree with you / You are right because we speak languages.
- I disagree with you / I'm not sure because we can't repeat any



Instructions: Fill in the blanks with a word from the **Word Bank** to complete the 3 conversations. There are NO extra options.

Word Bank

assistant	boss	employee	employer	experience
training	volunteer	area of specialization	languages	qualifications

Conversation 1

A: Tell me more about yourself.

B: Well, I speak 4 <u>languages</u>, and I have worked as a paramedic for the Red Cross.

A: That sounds very interesting. Were you a volunteer paramedic?

B: Yes, I was. I worked for the Red Cross for 3 years while I was a student at college. What about you? What can you tell me about your current work experience?

A: I work at San Juan de Dios Hospital as a physical therapist for patients recovering from chronic stroke.

B: Wow! Very nice! Is pain management your **area of specialization**?

A: Yes, it is. I have a Master's Degree in Pain Management from the University of Glasgow, Scotland.

B: That's cool. I have just graduated from the Physical Therapy major at UCR.

Conversation 2

A: Who was your former <u>employer</u>?

B: Oh, it was ERT Legacy.

A: ERT Legacy? What is that?

B: It's a company that specializes in clinical services and medical devices to pharmaceutical and healthcare organizations.

A: What did you have to do there? Were you a patient's assistant?

B: No, I wasn't. I started as an employee for site user's consultation.

A: Really? For how long?

B: Just a couple of years. I received tons of <u>training</u>, so I ended up being a Lead Consultant for the site users.

Conversation 3

A: I don't know what to write in my resume.

B: Why don't you describe your main **<u>qualifications</u>**?

A: Well, I have very little work experience. Can you help me, please? You have sent a lot of resumes many times before!

B: Hey! Not a lot, just some... Anyways, if you want to impress your future **boss** you have to include hard and soft skills, languages you speak, and other traits that make you stand out from the other candidates.

A: Thanks, man! I really appreciate it.



Instructions: Read Chloe Johnson's profile below. What else would you like to know about her? You can type your question(s) in the Zoom chat.

	Personal Information	Skills
	Chloe Johnson	Case management
	488-894-8923	Pain management
	<u>chloejohnson@email.com</u>	techniques CPR Medical terminology
	Pleasanton, CA	Splinting Kinney system Organization Attention to detail
Professional Summary		Certifications
Highly skilled and focused Physical Therapist with six years of experience treating patients according to their unique needs. Proven record of using pain management techniques to deliver successful patient outcomes.		Licensed Physical Therapist, State of California - Expires 2028
Experience		Education
 Physical Therapist January 2018–Current St. Joseph Rehabilitation Center San Ramon, CA Review physician referrals and patient medical records to make a diagnosis and determine the best course of treatment 		Doctorate in physical therapy University of Northern California 2018

 Develop treatment plans for patients based on their initial and ongoing conditions Evaluate and implement rehabilitation programs for patients with orthopedic, cardiovascular and neurological conditions Physical Therapist June 2016–January 2018 Clinton and Co. Rehab Alameda, CA Consulted with patients to learn more about their physical conditions Taught patients water-based, manual and gymbased therapy techniques to help them improve their range of movement 	Bachelor of Arts in psychology University of Northern California 2015
--	--

Useful Expressions

- What is the meaning of **splinting**?
- How do you pronounce Kinney?
- I would like to know more about the courses she took at college.
 - What do you think? / What's your opinion?
- I agree with you / You are right because she studied psychology

and then a doctorate in physical therapy.

I disagree with you / I'm not sure because to me work experience is
 more important than education.



Instructions: Complete the profile below with your own information. You can use the example in Handout #2 as a guide.

	Personal Information	Skills
(Your picture)		
Professional Su	immary	Certifications
Experience		Education

Useful Expressions

- How do you say asistente de paciente?
 - How do you write/spell **pain relief**?



How to ask questions

Questions in the present with <u>be</u> (jobs or characteristics)

Are	you/we/they	<u>noun / adjective</u> + ?
ls	he/she/it	

Examples: Are you <u>a physical therapist</u>? / What is the most <u>difficult</u> aspect of your job?

Questions in the present with <u>other verbs</u> (routines or habits)

Do	l/you/we/they	verb in base form + ?
Does	he/she/it	

Examples: Do you work at UCR? / Where does Mariela study?



How to ask questions

Questions in the past with <u>be</u> (jobs or characteristics)

Were	you/we/they	noun / adjective + ?
Was	l/he/she/it	

Examples: Was Grettel <u>your professor</u> at the university? / How <u>were her</u> <u>classes</u>?

Questions in the past with other verbs (events in the past)

Did	l/you/we/they	verb in base form + ?
Dia	he/she/it	

Examples: Did you go to UCR? / What did you have to do in your last job?



How to ask questions

Questions in the future (be going to)

Are	you/we/they		verb in base form + 6
ls	he/she/it	going to	

Examples: Are you going to <u>attend</u> another conference soon? / What is the speaker going to <u>lecture</u> about?

Questions in the future (will)

Will	you/we/they	verb in base form + ?
vviii	he/she/it	

Examples: Will you <u>finish</u> your Master's this year? / What <u>will</u> you <u>do</u> after the conference?



Instructions: A) Open your classmate's profile and read it. What else would you like to know about him/her? Write at least 3 questions about the information from his/her profile.

1.	 Ś
2.	 Ś
3.	 ż

Useful Expressions

- How do you say habilidades blandas?
- How do you write/spell knowledge?

Instructions: B) Take turns asking each other the questions you prepared. Remember to greet, use proper intonation for questions, and say good-bye.

Useful Expressions				
 Hello / Hi, how are you doing? I'm doing well, thanks. / I'm fine, what about you? 				
previous job. What we	ere your duties in your previous work			
	experience?			
By reading your profil	 By reading your profile it isn't very clear to me about your 			
certifications.	What were you certified in?			
Thank you for answering	my questions / Thank you for clarifying /			
Thank you fo	r the additional information.			
 Oh, I see. Wow! That's very interesting! Really? Tell me more. 	 What about you? / And you? What makes you say that? What do you mean by that? Can you elaborate more on that? 			



Instructions: A) Open your classmate's profile and read it. What else would you like to know about him/her? Write at least 3 questions about the information from his/her profile. <u>Answers vary.</u>

- 1. What were your duties in your previous work experience?
- 2. Why did you change your last work?
- 3. Where would you like to work?



Instructions: A) Read the speaking skill about asking follow-up questions.

SPEAKING SKILL Ask Follow-Up Questions

Sometimes an interviewee doesn't answer a question completely, and the interviewer may need to ask another question. Or one answer may lead to another question. Questions like these are called *follow-up* questions. Follow-up questions may:

- ask for reasons
- ask for examples
- ask about effects or consequences
- ask about the next step
- ask for more details or an explanation

Instructions: B) Read the following mini-conversations, and think of an appropriate follow-up question for each. Follow the example.

	Example		
	A: What did you study?		
B: I studied physical therapy.			
1.	A:		
	A:What did you study?		
	B: I studied physical therapy.		
1	A: When did you graduate? / What courses did you take?		

Conversation 1

A: Are you a physical therapist?

B: Yes, I am.

1. A	Y:
	•••

Conversation 2

A: When is the conference in Chicago?

B: It's in October.

2. **A**:______?

Conversation 3

A: What do you know about today's guest speakers?

B: I only know one of them.

3. **A:**_____?



Instructions: B) Read the following mini-conversations, and think of an appropriate follow-up question for each. Follow the example. <u>Answers vary.</u>

Conversation 1

- A: Are you a physical therapist?
- B: Yes, I am.
- 1. A: Where do you work? / When did you graduate?

Conversation 2

- A: When is the conference in Chicago?
- **B:** It's in October.

2. A: Do you want to go with me? / Are you going to attend the conference? / Do you know who the speaker(s) will be?

Conversation 3

A: What do you know about today's guest speakers?

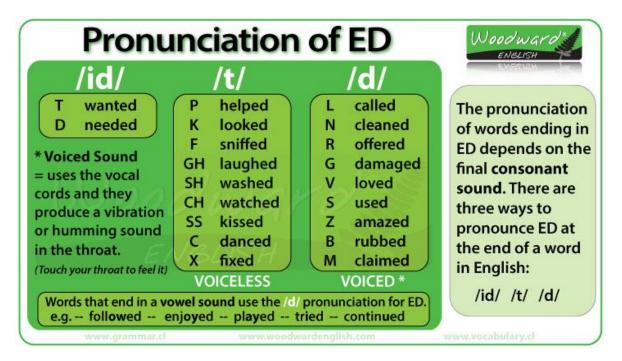
B: I only know one of them.

3. A: <u>What does he/she specialize in? / What are his/her main interests</u> in physical therapy? / What do you know about his/her background?



Pronunciation of the regular verbs in past

Instructions: Complete the different steps in this handout.



A. Watch this video:

https://www.youtube.com/watch?v=j32SurxnE4s&t=208s&ab_channel=Elem entalEnglish **B.** Go to Flip to record yourself answering the questions below: <u>https://flip.com/9f2f6f6c</u>. Remember to apply the rules for the **-ed** sounds in your responses.

1. What did you study?

I studi<u>ed</u> physical therapy.

2. When did you graduate?

I graduat<u>ed in 2015</u>. / I haven't graduat<u>ed</u> yet.

3. Where have you worked?

I have work<u>ed</u> at Clínica Bíblica Hospital. / I haven't work<u>ed</u> yet.

4. What are you interested in?

I am interest<u>ed</u> in hydrotherapy.

5. Have you collaborated on research with fellow colleagues?

Yes, I have. I collaborated on novel techniques to improve movement

with Catalina and Cristian. / I don't think I have collaborated on research before.

Past Tense of Verbs in English -ed pronounced in 3 ways

ElementalEnglish.com

of words ending in ED depends on th

> ee ways to onounce ED at e end of a word English: /id/ /t/ /d/

Sep 21, 2022

-ed sounds / Oral Practice	Pronu	nciation	n of ED)
-ea sourias / Oral Practice	/id/	/t/	/d/	
3 • 7 = 3 • 0.1 hours of discussion	T wanted D needed * Voiced Sound = uses the vocal	P helped K looked F sniffed GH laughed SH washed	L calls N clea R offe G dam V love	ned red saged
Record yourself answering the following questions. <u>Remember to</u> apply the rules for the -ed sounds in your responses.	cords and they produce a vibration or humming sound in the throat. (Touch your threat to feel 2)	CH watched SS kissed C danced X fixed VOICELESS	S user Z ama B rubl M clair VOICE	ized bed med
1. What did you study?	Words that end in a vo e.g followed - en		pronunciation tried - contin	
2. When did you graduate?				
3. Where have you worked?				
4. What are you interested in?				
5. Have you collaborated on research with fellow colleagues?				

Add to topic



Instructions: A) Spin the wheel: <u>https://wordwall.net/resource/36288591</u>.

B) Choose a classmate.

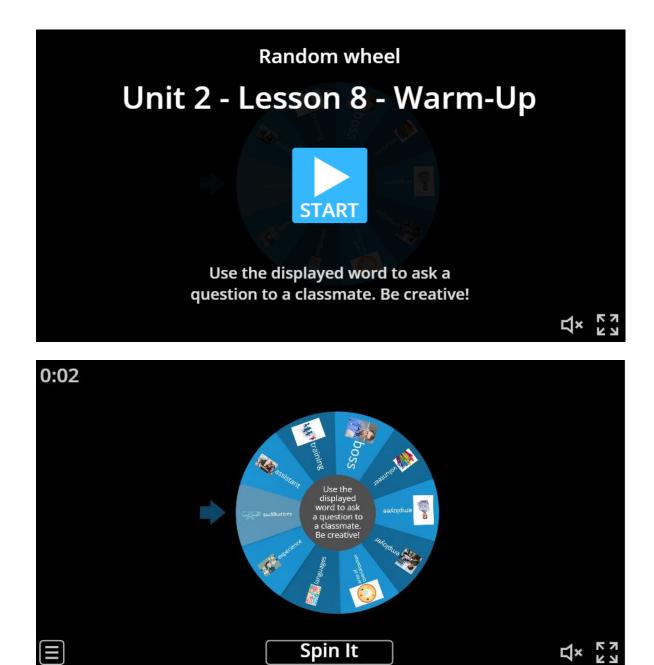
C) Ask him/her a question using the vocabulary studied in our

previous class. Be creative!

assistant	boss	employee	employer	experience
training	volunteer	area of specialization	languages	qualifications

Useful Expressions

- I'll go first, second, next.
- I want to ask Cristian a question.
- Have you ever worked as an assistant?
- What training is it necessary to be a paramedic?
- How would you define your relationship with your boss?





Instructions: A) You will be working in pairs in both rounds: Round 1 and

Round 2.

- B) Take turns asking and answering questions related to the topics below.
- C) Change classmates and repeat the activity with the following topics.

- Academic Background
- Professional Background

Useful Expressions

- Ask me your **first/next** question.
- What would you like to ask me / know about me?
 - Why did you decide to study physical therapy?
- What course did you enjoy the most at the university?
 - Where have you worked?
- Can you describe the process to become a physical therapy

instructor at UCR?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 8 - Handout #2



Instructions: A) You will be working in pairs in both rounds: Round 1 and Round 2.

- B) Take turns asking and answering questions related to the topics below.
- C) Change classmates and repeat the activity with the following topics.

Round 2 Topics

- Professional/Academic Interests
- Experiences on Research Collaboration

Useful Expressions

- Ask me your **first/next** question.
- What would you like to ask me / know about me?
 - What is your area of specialization?
 - Where would you like to work?
 - Have you collaborated on research before?
- What are the challenges of collaborating on research with fellow

colleagues?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 8 - Handout #3 - Student A



Instructions: Prepare a conversation with your partner using the information below. Be ready to present it in the main session.

Situation: You are at an international conference with fellow physical therapist colleagues from all around the world. Your objective is to talk to your partner, share your information, and ask for information based on your reason for attending the conference.

0	
D DE CONTRACTOR	Contact information Email Use your actual institutional/personal email Cell phone number Use your real number. Don't forget the area code (+506).
Your reason for attending the conference: Ask for information about novel treatments for conditions that interest you.	 Tasks: Introduce yourself to your classmate. Talk about your professional or academic situation. Talk about your reason for attending the conference. Finish the conversation in a friendly way.

Useful Expressions

- How do you say arroba?
- We can start the conversation by greeting each other.
 - Are you a physical therapist?
 - Where do you work/study?
 - Are you looking for anything in particular?
- We can finish the conversation by saying "looking forward to

hearing from you, let's be in touch"

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 8 - Handout #3 - Student B



Instructions: Prepare a conversation with your partner using the information below. Be ready to present it in the main session.

Situation: You are at an international conference with fellow physical therapist colleagues from all around the world. Your objective is to talk to your partner, share your information, and ask for information based on your reason for attending the conference.

A STORE CORPORED	Contact information Email Use your actual institutional/personal email Cell phone number Use your real number. Don't forget the area code (+506).
Your reason for attending the conference:	Tasks:Introduce yourself to
Find partners to collaborate with your investigation.	 your classmate. Talk about your professional or academic situation. Talk about your reason for attending the conference. Finish the conversation in a friendly way.

Useful Expressions

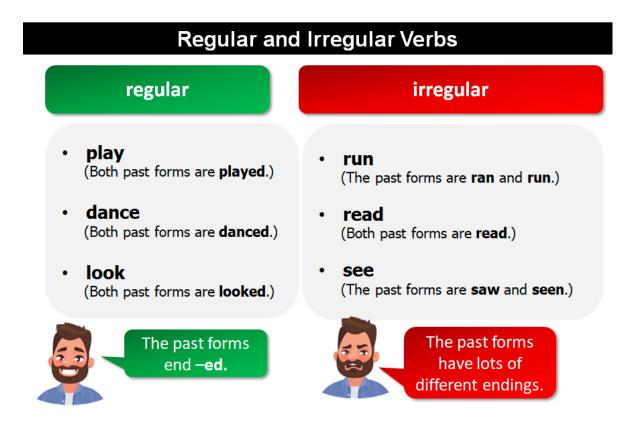
- How do you say arroba?
- We can start the conversation by greeting each other.
 - Are you a physical therapist?
 - Where do you work/study?
 - Are you looking for anything in particular?
- We can finish the conversation by saying "looking forward to

hearing from you, let's be in touch"

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 8 - Handout #5

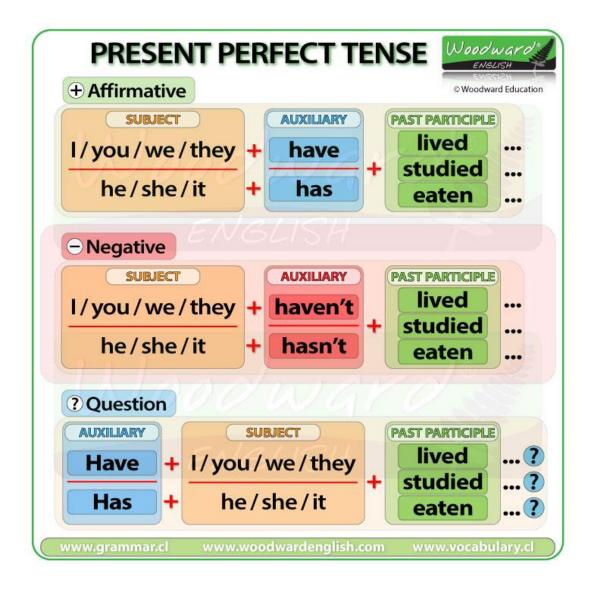


Instructions: In this post-task, you will learn about the present perfect tense to talk about personal, academic, and professional experiences and achievements. To do so, complete the steps in this handout.



1. Watch this video until the minute 3 and 5 seconds (3:05): <u>https://www.youtube.com/watch?v=5jFgiS4mvyc&ab_channel=EasyT</u> <u>eaching</u> **2.** Complete the chart below with the correct form of the verb. Follow the example.

Base Form	Simple Past	Past Participle
know	Knew	known
		met
	was/were	
have		
		lived
		taken
	Attended	
study		
give		
		done



3. Watch this next video:

https://www.youtube.com/watch?v=_5z9Y3OWodA&ab_channel=PaperEn glish-EnglishDanny **4.** Complete the following statements and questions with the correct form of the present perfect of the verb in parenthesis. Follow the example.

e.g.: A. he university yet? (finish) A. <u>Has</u> he <u>finished</u> university yet?
A you ever a conference before? (attend)
B. I never to an international conference yet. (be)
C. I already from college. (graduate)
D. you ever a speech in front of a large audience? (give)
E. Eddie never patients with acute stroke. (treat)
F. Where you? (work)
G. you Luz Denia? She's my colleague. (meet)
 H you ever with other colleagues on research? (collaborate)

5. Write 5 questions with the present perfect to ask a fellow colleague about his/her personal, academic, and professional experiences and achievements. Follow the example.

	e.g. A. <u>Have you ever done research?</u> B. <u>Have you ever been to other types of conferences?</u>
А.	
B.	
C.	
D.	
E.	

Use	eful Expressions
 Ok / So / Well, go ahead. Ask me the first question. What is your question #2? Continue with the following/next question, please. 	
 Oh, I see. Wow! That's very interesting! Really? Tell me more. 	 What about you? / And you? What makes you say that? Can you expand on that, please? What do you mean by that?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 8 - Handout #5 - Answer Key



2) Complete the chart below with the correct form of the verb. Follow the example.

Base Form	Simple Past	Past Participle
know	Knew	known
meet	<u>Meet</u>	met
be	was/were	<u>been</u>
have	Had	<u>had</u>
live	Lived	lived
<u>take</u>	<u>Took</u>	taken
<u>attend</u>	Attended	<u>attended</u>
study	<u>Studied</u>	<u>studied</u>
give	<u>Gave</u>	<u>given</u>
do	Did	done

4) Complete the following statements and questions with the correct form of the present perfect of the verb in parenthesis. Follow the example.

e.g.: **A.** <u>he</u> university yet? (finish) **A.** <u>Has</u> he <u>finished</u> university yet?

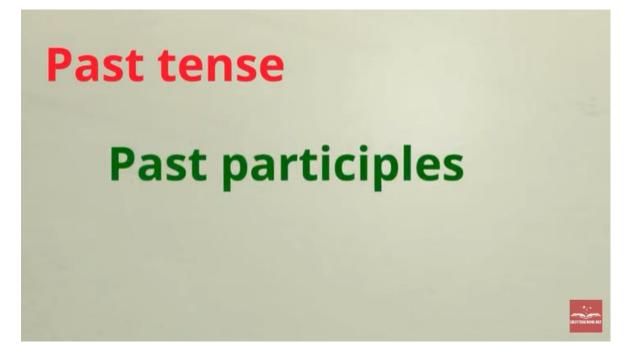
A. <u>Have</u> you ever <u>attended</u> a conference before? (attend)

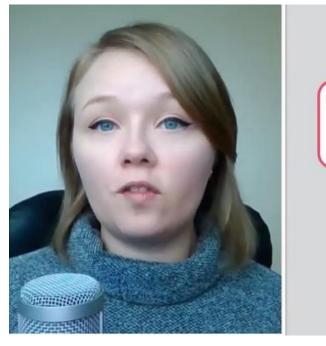
- B. I have never been to an international conference yet. (be)
- C. I have already graduated from college. (graduate)
- D. <u>Have you ever given a speech in front of a large audience?</u> (give)
- E. Eddie <u>has</u> never <u>treated</u> patients with acute stroke. (treat)
- F. Where <u>have you</u> worked? (work)
- G. <u>Have you met</u> Luz Denia? She's my colleague. (meet)
- H. <u>Have you ever collaborated</u> with other colleagues on research? (collaborate)

5) Write 5 questions with the present perfect to ask a fellow colleague about his/her personal, academic, and professional experiences and achievements. Follow the example. <u>Answers vary.</u>

A. <u>Have you ever done research?</u>

- B. Have you ever been to other types of conferences?
- C. <u>Have you ever attended a conference before?</u>
- D. Have you ever been a speaker at a conference?
- E. <u>What novel techniques have you used to treat your patients?</u>





PRESENT PERFECT FOR EXPERIENCE AND ACHIEVEMENTS University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 9 - Handout #1



Instructions: Talk about the structure of a conversation at a conference for physical therapists. Discuss the following questions with your partners.

Scenario: At a conference

1. How do you start a conversation with someone you are meeting for the first time? Give examples.

- I start the conversation by saying my name. For example: "Hi, my name is Eddie González. Nice to meet you."
- 2. What is the purpose of starting a conversation? Give examples.

3. What speaking strategies should you use to meet your purpose? Give examples.

4. How do you finish the conversation? Give examples.

5. Is there anything else you can add to the conversation?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 9 - Handout #1- Answer Key



Instructions: Talk about the structure of a conversation at a conference for physical therapists. Discuss the following questions with your partners. **Answers vary.**

Scenario: At a conference

1. How do you start a conversation with someone you are meeting for the first time? Give examples.

• I start the conversation by **saying my name**. For example: **"Hi**, **my name is Eddie González. Nice to meet you."**

2. What is the purpose of starting a conversation? Give examples.

 I would start to talk to other attendees in order to find information about new treatments to improve movement. For example: "What techniques have you used to improve your patients' movement"?

3. What speaking strategies should you use to meet your purpose? Give examples.

- I think we should use expressions to show interest. For example: "That sounds very interesting, can you expand a little bit more on that?
- 4. How do you finish the conversation? Give examples.
 - I finish the conversation by saying good-bye to the person. For example: "It's been my pleasure talking to you, but I have to go."
- 5. Is there anything else you can add to the conversation?
 - I think it is also important to ask about the person's contact information.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 9 - Handout #2



Instructions: In this post-task, you will learn about the differences between the present perfect and the simple past. To do so, complete the steps in this handout.



1. Watch this video: <u>https://www.youtube.com/watch?v=tLaiUarjNj8&ab_channel=lingua</u> <u>marina</u> 2. Complete the following statements with the correct verb tense of the verb in parenthesis. Use the present perfect or the simple past accordingly. Follow the example.

e.g.: A. He _____ this topic many times. (*present*) A. He <u>has presented</u> this topic many times. (*present*)

A. I _____ an international conference. Hopefully I will do so very soon. (attend, never)

- B. He looks very happy. What _____ you ____ to him? (say)
- C. César _____ neurotherapy to treat his patients. (**use**)
- D. Grettel and Catalina _____ many interesting questions to the speakers in last year's conference at UCR. (**ask**)
- E. _____ you _____ my colleague Angélica? She is from Costa Rica. (*meet*)

3. Go to Flipgrid to record yourself answering the questions below: <u>https://flip.com/4258a780</u>. Remember to use both the **present perfect** and the **simple past** in your answers depending on the information from the questions.

1. Have you graduated from university? If so, when did you graduate?

2. Where have you worked? How was your last work experience?

3. Have you attended conferences before? What were they about?

4. What types of skills have you recently learned? Where did you learn them?

5. Have you collaborated on research before? If so, what were the topics about?



Instructions:

2) Complete the following statements with the correct verb tense of the verb in parenthesis. Follow the example.

e.g.: A. He _____ this topic many times. (present) A. He has presented this topic many times. (present)

A. I <u>have never attended</u> an international conference. Hopefully I will do so very soon. (*attend, never*)

- B. He looks very happy. What <u>did you</u> say to him? (say)
- C. César has used neurotherapy to treat his patients. (use)
- **D.** Grettel and Catalina <u>**asked**</u> many interesting questions to the speakers in last year's conference at UCR. (**ask**)
- E. <u>Have you met</u>my colleague Angélica? She is from Costa Rica. (meet)



Oct 4, 2022

Present Perfect vs Simple Past

🖸 2 💿 4 💭 1 🕒 0.1 hours of discussion

1. Have you graduated from university? If so, when did you graduate?

2. Where have you worked? How was your last work experience?

3. Have you attended conferences before? What were they about?

4. What types of skills have you recently learned? Where did you learn them?

5. Have you collaborated on research before? If so, what were the topics about?



PLANTAR FASCIITIS



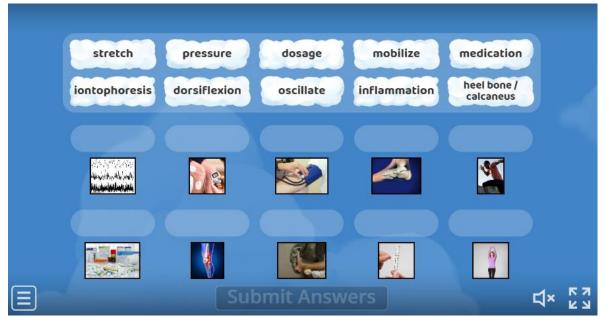
WHAT IS THIS CONDITION ABOUT?



HOW IS PLANTAR FASCIITIS TREATED?







University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 10 - Handout #1



Instructions: 1) Read the following information about discourse markers.

Discourse Markers

Discourse markers are used to organize what we are saying using words and phrases to connect ideas, facilitating the transition between them.

 For giving examples There is the use of iontophoresis. One of the treatment options that we have for plantar fasciitis is to actually 		For listing The plantar fascia is comprised of three
-		 bands of tissue. There's quite a few treatment options for plantar fasciitis. There are several different manual therapy techniques. There's also various stretches and exercises that can actually help as well.
For generalizing	For sequencing	For indicating time
 by and large 	• so • then • next	todayrecentlynow

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 10 - Handout #1



Instructions: 2) You are going to watch the first 2 minutes of a video called "*Plantar Fasciitis: Treatment by a Physical Therapist.*" Highlight all the discourse markers you hear in the video. <u>Follow the example.</u>

 For giving examples There is the use of iontophoresis. One of the treatment options that we have for plantar fasciitis is to actually mobilize the calcaneus. Another treatment option that we have for treating plantar fasciitis is to increase dorsiflexion range of motion. This is a typical runner stretch or calf stretch. Another version of this stretch is to simply bend the knee. That will stretch a different part of the calf. 		 For listing The plantar fascia is comprised of three bands of tissue. There's quite a few treatment options for plantar fasciitis. There are several different manual therapy techniques. There's also various stretches and exercises that can
		actually help as well.
For generalizing by and large 	For sequencing so then next 	For indicating time today recently now

Useful Expressions

- What discourse markers did you highlight?
 - I think I heard "by and large."
 - Me too / I heard that one too.
- I didn't hear that one / I think the speaker didn't say that one.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 10 - Handout #1-Answer Key



Instructions: 2) You are going to watch the first 2 minutes of a video called "*Plantar Fasciitis: Treatment by a Physical Therapist.*" Highlight all the discourse markers you hear from the video. <u>Follow the example.</u>

 For giving examples There is the use of iontophoresis. One of the treatment options that we have for plantar fasciitis is to actually mobilize the calcaneus. Another treatment option that we have for treating plantar fasciitis is to increase dorsiflexion range of motion. This is a typical runner stretch or calf stretch. Another version of this stretch is to simply bend the knee. That will stretch a different part of the calf. 		 For listing The plantar fascia is comprised of three bands of tissue. There's quite a few treatment options for plantar fasciitis. There are several different manual therapy techniques. There's also various stretches and exercises that can actually help as well.
For generalizing by and large 	For sequencing so then next 	For indicating time today recently now

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 10 - Handout #2



Instructions: 1) Read the following items and make predictions based on your knowledge. Highlight the answer that you think is more likely to be correct.

1. What type of people have higher chances of suffering from plantar fasciitis?

- a. sedentary people
- b. children
- c. athletes
- 2. What is the plantar fascia composed of?

a. an inner band of tissue, a middle band of tissue, and an outer band of tissue

- b. an interior muscle and an exterior muscle
- c. the superficial palmar branch, the abductor, and the septum
- 3. Which part of the plantar fascia is responsible for causing the pain?
- a. Baxter's nerve
- b. the calcaneus
- c. the interior band
- 4. What is the most common symptom for people with plantar fasciitis?
- a. heel pain along the border of the heel
- b. restricted mobility of the toes
- c. pain along the Achilles tendon

5. How do patients describe the pain throughout the day? Select the only **TRUE** option.

a. The pain is worse when patients wake up and put their feet on the ground, adding weight on the heel.

- b. When patients start walking, the pain gets even worse.
- c. Toward the end of the day, it tends to get better.

6. What are the names of the 3 treatments explained by Dr. Kyle in the video?

- a. splinting, massages, surgery
- b. rest, plaster cast, medication
- c. massages, iontophoresis, various stretches and exercises

Useful Expressions

- What option did you select for **#1**?
- I think / Maybe the correct option is "athletes."
- I agree with you / I think that's what we heard in the video.
- I disagree with you / I think the speaker didn't say that one.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 10 - Handout #2-Answer Key



Instructions: 1) Read the following items. Choose the answer you think is more likely to be the correct one.

- 1. What type of people have higher chances of suffering from plantar fasciitis?
- a. sedentary people
- b. children
- c. athletes
 - 2. What is the plantar fascia composed of?

a. an inner band of tissue, a middle band of tissue, and an outer band of tissue

- b. an interior muscle and an exterior muscle
- c. the superficial palmar branch, the abductor, and the septum
 - 3. Which part of the plantar fascia is responsible for causing the pain?
- a. Baxter's nerve
- b. the calcaneus
- c. the interior band

4. What is the most common symptom for people with plantar fasciitis?

- a. heel pain along the border of the heel
- b. restricted mobility of the toes
- c. pain along the Achilles tendon

5. How do patients describe the pain throughout the day? Select the only **TRUE** option.

a. The pain is worse when patients wake up and put their feet on the ground, adding weight on the heel.

- b. When patients start walking, the pain gets even worse.
- c. Toward the end of the day, it tends to get better.

6. What are the names of the 3 treatments explained by Dr. Kyle in the video?

- a. splinting, massages, surgery
- b. rest, plaster cast, iontophoresis
- c. massages, iontophoresis, various stretches and exercises

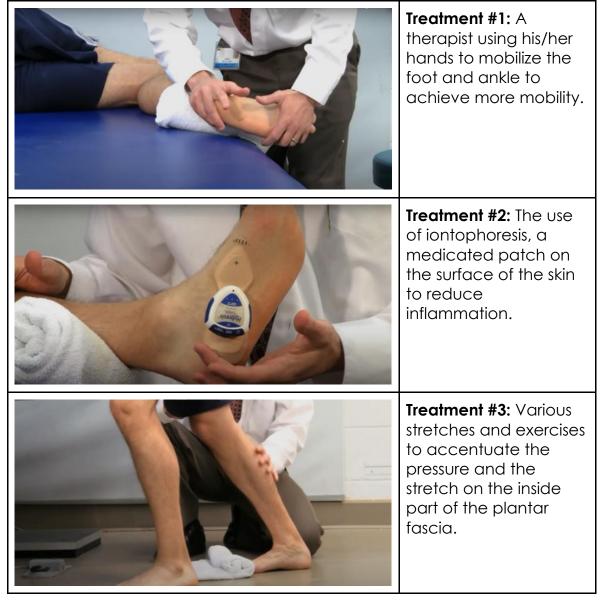


University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 10 - Handout #3



Critical Thinking

Which of these treatments explained by Dr. Kyle in the video will you be more likely to apply to your patients? Why?



Useful Expressions
 I would probably / absolutely use Treatment 1 because it can reduce pain and improve circulation. I agree with Catalina because most of my patients prefer the massage over a machine transmitting electricity.
 I think iontophoresis is the best treatment because it can help the patient return to normal activity quickly and safely after an injury. I disagree with Angélica because stretching keeps the tendons flexible, strong, and healthy, and we need that flexibility to keep a range of motion in the heel.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 10 - Handout #4



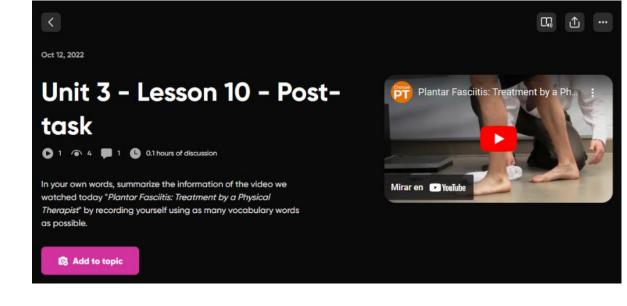
Instructions: Go to Flip to record yourself summarizing the video we watched today, "*Plantar Fasciitis: Treatment by a Physical Therapist*": <u>https://flip.com/a21f952f</u>. When recording, try to use discourse markers (**Handout #1**) and as many vocabulary words as possible from the list below:

- stretch
- pressure
- dosage
- mobilize
- medication

- iontophoresis
- dorsiflexion
- oscillate
- inflammation
- heel bone / calcaneus

Useful Expressions

- Today I'm going to briefly explain how to treat patients with plantar
 fasciitis.
- There is the use of iontophoresis, a patch we put on the surface of the skin to reduce the inflammation of the foot.
 - We can add **pressure** to the **heel bone** to relieve pain.
 - Stretches can actually help to mobilize the rear part of the foot.
 - Thank you for your attention / watching. Bye!



University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #1

Instructions: Discuss the following questions with your partner. You may take notes about your discussion, so later you can share with the entire class.

1. What is a stroke? What can cause a stroke?

A stroke is a medical condition that happens when ...

- 2. What is Pediatric Physical Therapy (PT)?
 - Pediatric PT helps kids improve their ...
 - Pediatric PT focuses on developing ...

3. Have you worked with patients recovering from a stroke / children before? If so, how was the experience?

- Yes, I have. / No, I haven't.
- Working with patients recovering from a stroke is/was challenging because ...
- Working with children is/was difficult because ...







University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #1-Answer Key



Instructions: Discuss the following questions with your partner. You may take notes about your discussion, so later you can share with the entire class. **Answers vary.**

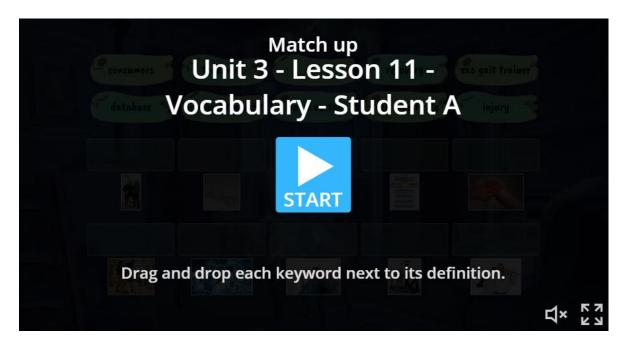
1. What is a stroke? What can cause a stroke?

A stroke is a medical condition that happens when <u>something blocks blood</u> <u>supply to part of the brain or when a blood vessel in the brain bursts.</u>

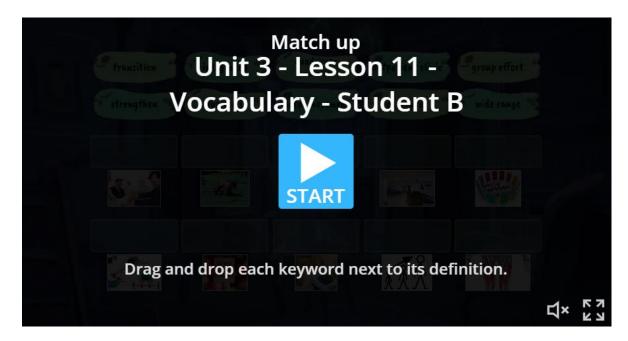
- 2. What is Pediatric Physical Therapy (PT)?
 - Pediatric PT helps kids improve their <u>range of motion</u>, <u>strength</u>, <u>flexibility</u>, <u>and movement patterns</u>. <u>They help make</u> <u>everyday activities easier for kids</u>.
 - Pediatric PT focuses on developing <u>mobility</u>, <u>strength</u>, <u>flexibility</u>, <u>balance</u>, <u>coordination</u> and <u>endurance</u> in <u>order</u> for a <u>child to be</u> <u>successful at home</u>, in the <u>community</u> and in <u>school</u>.

3. Have you worked with patients recovering from a stroke / children before? If so, how was the experience?

- Yes, I have. / No, I haven't.
- Working with patients recovering from a stroke is challenging because <u>some patients need a long period of rehabilitation before</u> <u>they can recover their former independence, while many never fully</u> <u>recover and need ongoing support after their stroke.</u>
- Working with children was **difficult** because <u>I had to incorporate age-</u> <u>appropriate and child-friendly strategies to keep my patient engaged</u> <u>and motivated during the therapy sessions.</u>









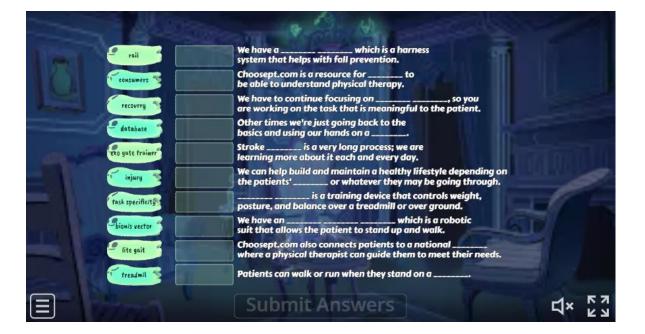
Match up Unit 3 - Lesson 11 - Vocabulary in Context- Student A



ain a healthy lifestyle depending on tever they may be going through. I device that controls weight, treadmill or over ground.

Drag and drop each keyword next to its corresponding sentence. You can't repeat any words.

Ц× Ки

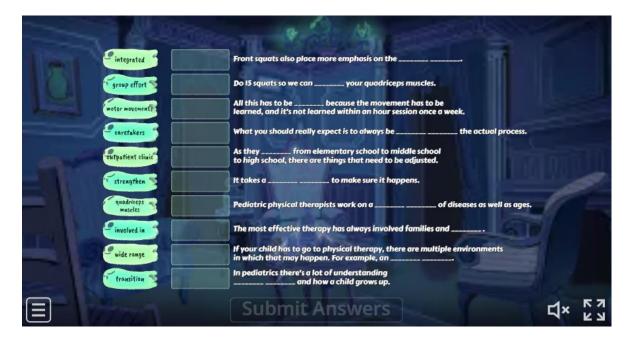


Match up Unit 3 - Lesson 11 - Vocabulary in Context- Student B



Drag and drop each keyword next to its corresponding sentence. You can't repeat any words.

Ц× Ки





Instructions: Work with your partner. Play the video <u>twice</u>, and take as many notes as you can for the guiding questions below.



- What kind of process is stroke recovery? What has research on stroke recovery shown?
- 2. What is task specificity?

insical Theri

BLIVEWORKSHEETS

3. Erin Sinkfield (the speaker) mentions 5 types of treatment for stroke

recovery. Mention 3 of them, and briefly describe what each is about.

4. What is Choosept.com? Is there anything similar to Choosept.com for

Costa Rican patients?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #2 - Student B



Instructions: Work with your partner. Play the video twice, and take as many

notes as you can for the guiding questions below.



1. Is Pediatric Physical Therapy exclusive for children? Why / Why not?

2. "I think the most effective therapy has always involved families and caretakers." Do you agree with Tina Duong (the speaker)? Why / Why not?

LIVEWORKSHEETS

 How can you motivate a child to participate during the therapy sessions?

4. What are the parents' responsibilities when they have a child in

pediatric physical therapy?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #2 - Student A



Instructions: Work with your partner. Play the video <u>twice</u>, and take as many notes as you can for the guiding questions below. <u>https://www.youtube.com/watch?v=s31CglbheoY&ab_channel=ChoosePT</u>

1. What kind of process is stroke recovery? What has research on stroke recovery shown?

2. What is task specificity?

3. Erin Sinkfield (the speaker) mentions 5 types of treatment for stroke recovery. Mention 3 of them, and briefly describe what each is about.

4. What is Choosept.com? Is there anything similar to Choosept.com for Costa Rican patients?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #2 - Student A Answer Key



Instructions: Work with your partner. Play the video <u>twice</u>, and take as many notes as you can for the guiding questions below. <u>Answers vary.</u>

1. What kind of process is stroke recovery? What has research on stroke recovery shown?

<u>Stroke recovery is a very long process. Research has shown that it is an</u> <u>illness most physical therapists have worked with for years and still needs to</u> <u>be paid attention to.</u>

2. What is task specificity?

It means working on a task that is meaningful for the patient's recovery. For example, if a patient wants to get better at walking, then the therapy sessions should aim at strengthening the lower extremities.

Erin Sinkfield (the speaker) mentions 5 types of treatment for stroke recovery. Mention 3 of them, and briefly describe what each is about.
 A. Exo gait trainer: a robotic suit that allows a patient to stand up and walk
 B. Bionis vector: a harness system that helps with fall prevention
 C. Treadmills: for safe walking / to strengthen the lower extremities
 D. Lite gait trainer: a harness system combined with a treadmill
 E. Rail: alternative option for treatment technologies

4. What is Choosept.com? Is there anything similar to Choosept.com for Costa Rican patients? <u>Answers vary for the second question.</u> It is a resource for patients/consumers to get remote assistance to maintain <u>a healthy lifestyle.</u>

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #2 - Student B



Instructions: Work with your partner. Play the video <u>twice</u>, and take as many notes as you can for the guiding questions below. <u>https://www.youtube.com/watch?v=Ock2HTMkP9w&t=19s&ab_channel=C hoosePT</u>

1. Is Pediatric Physical Therapy exclusive for children? Why / Why not?

2. "I think the most effective therapy has always involved families and caretakers." Do you agree with Tina Duong (the speaker)? Why / Why not?

3. How can you motivate a child to participate during the therapy sessions?

4. What are the parents' responsibilities when they have a child in pediatric physical therapy?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #2 - Student B Answer Key



Instructions: Work with your partner. Play the video <u>twice</u>, and take as many notes as you can for the guiding questions below. <u>Answers vary.</u>

1. Is Pediatric Physical Therapy exclusive for children? Why / Why not? No, it isn't. It could range from working with preterm infants in the newborn intensive care unit (NICU) to 25 year olds and working on how they are going to transition into school, college, or the workforce.

2. "I think the most effective therapy has always involved families and caretakers." Do you agree with Tina Duong (the speaker)? Why / Why not? <u>Answers vary.</u>

3. How can you motivate a child to participate during the therapy sessions?

With kids, you have to be an animal, you have to jump, you have to play games. You have to integrate activities that kids consider fun.

4. What are the parents' responsibilities when they have a child in pediatric physical therapy?

<u>They have to always be involved in the actual process. Parents should</u> <u>always be with their kids in the therapy sessions because most of the</u> <u>treatment takes place at home.</u>

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #3 - Student A



Instructions: You will be working on the video you didn't watch in this lesson. Complete the tasks in this handout with the following link: https://www.youtube.com/watch?v=Ock2HTMkP9w&t=19s&ab_channel=C hoosePT

1. Write at least 1 example of discourse markers for the following categories. If needed, review discourse markers in <u>lesson 10</u>.

For giving examples:
For listing:
For indicating time:
For sequencing:
For adding:

2. Categorize the sentences below according to their language function. <u>Follow the example.</u>

Language Function				
Sentences with a modal to express possibility/probability	Sentences with a modal-like phrase to express necessity	Sentences with a modal to show obligation, give recommendations or even an opinion		
Example: I may <u>go</u> to the lecture.	Example: I need to <u>go</u> to the lecture.	Example: I should <u>go</u> to the lecture.		
		<u>1. Most of the therapy that</u> <u>should happen will not work</u> <u>within the treatment, but</u> <u>after once you go home.</u>		

- 1. <u>Most of the therapy that should happen will not work within the</u> <u>treatment, but after once you go home.</u>
- 2. How they move **may** change, or what they need **may** change.
- With kids you <u>have to</u> be an animal, you <u>have to</u> be whatever it is you have to do, you <u>have to</u> jump, you <u>have to</u> integrate that into what kids consider fun.
- 4. With adults you **could** say "OK, do 15 wall squats, and we're gonna strengthen the quad muscles."
- 5. If your child's to go to physical therapy, there are multiple environments in which that **may** happen.
- 6. There are things that **<u>need to</u>** be adjusted.
- 7. One <u>could</u> be at school, the other <u>could</u> be at home, and the other <u>can</u> be in a hospital.
- 8. You **should** always be in the therapy session.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #3 - Student A Answer Key



Instructions: You will be working on the video you didn't watch in this lesson. Complete the tasks in this handout with the following link: https://www.youtube.com/watch?v=Ock2HTMkP9w&t=19s&ab_channel=C hoosePT

1. Write at least 1 example of discourse markers for the following categories. If needed, review discourse markers in <u>lesson 10</u>.

For giving examples: One could be at school, the other could be at home, and the other can be in a hospital.

For listing: If your child's to go to physical therapy, <u>there's</u> <u>multiple environments in which that may happen</u>.

For indicating time: <u>as they get older</u>; <u>as they transition from</u> elementary school <u>to</u> middle school.

For sequencing: so

For contrasting: instead

2. Categorize the sentences below according to their language function. Follow the example.

Language Function			
Sentences with a modal to express possibility/probability	Sentences with a modal-like phrase to express necessity	Sentences with a modal to show obligation, give recommendations or even an opinion.	
 How they move may change, or what they need may change. With adults you could say "OK, do 15 wall squats, and we're gonna strengthen the quad muscles." If your child's to go to physical therapy, there are multiple environments in which that may happen. One could be at school, the other could be at home, and the other can be in a hospital 	 With kids you have to be an animal, you have to be whatever it is you have to do, you have to jump, you have to integrate that into what kids consider fun. There are things that need to be adjusted. 	 Most of the therapy that should happen will not work within the treatment, but after once you go home. You should always be in the therapy session. 	

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #3 - Student B



Instructions: You will be working on the video you didn't watch in this lesson. Complete the tasks in this handout with the following link: <u>https://www.youtube.com/watch?v=s31CglbheoY&ab_channel=ChoosePT</u>

1. Write at least 1 example of discourse markers for the following categories. If needed, review discourse markers in <u>lesson 10</u>.

For giving examples:
For listing:
For indicating time:
For sequencing:
For adding:

2. Categorize the sentences below according to their language function. A sentence might fit into more than one category. <u>Follow the example.</u>

Language Function			
Sentences with a modal to express possibility/impossibility	Sentences with a modal-like phrase to express necessity	Sentences with a modal / modal-like phrase to express ability	
Example: I may <u>go</u> to the lecture.	Example: I need to <u>go</u> to the lecture.	Example: I can <u>go</u> to the lecture.	
1. <u>When they feel they can't</u> <u>help themselves anymore.</u>			

1. <u>When they feel they can't help themselves anymore.</u>

- 2. If you want to get better at walking, you <u>have to</u> work on walking.
- 3. Physical therapy takes people when they **<u>can't</u>** see the light at the end of the tunnel.
- 4. I **<u>can't</u>** even name all the people that have been a part of this journey.
- 5. We have to continue to focus on stroke recovery.
- 6. Choosept.com is a resource for consumers to be able to understand physical therapy.
- 7. If anybody <u>can</u> do it, Russ <u>can</u> do it.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 11 - Handout #3 - Student B Answer Key



Instructions: You will be working on the video you didn't watch in this lesson. Complete the tasks in this handout with the following link: https://www.youtube.com/watch?v=s31CglbheoY&ab_channel=ChoosePt

 Write at least 1 example of discourse markers for the following categories. If needed, review discourse markers in <u>lesson 10</u>. <u>Answers</u> <u>vary.</u>

For giving examples: <u>we have an</u> exo gait trainer which is a robotic suit that allows the patient to stand up and walk

For listing: there's lots of technology options

For indicating time: <u>each and every day</u>

For sequencing: so

For adding: also

2. Categorize the sentences below according to their language function. A sentence might fit into more than one category. <u>Follow the example.</u>

Language Function		
Sentences with a modal to express possibility/impossibility	Sentences with a modal-like phrase to express necessity	Sentences with a modal / modal-like phrase to express ability
 <u>When they feel they can't</u> <u>help themselves anymore.</u> <u>Physical therapy takes</u> <u>people when they can't see</u> <u>the light at the end of the</u> <u>tunnel.</u> 	 2. If you want to get better at walking, you have to work on walking. 5. We have to continue to focus on stroke recovery. 	 4. I <u>can't</u> even name all the people that have been a part of this journey. 6. Choosept.com is a resource for consumers <u>to be able to</u> understand physical therapy. 7. If anybody <u>can</u> do it, Russ <u>can</u> do it.

Look at the pictures. Read the hints. Guess the words!



- 1. It's a type of therapy in water.
- 2. It's one of Mariela's
- professional interests.

hydrotherapy





- 3
- It's the name of a tool to help the patient float for specific exercises in the pool.
- 2. It has the name of a type of pasta.

noodles



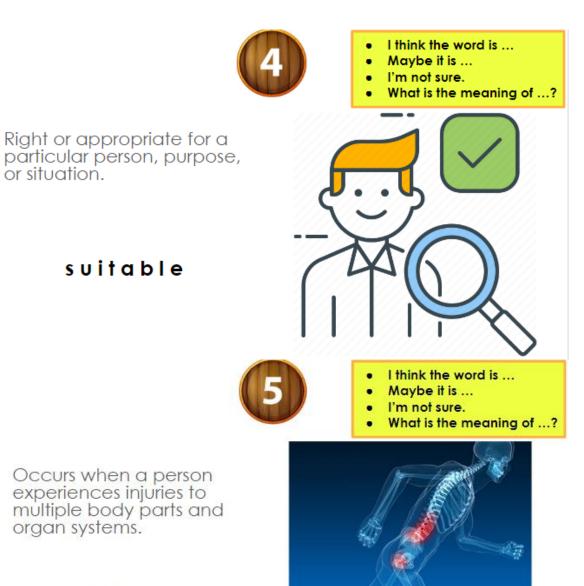
Maybe it is ...

What is the meaning of ...?

I'm not sure.

.

.



polytrauma



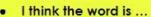


I think the word is ...

Maybe it is ... I'm not sure.

It's a way of finding out if people have a higher chance of having a health problem, so that early treatment can be offered or information given to help them make informed decisions.

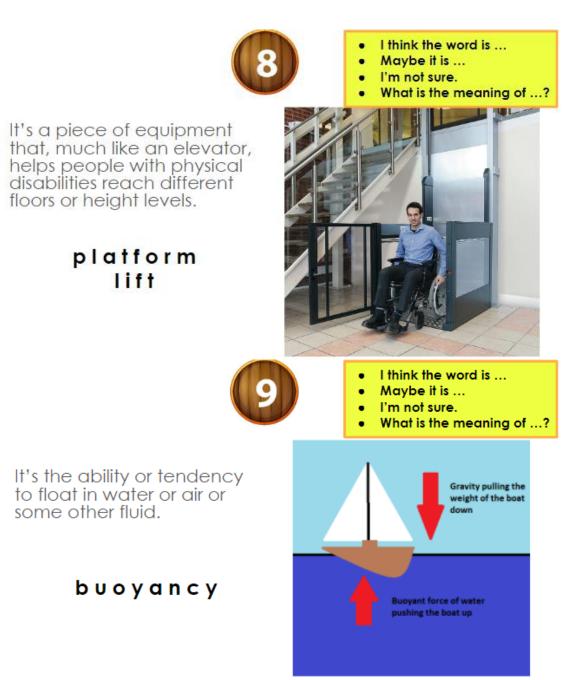
screening



- Maybe it is ...
- I'm not sure.
- . What is the meaning of ...?

It's a patient transferring solution that is mounted at a high-level overhead.

> tracking hoist





It's any abnormal enlargement of a body part. It is typically the result of inflammation or a buildup of fluid.

e d e m a

swelling

- 481
- I think the word is ...
- Maybe it is ...
- I'm not sure.
- What is the meaning of ...?





University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 12 - Handout #1



Instructions: In this pos-task you will watch an educational video called "Physical Therapy for Shoulder Pain." Complete the steps in this handout.

- 1. Read the questions below.
- 2. Next, play the video once: <u>https://www.youtube.com/watch?v=Hr-</u> 9biVEEYo&t=1s&ab_channel=PhysicalTherapyatSt.Luke%27s.
- 3. Then, answer the questions.

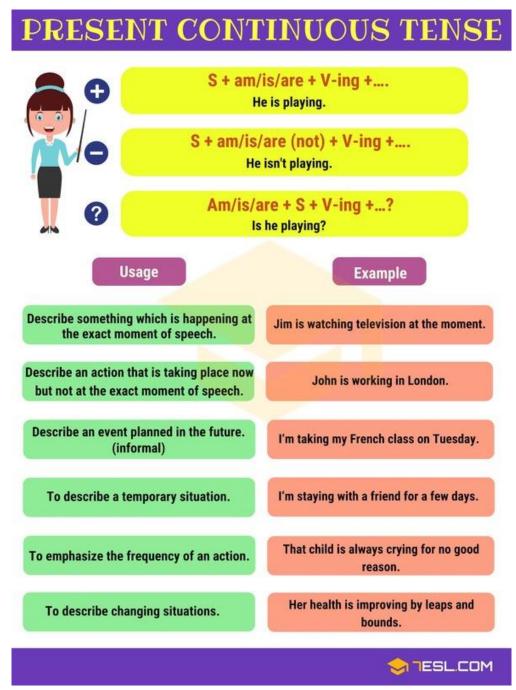
I.Vocabulary

a. What is regional interdependence? Briefly explain this concept using your own words.

- b. Instructing the patient to cross his arms on the chest and then lean backwards is used to ...
- c. Instructing the patient to raise his arm toward the ceiling and then lower his arm is used to assess how the shoulder is moving because ...

II. Grammar

Use the **present continuous** and **be going to** to explain to patients the steps of the procedures during the therapy session.



Form: Be going to					
Subject	am/is/are		Going to	Verb	
1	am	not	going to	open	the door.
You	are		going to	meet	Jane tonight.
He	is		going to	be	at school tomorrow.
She	is	not	going to	clean	the floor.
It	is		going to	be	there tomorrow.
They	are	not	going to	make	dinner.
We	are		going to	make	some sandwiches.
When asking a question				1	
Are	You		going to	meet	Jane tonight?
Is	he	not	going to	do	his homework?

Examples in the video:

- What we're doing is we're checking the mobility of each joint.
- First, we are going to assess the thoracic area.

- Read the statements below. You are going to organize them (1-9) in the correct order as you listen to them in the video.
- Play the video twice (<u>maximum three times</u>): <u>https://www.youtube.com/watch?v=Hr-</u> <u>9biVEEYo&t=1s&ab_channel=PhysicalTherapyatSt.Luke%27s</u>.
- **3.** Follow the example.

____ I want you to raise your arm in front like <u>you're reaching</u> up towards the ceiling.

<u>**I'm going to use**</u> my hand and guide the shoulder blade.

- 1 First, we're going to assess the thoracic area.
- <u>I'm just going to have</u> you cross your arms "like this" for me.
- <u>We're going to look</u> at how the shoulder is moving.
- ____ <u>I'm going to do</u> a joint mobilization to help improve the

mechanics of that joint.

- Now, <u>I'm going to assess</u> the mobility of this joint.
- <u>I'm just going to have</u> you lean backwards.
- ____ What we're doing is we're checking the mobility of each joint.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 12 - Handout #1-Answer Key



Instructions: In this pos-task you will watch an educational video called "*Physical Therapy for Shoulder Pain*." Complete the steps in this handout.

- 1. Read the questions below.
- 2. Next, play the video once: <u>https://www.youtube.com/watch?v=Hr-9biVEEYo&t=1s&ab_channel=PhysicalTherapyatSt.Luke%27s</u>.
- **3.** Then, answer the questions.

I.Vocabulary. <u>Answers vary.</u>

a. What is regional interdependence? Briefly explain this concept using your own words.

<u>Regional interdependence is the concept that seemingly unrelated</u> <u>impairments in a remote anatomical region may contribute to, or be</u> <u>associated with, the patient's primary complaint.</u>

 b. Instructing the patient to cross his arms on the chest and then lean backwards is used to ...
 assess the thoracic area / check the mobility of the joints in the

thorax.

c. Instructing the patient to raise his arm toward the ceiling and then lower his arm is used to assess how the shoulder is moving because ... when the arm is moving, the shoulder blade should be moving in conjunction with the shoulder. Read the statements below. You are going to organize them (1-9) in the correct order as you listen to them in the video.

<u>8</u> I want you to raise your arm in front like **you're reaching** up towards the ceiling.

9 I'm going to use my hand and guide the shoulder blade.

<u>1</u> First, <u>we're going to assess</u> the thoracic area.

<u>**2**</u> <u>**I'm just going to have**</u> you cross your arms "like this" for me.

7 We're going to look at how the shoulder is moving.

<u><u>6</u> <u>I'm going to do</u> a joint mobilization to help improve the mechanics of that joint.</u>

<u><u>5</u> Now, <u>I'm going to assess</u> the mobility of this joint.</u>

<u>3 I'm just going to have you lean backwards.</u>

4 What we're doing is we're checking the mobility of each joint.



University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 13 - Handout #1



Instructions: Discuss the following questions with your partner. You may take notes about your discussion, so later you can share with the entire class.



1. What are senior patients? Describe them briefly (physical appearance, age, and others).

- Seniors are people older than ...
- Their bone and mass density is more fragile than ...

2. Have you ever worked with senior patients? If so, how was the experience?

- Yes, I have. / No, I haven't.
- Working with senior patients was challenging because ...

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 13 - Handout #1



3. What special needs do senior patients have? How do physical therapists meet those needs?

- Some senior patients can't lift a lot of weight, some can't
- Physical therapists carefully design sessions ...

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 13 - Handout #1-Answer Key



Instructions: Discuss the following questions with your partner. You may take notes about your discussion, so later you can share with the entire class.

1. What are senior patients? Describe them briefly (physical appearance, age, and others).

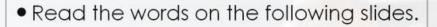
- Seniors are people older than 65 years old.
- Their bone and mass density is more fragile than younger patients, so they move more slowly and carefully.

2. Have you ever worked with senior patients? If so, how was the experience?

- Yes, I have. / No, I haven't.
- Working with senior patients was difficult because they move slowly, so you have to be very patient with them.

3. What special needs do senior patients have? How do physical therapists meet those needs?

- Some senior patients can't lift a lot of weight, some can't run or walk fast, and others are unable to move by themselves.
- Physical therapists carefully design sessions according to their patients' needs, so the treatments they use aren't painful or uncomfortable, and the patient can recover successfully.



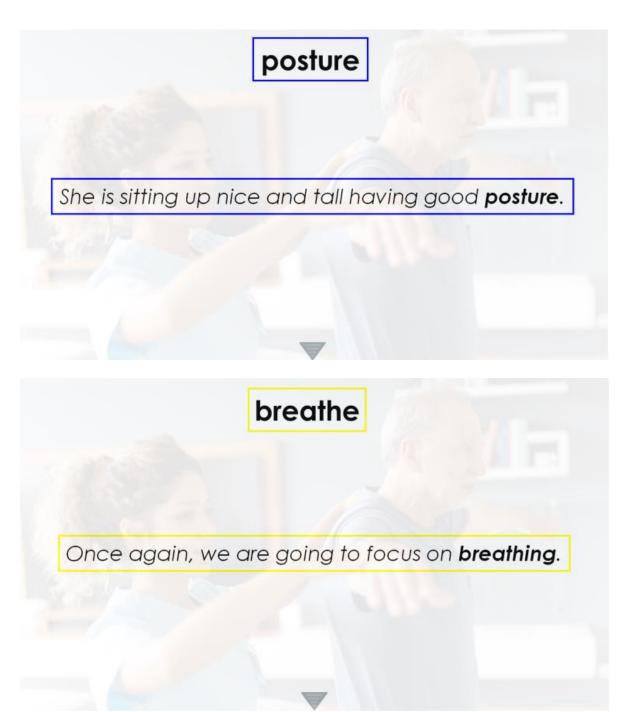
 If you know the meaning, do the action with your body.

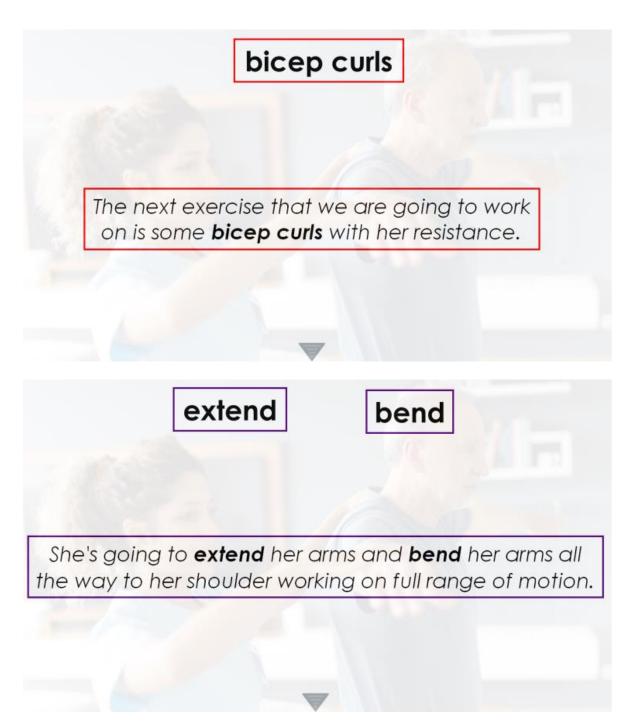
• #1 will be used as an example.



arm circles

The first thing that we are going to work on is just some gentle **arm circles**.



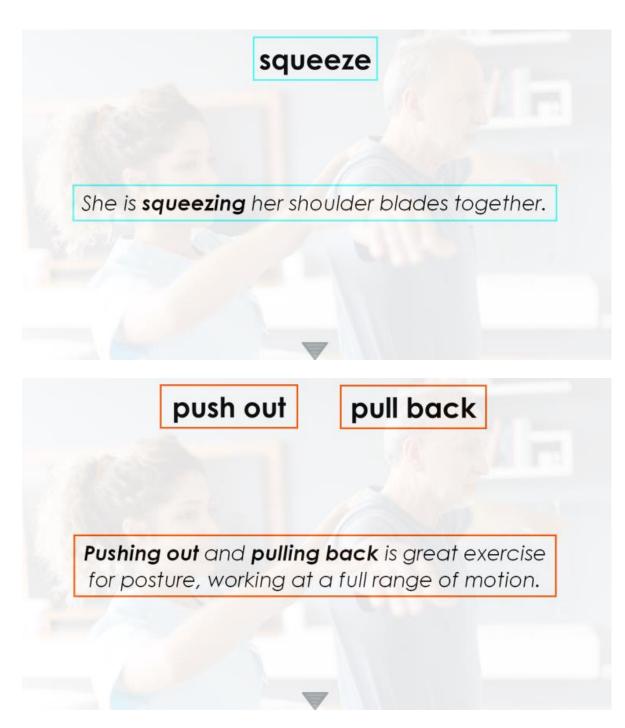


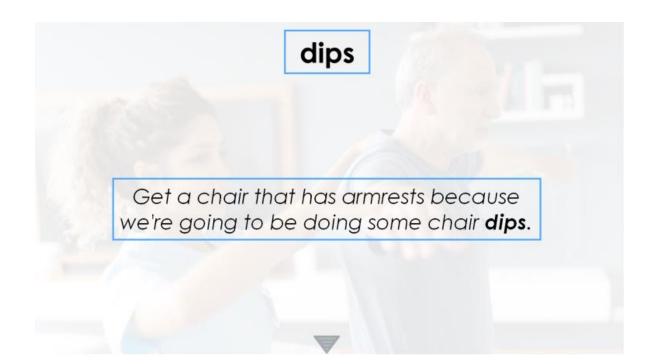
count out loud

We are going to focus on **counting out loud**; **counting out loud** also reinforces breathing.

straighten (something) all the way out

She is going to **straighten** her arms **all the way out** and then pull her elbows all the way back.







University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 13 - Handout #2



Instructions: In this post-task you will continue working on your presentation for next week. To do so, watch the video below and try to incorporate some of the tips in your own presentation.

https://www.youtube.com/watch?v=grJ0FbpfvOw&ab_channel=HubSpot Marketing

1. Which tips do you find the most useful for your presentation this coming week? Why?

2. How are you going to make use of those tips in your own presentation?

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 3 - Lesson 12 - Handout #2-Answer Key



Instructions: In this post-task you will continue working on your presentation for next week. To do so, watch the video below and try to incorporate some of the tips in your own presentation.

https://www.youtube.com/watch?v=grJ0FbpfvOw&ab_channel=HubSpot Marketing

 Which tips do you find the most useful for your presentation this coming week? Why? <u>Answers vary.</u>

Outlining your content and formatting your content for maximum impact are the most useful tips because my presentation is organized and easy to follow. Also, by having 1 or 2 images per slide and keywords that I will need to remember, my presentation is appealing to my audience.

2. How are you going to make use of those tips in your own presentation? <u>Answers vary.</u>

After researching on my chosen topic, I am going to draft my main ideas along with their corresponding examples. Next, I will create slides with headings, subheading, and keywords from the outline I have already prepared. Finally, I will find appropriate pictures to help the audience visualize my points.



University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Final Oral Presentations - Lesson 14 - Handout #1



Instructions: Discuss the following questions with your partner. You may take notes about your discussion, so later you can share with the entire class.



- 1. What topic are you going to present today? Why did you choose it?
 - Today, I'm going to talk about Watsu.
 - I chose to talk about Watsu because ...

2. How are you going to deliver your presentation? Provide a brief overview of the points you will be addressing.

- First, I'm going to start with ...
- Next, I'm going to continue my presentation with / by ...

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Final Oral Presentations - Lesson 14 - Handout #1



- **3.** Are you going to follow any presentation strategies? If so, which ones? How did they occur to you?
 - Yes, I am. / No, I'm not.
 - I'm going to tell you a personal story...
 - I have shared stories before. / I saw it on last week's video.

< Exit	`	English for Physic	al Therapy - Review		* ×
Final	THE COURSE	GRAMMAR	VOCABULARY	PRONUNCIATION	
Factile	\$100	\$100	\$100	\$100	
	\$200	\$200	\$200	\$200	
	\$300	\$300	\$300	\$300	
	\$400	\$400	\$400	\$400	
•	\$500	\$500	\$500	\$500	Hints (off)
	* \$0 - WATERMELON	•	\$0 -	+ \$0 - PINEAPPLE	0



× 0 11 THE COURSE for 100 << Exit 5 HELLO, HOW ARE YOU? / GOOD MORNING, Continue » AFTERNOON, OR EVENING. MY NAME IS ... THANK YOU, ENJOY THE CONFERENCE! / I'LL TALK TO YOU SOON. Continue » • Hints 0 D + \$0 POTATO PINEAPPLE

< Exit	English for Physical Therapy - Review						
Final	THE COURSE	GRAMMAR	VOCABULARY	PRONUNCIATION			
Factile	\$100	\$100	\$100	\$100			
	\$200	\$200	\$200	\$200			
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	WATERMELON						

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Final Day of Classes - Lesson 15 - Handout #1



Instructions: Below you can find a collection of mistakes from your final oral presentations. As a class, let's correct all those mistakes!

Grammar	Vocabulary	Pronunciation
<u>by</u> my point of view from	a <u>few</u> information	therapeutic
people <u>are</u> feeling at that moment	ideas <u>of</u> 2 perspectives	paradigm
and then I <u>became</u> super passionate about it	an Indian <u>guy</u>	rehabilitate
he <u>took</u> advantage of that and <u>started</u> his business	good <u>night</u> , <u>my</u> <u>friends</u>	should
when I get to the university	neuroscientific	diabetes

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Final Day of Classes - Lesson 15 - Handout #1 Answer Key



Instructions: Below you can find a collection of mistakes from your final oral presentations. As a class, let's correct all those mistakes!

Grammar	Vocabulary	Pronunciation
by my point of view from my point of view	a <u>few</u> information a little information	therapeutic / <mark>8ɛrə pjutɪk/</mark>
<u>the</u> people <u>is</u> feeling at that moment people are feeling at that moment	ideas <u>of</u> 2 perspectives ideas from 2 perspectives	paradigm /ˈpɛrəˌdaɪm/
and then I <u>become</u> super passionate about it and then I became super passionate about it	an Indian <u>guy</u> <mark>an Indian researcher, therapist</mark>	rehabilitate /ˌ rihəˈbɪlə ˌ teɪt/
he <u>take</u> advantage of that and <u>start</u> his business he took advantage of that and started his business	good <u>night</u> , <u>my friends</u> good evening, dear colleagues	should /ʃʊd/
when I <u>get</u> to the university when I entered the university	neuroscientific (adjective) neuroscientist (noun)	diabetes / <mark>daɪəˈbitiz/</mark>

Appendix H

Universidad de Costa Rica Master's Program in Teaching English as a Foreign Language PF-0311 Professional Practicum Alfaro, G. & Vega, C.													
English for Physical Therapy - Class Roster													
Students	Reading Test	25%	Speaking Test		Listening Quiz 1		Listening Quiz 2		Oral Project	20%	Participation	10%	Final Grade
Student A	76.66	19.165	92	23	80	8	100	10	96	19.2	90	9	88.365
Student B	93.33	23.3325	98	24.5	100	10	95	9.5	90	18	80	8	93.3325
Student C	70	17.5	90	22.5	86.66	8.666	80	8	96	19.2	90	9	84.866
Student D	76.66	19.165	88	22	80	8	80	8	90	18	90	9	84.165
Student E	80	20	90	22.5	100	10	85	8.5	90	18	90	9	88
Student F	66.66	16.665	84	21	66.66	6.666	60	6	90	18	90	9	77.331
Student G	90	22.5	94	23.5	80	8	85	8.5	96	19.2	90	9	90.7

Appendix I

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 6 - Handout #4



Instructions: A) Use the **Self-Assessment Rubric** below to analyze your conversation. Check *Strongly Agree*, *Agree*, *Disagree*, or *Strongly Agree* to compare the conversation you created in **Handout #3** with the aspects of the rubric.

Self-Assessment Rubric: Conversation

Aspects:	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The conversation is formal and easy to understand.				
2. The conversation includes various topics (academic, professional, personal info).				
3. The conversation has questions and answers related to the topic of the Unit (yes/no questions, Wh questions).				
4. The conversation has a proper greeting and farewell.				
5. The conversation has well- structured questions and answers (verb tense).				

Instructions: B) Go back to **Handout #3**. Based on your self-evaluation, make all necessary corrections and changes for the final version of your dialogue.

Useful Expressions
 What do you think about aspect #1?
/ What's your opinion about aspect #1 ?
 I agree with aspect #1 because we prepared clear sentences.
 I disagree with aspect #2 because we wrote just a few lines per each.
 I think you're right / I couldn't agree more with you.
 I don't agree with you / I'm not sure.

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 8 - Handout #4



Instructions: A) Pay attention to your classmate's performance during the role-play. Use the form below to provide peer feedback. Mark Yes,

Sometimes, or No based on your appreciation.

Peer Assessment Form

My classmate	Yes	Sometimes	Νο
1. used expressions to greet.			
2. used expressions to say goodbye.			
3. used proper intonation to ask questions.			
4. asked follow-up questions to clarify or expand on ideas.			
5. used expressions to show interest.			
6. pronounce -ed sounds correctly.			
Comments and observations:			

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 8 - Handout #4



Instructions: B) Please upload your peer assessment form to the folder "Peer Assessment Forms" by labeling the document as "Catalina's feedback to César":

https://drive.google.com/drive/folders/1zEebSTXJYI1w0G2flVky2LWW3EMqE wLq

Final Oral Presentations - Selfassessment

Based on today's presentations, use this form to assess your own performance.

chris.jvm.93@gmail.com Cambiar cuenta

No compartido

* Indica que la pregunta es obligatoria

Please write your name. *

Tu respuesta

Evaluate the following aspects of your performance in the final oral presentation * by choosing among the options *Excellent*, *Very good*, *Average*, or *Poor*.

	Excellent	Very good	Average	Poor
Use of technical vocabulary related to physical therapy.	0	0	0	0
Pronunciation of technical vocabulary related to physical therapy.	0	0	0	0
Content and development of my chosen topic.	0	0	0	0

⊘

Manner of addressing the questions and comments raised by the audience.	0	0	0	0		
Visual aids (PowerPoint, Google Slides, Canva, etc).	0	0	0	0		
Overall rating of my presentation.	0	0	0	0		
Reflection. If you had to give this presentation again, what would you do differently to improve it? Why?						
Tu respuesta						

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Final Oral Presentations - Lesson 14 - Handout #2



Instructions: A) Based on today's presentations, use the form below to assess your own performance. Evaluate the following aspects by choosing among the options *Excellent*, Very good, Average, or Poor.

Aspects	Excellent	Very good	Average	Poor			
1. Use of technical vocabulary related to physical therapy.							
2. Pronunciation of technical vocabulary related to physical therapy.							
3. Content and development of my chosen topic.							
4. Manner of addressing the questions and comments raised by the audience.							
5. Visual aids (PowerPoint, Google Slides, Canva, etc)							
6. Overall rating for my presentation.							
Reflection. If you had to give this presentation again, what would you do differently to improve it? Why?							

Self-Assessment Form

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Final Oral Presentations - Lesson 14 - Handout #2



Instructions: B) Please upload your self-assessment form to the folder "Selfassessment Forms" by labeling the document as "Cristian's Selfassessment":

https://drive.google.com/drive/folders/1CbRDXI0YA13oeamiRCQfVrrxsu6Q g_9W

Formulario de Evaluación Final del Curso *English for Physical Therapy*

El propósito de este último cuestionario es recolectar información relevante sobre el curso de inglés para Terapia Física. Las respuestas enviadas serán utilizadas con el único propósito de obtener evidencia para nuestro trabajo de investigación final, por lo que la información brindada se manejará de manera confidencial. Le tomará de 15-20 minutos completar este cuestionario. Sus aportes serán de vital importancia para nuestro trabajo de investigación final.

chris.jvm.93@gmail.com Cambiar cuenta

No compartido

* Indica que la pregunta es obligatoria

Según su opinión, ¿qué tanto ha mejorado las siguientes habilidades del idioma * inglés durante el curso?

	Mucho	Más o menos	Poco	Nada
Reading	0	0	0	0
Speaking	0	0	0	0
Listening	0	0	0	0
Writing	0	0	0	0
Pronunciation	0	0	0	0
Fluency	0	0	0	0
Grammar	0	0	0	0

⊘

Vocabulary	0	0	0	0	
Califique las siguier habilidad que usted			lés del 1 al 4, si	endo 1 la	*
	1	2	3	4	
Reading	0	0	0	0	
Speaking	0	0	0	0	
Listening	0	0	0	0	
Writing	0	0	0	0	
¿Cuál es su opinión	acerca de las	actividades (task	s) realizadas en	clase? *	
O Excelentes					
O Buenas					
O Regulares					
O Malas					
Brevemente justifiq	ue el porqué de	e su elección. *			
Tu respuesta					

¿Cuál es su opinión acerca de los materiales utilizados en clase? *
O Excelentes
O Buenos
O Regulares
O Malos
Brevemente justifique el porqué de su elección. *
Tu respuesta
¿Cuál es su opinión acerca de la dificultad de las actividades/exámenes según su * nivel de inglés?
nivel de inglés?
nivel de inglés?
nivel de inglés? Muy difíciles Apropiadas
nivel de inglés? Muy difíciles Apropiadas Regulares
nivel de inglés? Muy difíciles Apropiadas Regulares

	Mucho	Más o menos	Росо	Nada
Role-plays	0	0	0	0
Discussions	0	0	0	0
Presentations	0	0	0	0
Games	0	0	0	0
Conversations	0	0	0	0

Según su opinión, ¿qué tan efectivas/útiles fueron las siguientes actividades para * mejorar su habilidad del habla en el idioma inglés?

Califique las siguientes actividades de clase del 1 al 5 según su efectividad para * mejorar su habilidad del habla en el idioma inglés (siendo 1 la que considera más efectiva).

	1	2	3	4	5
Role-plays	0	0	0	0	0
Discussions	0	0	0	0	0
Presentations	0	0	0	0	0
Games	0	0	0	0	0
Conversations	0	0	0	0	0

¿Cuál es su opinión acerca de las actividades realizadas en grupo? *
O Muy difíciles
O Apropiadas
O Regulares
O Muy fáciles
Brevemente justifique el porqué de su elección. *
Tu respuesta
¿Cómo se sintió más cómodo/cómoda a la hora de realizar actividades en *
parejas o grupos?
parejas o grupos?
parejas o grupos? O Trabajando con compañeros de un nivel de inglés superior al suyo.
 parejas o grupos? Trabajando con compañeros de un nivel de inglés superior al suyo. Trabajando con compañeros de un nivel de inglés similar al suyo.
 parejas o grupos? Trabajando con compañeros de un nivel de inglés superior al suyo. Trabajando con compañeros de un nivel de inglés similar al suyo. Trabajando con compañeros de un nivel de inglés inferior al suyo.
 parejas o grupos? Trabajando con compañeros de un nivel de inglés superior al suyo. Trabajando con compañeros de un nivel de inglés similar al suyo. Trabajando con compañeros de un nivel de inglés inferior al suyo.

ż	Qué tan út	til considera	fue el curso	para su a	prendizaje d	el idioma inglés? *

- O Mucho
- O Poco
- O Nada
- Más o menos

Brevemente justifique el porqué de su elección. *

Tu respuesta

Si así lo desea, puede dejar un comentario final acerca del curso.

Tu respuesta

¡Muchas gracias por completar este formulario!

University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Final Day of Classes - Lesson 15 - Course Survey



Formulario de Evaluación Final del Curso English for Physical Therapy

El propósito de este último cuestionario es recolectar información relevante sobre el curso de inglés para Terapia Física. Las respuestas enviadas serán utilizadas con el único propósito de obtener evidencia para nuestro trabajo de investigación final, por lo que la información brindada se manejará de manera confidencial. Le tomará de 15-20 minutos completar este cuestionario. Sus aportes serán de vital importancia para nuestro trabajo de investigación final.

Habilidades	Mucho	Más o menos	Росо	Nada
Reading				
Speaking				
Listening				
Writing				
Pronunciation				
Fluency				
Grammar				
Vocabulary				

-Según su opinión, ¿qué tanto ha mejorado las siguientes habilidades del idioma inglés durante el curso?

-Califique las siguientes habilidades en el idioma inglés del 1 al 4, siendo 1 la habilidad que usted considera mejoró más. ()Reading ()Speaking ()Listening ()Writing

-¿Cuál es su opinión acerca de las actividades (tasks) realizadas en clase? () Excelentes ()Buenas ()Regulares () Malas

Brevemente justifique el porqué de su elección.

-¿Cuál es su opinión acerca de los materiales utilizados en clase? () Excelentes ()Buenos ()Regulares () Malos

Brevemente justifique el porqué de su elección.

-Cuál es su opinión acerca de la dificultad de las actividades/exámenes según su nivel de inglés?

() Muy difíciles () Apropiadas () Regulares () Muy fáciles

Brevemente justifique el porqué de su elección.

-Según su opinión, ¿qué tan efectivas/útiles fueron las siguientes actividades para mejorar su habilidad del habla en el idioma inglés?

Actividades de clase	Mucho	Más o menos	Росо	Nada
Role-plays				
Discussions				
Presentations				
Games				
Conversations				

-Califique las siguientes actividades del 1 al 5 según su efectividad para mejorar su habilidad del habla en el idioma inglés (siendo 1 la que considera más efectiva).

()Role-plays ()Discussions ()Presentations ()Games ()Conversations

-¿Cuál es su opinión acerca de las actividades realizadas en grupo? () Muy difíciles () Apropiadas () Regulares () Muy fáciles

Brevemente justifique el porqué de su elección.

-¿Cómo se sintió más cómodo/cómoda a la hora de realizar actividades en parejas o grupos?

() Trabajando con compañeros de un nivel de inglés superior al suyo

() Trabajando con compañeros de un nivel de inglés similar al suyo

() Trabajando con compañeros de un nivel de inglés inferior al suyo

() Trabajando con cualquier compañero

Brevemente justifique el porqué de su elección.

-¿Qué tan útil considera que fue el curso para su aprendizaje del idioma inglés?

() Mucho () Más o menos () Poco () Nada

Brevemente justifique el porqué de su elección.

Si así lo desea, puede dejar un comentario final acerca del curso.

¡Muchas gracias por completar este formulario!

Appendix K

University of Costa Rica Master's Program in TEFL Unit 1 Partial Exam - Reading Test - Lesson 5 Alfaro, G. & Vega, C.			Tnglish for Good job! Physical Therapy
Total points: 30	Points obtained:	Score:	
Name:		Date:	

General Instructions: Read the instructions in each part of the test carefully. You have 40 minutes to complete the test. If you have any questions, you can ask the teachers in charge.

Part I: Fill in the blanks (5 points).

Instructions: Complete the blanks in the abstract with the correct word from the options **in bold** and *italics*. There is only 1 correct answer per item.

Abstract

Background: The aim of this study is _____ (*investigate / analyzing / to* **explore**) the feasibility and effectiveness of a VR simulation for pain and anxiety control in a convenience sample of adult ED patients presenting with traumatic and non-traumatic pain triaged 2–5 (i.e., urgent to non-urgent) with a pain rating of \geq 3 on a numeric rating scale (NRS).

Virtual reality (VR) simulations are well studied in a wide variety of clinical settings, including acute and chronic pain management, as well as anxiety disorders. However, studies in the busy environment of an adult ED are

_ (abundant / limit / scarce).

Pain is one of the most common, yet challenging problems leading to emergency department (ED) presentations, despite the availability of a wide range of pharmacological therapies.

Methods: Prospective within-subject, repeated _____ (measure / measured / measures) interventional feasibility pilot study at a Swiss

University ED. The intervention consisted of a virtual reality simulation in addition to usual care.

Pain and anxiety levels were measured using a verbally administered NRS before and after the intervention. Information on patient experience was collected using established rating scales.

Results: Fifty-two patients were enrolled. The most common pain localizations were extremities and abdomen. About one third of patients presented with trauma-associated pain. Duration of pain was mainly acute (<24 h) or subacute (>24 h). The majority of patients were ______ (*triaged / said / give*) category 3, i.e. semi-urgent. Significant reduction in pain, and anxiety levels vs. median post-VR simulation was achieved, yielding moderate to large effect sizes, for anxiety level on NRS=0.75. With medium immersion and good tolerability of the VR simulation, user satisfaction was high.

Conclusions: Virtual reality _____ (effective / analgesia / cured) for pain and anxiety reduction in the busy setting of an ED is feasible, effective, with high user satisfaction. Further randomized controlled studies are needed to better characterize its impact on pain perception and resource utilization.

Part II: True or False exercise (5 points).

Instructions: Read the adapted article "Virtual Reality for Pain Relief in the Emergency Room (VIPER) – a prospective, interventional feasibility study" to determine if the statements below are true or false. Highlight your answer.

- 1. Non-pharmacological therapies are frequently used in the busy acute-care setting of an ED.
 - A) True
 - B) False
- 2. VR stimuli might lead to a closure of the neural gateways, thus reducing pain perception in patients.
 - A) True
 - B) False
- 3. The VR experience of the study consisted of patients contemplating a relaxing landscape accompanied with a relaxing sound for about 20 minutes.
 - A) True
 - B) False

- 4. Patients' anxiety level was assessed 5 minutes before and after the intervention by using a rating scale from 0 to 10.
 - A) True
 - B) False
- 5. The VR intervention showed significant reduction of pain and anxiety levels in participants presenting traumatic and non-traumatic pain.
 - A) True
 - B) False

Part III: Matching exercise (10 points)

Instructions: Match each of the statements below with the appropriate section in the box. Put a letter (**A**, **B**, or **C**) in the parenthesis that matches the information found in the section of the article. All options have several answers.

	Sections of the article
Α	Background
В	Methods
С	Results

- 1. The VR study was conducted at the ED at the University Hospital of Bern, Switzerland. ()
- 2. Studies in the busy environment of an adult ED are scarce, and mainly focus on procedural analgesia during painful medical interventions. ()
- 3. Two patients required urgent medical intervention leading to discontinuation of the simulation. ()
- 4. The study took place from March 22nd, 2021 until July 9th, 2021. ()
- The study recruited a convenience sample of patients who presented traumatic and non-traumatic musculoskeletal, abdominal or chest pain. ()
- 6. About one third of patients presented with trauma-associated pain. ()
- 7. The simulation could be interrupted for important medical procedures or because of patient preference. ()

- 8. No significant differences in vital parameters were observed pre- and post-simulation. ()
- 9. The effects of VR simulations are well studied in clinical settings including acute and chronic pain management. ()
- 10. Researchers used a 7-item questionnaire to assess participants' satisfaction after the intervention. ()

Part IV: Comprehension questions (10 points)

Instructions: Answer the following questions based on the information from the article.

1. What are two barriers for effective pain management in the ED according to the article? (1 pt each answer, 2 pts total)

2. Mention 2 characteristics of the patient population. (1 pt each answer, 2 pts total)

3. Mention 2 instruments used by the researchers to collect the data. (1 pt each answer, 2 pts total)

4. Mention 2 inclusion criteria for participation in the study. (1 pt each answer, 2 pts total)

5. What did the researchers conclude about the use of VR for pain management and anxiety control? (2 pts)

University of Costa Master's Program i Unit 1 Partial Exam Alfaro, G. & Vega,	n TEFL - Reading Test - Lesson 5	- <mark>Answer Key</mark>	Tnglish for Good job! Physical Therapy
Total points: 30	Points obtained:	Score:	
Name:		Date:	

General Instructions: Read the instructions in each part of the test carefully. You have 40 minutes to complete the test. If you have any questions, you can ask the teachers in charge.

Part I: Fill in the blanks (5 points).

Instructions: Complete the blanks in the abstract with the correct word from the options **in bold** and *italics*. There is only 1 correct answer per item.

Abstract

Background: The aim of this study is _____ (*investigate / analyzing / to explore*) the feasibility and effectiveness of a VR simulation for pain and anxiety control in a convenience sample of adult ED patients presenting with traumatic and non-traumatic pain triaged 2–5 (i.e., urgent to non-urgent) with a pain rating of \geq 3 on a numeric rating scale (NRS).

Virtual reality (VR) simulations are well studied in a wide variety of clinical settings, including acute and chronic pain management, as well as anxiety disorders. However, studies in the busy environment of an adult ED are

___ (abundant / limit / <mark>scarce</mark>).

Pain is one of the most common, yet challenging problems leading to emergency department (ED) presentations, despite the availability of a wide range of pharmacological therapies.

Methods: Prospective within-subject, repeated _____ (measure / measured / measures) interventional feasibility pilot study at a Swiss University ED. The intervention consisted of a virtual reality simulation in addition to usual care. Pain and anxiety levels were measured using a verbally administered NRS before and after the intervention. Information on patient experience was collected using established rating scales. **Results**: Fifty-two patients were enrolled. The most common pain localizations were extremities and abdomen. About one third of patients presented with trauma-associated pain. Duration of pain was mainly acute

(<24 h) or subacute (>24 h). The majority of patients were _____ (*triaged* / *said / give*) category 3, i.e. semi-urgent. Significant reduction in pain, and anxiety levels vs. median post-VR simulation was achieved, yielding moderate to large effect sizes, for anxiety level on NRS=0.75. With medium immersion and good tolerability of the VR simulation, user satisfaction was high.

Conclusions: Virtual reality _____ **(effective / analgesia / cured)** for pain and anxiety reduction in the busy setting of an ED is feasible, effective, with high user satisfaction. Further randomized controlled studies are needed to better characterize its impact on pain perception and resource utilization.

Part II: True or False exercise (5 points).

Instructions: Scan the article to determine if the statements below are true or false.

- 1. Non-pharmacological therapies are frequently used in the busy acute-care setting of an ED.
 - A) True <mark>B) False</mark>
- 2. VR stimuli might lead to a closure of the neural gateways, thus reducing pain perception in patients.
 - <mark>A) True</mark> B) False
- 3. The VR experience of the study consisted of patients contemplating a relaxing landscape accompanied with a relaxing sound for about 20 minutes.
 - <mark>A) True</mark> B) False
- 4. Patients' anxiety level was assessed 5 minutes before and after the intervention by using a rating scale from 0 to 10.
 - A) True <mark>B) False</mark>
- 5. The VR intervention showed significant reduction of pain and anxiety levels in participants presenting traumatic and non-traumatic pain.
 - <mark>A) True</mark>
 - B) False

Part III: Matching exercise (10 points)

Instructions: Match each of the statements below with the appropriate section in the box. Put a letter (**A**, **B**, or **C**) in the parenthesis that matches the information found in the section of the article. All options have several answers.

	Sections of the article
Α	Background
В	Methods
С	Results

- The VR study was conducted at the ED at the University Hospital of Bern, Switzerland. (B)
- 2. Studies in the busy environment of an adult ED are scarce, and mainly focus on procedural analgesia during painful medical interventions. (A)
- 3. Two patients required urgent medical intervention leading to discontinuation of the simulation. (C)
- 4. The study took place from March 22nd, 2021 until July 9th, 2021. (B)
- The study recruited a convenience sample of patients who presented traumatic and non-traumatic musculoskeletal, abdominal or chest pain. (B)
- 6. About one third of patients presented with trauma-associated pain. (C)
- 7. The simulation could be interrupted for important medical procedures or because of patient preference. (**B**)
- 8. No significant differences in vital parameters were observed pre- and post-simulation. (C)
- 9. The effects of VR simulations are well studied in clinical settings including acute and chronic pain management. (A)
- 10. Researchers used a 7-item questionnaire to assess participants' satisfaction after the intervention. (B)

Part IV: Comprehension questions (5 points)

Instructions: Answer the following questions based on the information from the article.

1. What are two barriers for effective pain management in the ED according to the article?(1 pt each answer, 2 pts total) <u>Answers vary.</u>

a) Patients' highly subjective experience of pain.

b) both opioid and non-opioid medications side effects and contraindications to consider.

c) Non-pharmacological therapies are oftentimes underused in

<u>the busy acute-care setting of an ED</u>

2. Mention 2 characteristics of the patient population. (1 pt each answer, 2 pts total) **Answers vary.**

a. <u>52 patients were recruited, 32 females and 20 males.</u>

b. <u>The most common pain localisations were extremities, abdomen,</u> <u>head, back, and chest.</u>

- c. About one third of patients presented with trauma-associated pain.
- d. No patient presented with tumor-associated pain.
- e. <u>Duration of pain was mainly acute or subacute.</u>
- f. Over ninety percent of patients were triaged level 3.

3. Mention 2 instruments used by the researchers to collect the data. (1 pt each answer, 2 pts total) **Answers vary.**

a. <u>The Swiss triage scale (2-5).</u>

b. <u>Sociodemographic survey (gender, age, highest level of</u> education...)

c. <u>Verbally administered numeric rating scale immediately pre- and post-inter-ention to assess their current pain intensity.</u>

d. <u>The Patient- Reported Outcomes Measurement Information System</u> (PROMIS®) to evaluate the raw score of the anxiety intensity.

- e. <u>Simulator Sickness Questionnaire (SSQ).</u>
- f. A 7-item questionnaire to assess user satisfaction.

4. Mention 2 inclusion criteria for participation in the study. (1 pt each answer, 2 pts total) <u>Answers vary.</u>

- a. <u>Adult patients ≥18 years of age presented in the ED.</u>
- b. <u>ED patients triaged 2–5 on the Swiss triage scale.</u>

c. <u>Patients presented to the ED with the following complaints: traumatic</u> and non-traumatic musculoskeletal pain.

5. What did the researchers conclude about the use of VR for pain management and anxiety control? (2 pts total)

VR pain and anxiety control can potentially help reduce the patients' risk of developing chronic pain or post-traumatic stress symptoms in the future. VR simulation for pain and anxiety reduction in the busy setting of an ED is feasible, effective, and safe. University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 1 - Lesson 5 – Article



Instructions: Read the adapted article to complete the items in the document "Unit 1 Partial Exam - Reading Test - Lesson 5."

RESEARCH



Virtual Reality for Pain Relief in the Emergency Room (VIPER) – a prospective, interventional feasibility study

T. Birrenbach^{*}, F. Bühlmann, A. K. Exadaktylos, W. E. Hautz, M. Müller[†] and T. C. Sauter[†]

Background

Pain is one of the most common problems leading to emergency department (ED) presentations. However, pain management in the ED remains challenging. Many barriers to effective pain management in the ED have been reported, and include the individual pain level of the patient (e.g., the highly subjective experience of pain) as an important influencing factor. A wide range of pharmacological therapies including both opioid and non-opioid medications exist and are broadly applied in the ED via different routes of application, yet there are specific side effects and contraindications to consider. Furthermore, EDs are a major source of opioid prescription and thus, in some countries, contribute to the rising opioid dependency crisis. Non-pharmacological therapies (e.g. relaxation techniques, traditional distraction, and transcutaneous electrical nerve stimulation) are recommended as well, but are oftentimes underused in the busy acute-care setting of an ED. Virtual Reality (VR) affects the visual and the auditory senses allowing immersion in a virtual world thanks to

a VR headset, giving participants the illusion of "being there" in the 3 dimensional computer generated world as if it is a place they are visiting. The mechanism of how VR works to alleviate pain is only partially known. The gate control theory postulates pain perception to be modulated by interaction among different neurons. VR or other stimuli might lead to a closure of the neural gateways, thus reducing pain perception. In addition to distraction, there are novel mechanisms for VR treatment in pain, such as producing neurophysiologic changes related to conditioning and exposure therapies, or regulating autonomic, affective (mood, anxiety), and evaluative (subjective pain and enjoyment rating) responses associated with acute pain. fMRI studies have demonstrated that VR can reduce pain comparable to a moderate dose of opioids. The effects of VR simulations are well studied in a wide variety of clinical settings, including acute and postoperative, as well as chronic pain management, neuropathic pain, in patients undergoing invasive procedures, and for treatment of burn patients. Furthermore, there is a growing body of evidence for the application of VR simulation especially in the pediatric population (burn pain, painful procedures, chemotherapy, anxiety, and palliative care. Additionally, VR simulation can be used for the treatment of anxiety disorders. Studies in the busy environment of an adult ED are scarce, and mainly focus on procedural analgesia during painful medical interventions. Thus, we conducted a within-subject, repeated measure interventional feasibility pilot study to investigate:

i) The feasibility of deployment of a VR simulation in the busy setting of the ED for an adult population presenting with traumatic or non-traumatic pain≥3 on a numerical rating scale (NRS) (0–10).

ii) The effectiveness of the VR simulation in pain and anxiety control. Impact of gender and pain location on response.

iii)The acceptance of the VR simulation in the study population and patient experience (user satisfaction, simulator sickness, sense of presence and immersion).

Methods

Study design, setting, and ethical approval

This is a prospective self-controlled interventional feasibility pilot study at the ED of the University Hospital of Bern, Switzerland. Our ED is a tertiary care centre, caring for a patient population of around 2 million and treating over 45,000 adult patients each year with an interdisciplinary team. The study took place from March 22nd, 2021 until July 9th, 2021, during daytime hours depending on availability of the study investigator. All patients admitted to the ED were triaged by registered nurses using the Swiss triage scale, a five-level triage scale with high inter-rater and intra-rater reliability. Chief complaints, objective parameters (vital signs), and key questions are used to stratify the risk: 1—life-threatening emergencies requiring immediate care, 2—urgent conditions requiring medical evaluation within 20 min, 3 – semi-urgent conditions, requiring medical evaluation within 2 h, 4 – non-urgent conditions and 5—follow-ups. This study was classified as a quality evaluation study by the local institutional review board (Kanton- ale Ethikkommission Bern (KEK), BASEC-Number Req-2020–01,266).

Inclusion/exclusion

We recruited a convenience sample (n=52) of adult (\geq 18 years of age) ED patients triaged 2–5 on the Swiss triage scale, i.e. excluding critically ill/injured patients in shock, with a pain rating of NRS \geq 3 on a numeric rating scale (0–10) who presented to the ED with the following complaints: traumatic and non-traumatic musculoskeletal pain (back, pelvis, neck, extremities), abdominal or chest pain, or headache.

Exclusion criteria were as follows:

- Hemodynamically unstable patient (e.g., planned for admission to the intensive care unit or deemed unstable by the physician in charge).
- Patients without decision-making capacity or with communication deficits (e.g., hearing loss, patient unable to communicate in German at a level sufficient to give informed consent and answer questions about pain and anxiety).
- Altered mental status (e.g., intoxication, cognitive impairment, acute confusional state, acute psychosis, acute stroke, and developmentally delayed patients).
- History of drug abuse.
- Patients unable to use VR due to vision problems (e.g., blindness or without his/her glasses).
- Patients suffering from epilepsy or other sensitivity to flashing light or motion.
- Pregnancy or other medical conditions prone to severe nausea and vomiting.
- Patients suffering from claustrophobia.
- Patients on non-invasive ventilation and patients requiring oxygen delivered by face mask.
- Patients requiring droplet, aerosol and contact precautions.
- Patients with injuries/skin affections (rashes, open wounds) to face/neck including traumatic brain injury that prevents the use of the VR headset.
- Imprisoned patients.
- Patients who participated in this study at a previous consultation.
- Refusal to participate in the study.
- •

Baseline data

Sociodemographic data (gender, age, highest level of education, need to wear glasses, prior experience with VR), clinical data regarding pain presentation (localisation, association with trauma or tumor, presence of neuralgic pain, duration (acute<24 h, subacute>24 h, chronic>3 months) and triage level according to the Swiss triage scale) were collected in a survey.

Intervention

The study investigator (FB) informed the patient about the study aims, handed out the information form and ensured the absence of contraindications, responded to the patient's questions and collected the patient's free, informed and expressed consent. The intervention consisted of the application of the Healthy mind VR simulation (HEALTHY MIND, Paris, France), using a Pico G2 4 K VR headset (Pico Interactive Inc., San Francisco, California, USA) with resolution of 1920×2160 and a diagonal field of view of 101 degrees and Bose Quiet Comfort 35 II noise-canceling headphones (Bose Corporation, Framingham, Massachusetts, USA) as an adjunct to usual care in the ED. Pain medication was administered throughout the patient's stay in the ED as it would be during a usual ED visit. In our ED, analgesia is administered according to a clearly defined standard and protocol, which was also adhered to unchanged during the study. If necessary the VR simulation was interrupted, so that medication (or other medical interventions) could be provided. The content of the simulation has been developed by a private company (HEALTHY MIND, Paris, France) and is a registered Class I medical device that is commercially available. The company was not involved in any aspects of the study. The immersive, but not interactive experience, consists of a contemplative relaxing landscape accompanied by a sound universe specifically composed to relax the patient. The patient could choose

between either a forest or beach setting. The duration of the VR simulation was aimed at 20 min. If necessary, the simulation could be interrupted for important medical procedures or because of patient preference. The application was controlled by the study investigator using an android tablet (Samsung Galaxy Tab A 2019, 4G; Samsung Electronics Co.,Ltd., Suwon, South Korea). The study investigator (FB) was always present during the simulation and worked with ED staff as necessary to ensure the patient was receiving appropriate clinical care throughout the duration of the intervention.

Primary and secondary outcomes

Primary outcome measures

Pain reduction Effectiveness of the VR simulation on the patients' selfassessment of their current pain intensity by a verbally administered numeric rating scale (NRS from 0 to 10 integers) immediately pre- and post-interention. This scale has been demonstrated to be a valid and reliable tool for the assessment of acute pain in the ED.

Secondary outcome measures

Anxiety reduction

Effectiveness of VR simulation on the patients' self-assessment of their current anxiety measured on a verbally administered numeric rating scale (NRS from 0 to 10 integers) immediately pre- and post-intervention. Furthermore, the validated Patient- Reported Outcomes Measurement Information System (PROMIS®) Anxiety short form 8a (8 Items) was filled out by the patient immediately before and after the intervention. To evaluate the raw score of the anxiety intensity on the PROMIS Anxiety short form 8a, the value of the response options ranging from one to five for each of the eight items is summarized (raw score ranges from 8 to 40, with higher scores indicating higher anxiety levels).

Patient experience

Motion sickness was assessed on a verbally administered numeric rating scale (NRS 0 to 10), immediately before and after the procedure. "Visually-induced motion sickness" was assessed with four-items (nausea, headache, blurred vision, dizziness) according to the Simulator Sickness Questionnaire (SSQ) adapted from Kennedy et al. (total score ranges from 1=no simulator sickness to 5=strong simulator sickness). Sense of presence and immersion Presence and immersion in the virtual world was determined according to the 6-item questionnaire developed by Slater-Usoh-Steed (total score ranges from 1=no immersion to 7=full immersion).

User satisfaction was assessed using a 7-item questionnaire (1:1 liked the experience with the simulation; 2: The headset and headphones were comfortable; 3: The audio quality was pleasant; 4: The image quality was pleasant; 5: The simulation improved my discomfort; 6: I would use this simulation again with these complaints; 7: I would recommend this simulation to others. Answers on a Likert Scale from 1=totally disagree to 5=totally agree) directly after the procedure.

Statistical analysis

Data was analyzed in Stata® 16.1 (StataCorp, The College Station, Texas, USA). Baseline characteristics are presented as numbers and percentage or median and interquartile range (IQR) using descriptive statistics as appropriate. Comparisons between two independent groups (e.g. male vs. female) were carried out by Chi-square or Wilcoxon rank sum test depending on variable (categorical or continuous). Pre- and postsimulation comparisons (e.g. pain) were performed with McNemar's test or Wilcoxon signed rank test. Incomplete variables are indicated. No data was imputed. Only complete data pairs could be evaluated.

Results

Recruitment, missing data

A total of 310 ED patients were screened, with 194 patients meeting eligibility criteria). After determining eligibility, 28 patients were missed by the study investigator due to patients undergoing a clinical evaluation, diagnostic study or procedure, 77 patients had already left the ED, and 37 patients refused to participate in the study. Finally, 52 patients were enrolled in this study, and all but 2 patients included completed at least 10 min of the VR simulation (two patients required urgent medical intervention leading to discontinuation of the simulation after one and two minutes, respectively).

Characteristics of patient population

Overall, 52 patients were recruited, 32 females and 20 males. The most common pain localisations were extremities, abdomen, head, back, and chest. About one third of patients presented with trauma-associated pain. No patient presented with tumor-associated pain. Duration of pain was mainly acute (<24 h) or subacute (>24 h). Over ninety percent of patients were triaged level 3. Median pain level before VR on a NRS from 0 to 10 was 4.5 (IQR 3–7), median anxiety level was 4 (IQR 2–5). Median anxiety level on the 8-item PROMIS questionnaire was 14 out of a maximum of 40 points (IQR 11–21), with significant differences between females (median 18, IQR 12–26) and males (median 12.5, QR 9.5–15).

Simulation details

28.8% of simulations were interrupted at least once, mainly due to medical interventions. Mean simulation time was 20 min. No significant differences regarding gender were found.

Pain and anxiety reduction

Significant reduction in pain (NRS median pre-simulation 4.5 (IQR 3–7) vs. median post-simulation 3 (IQR 2–5), and anxiety levels (NRS median pre-

simulation 4 (IQR 2–5) vs. median post-simulation 2 (IQR 0–3); PROMIS median pre-simulation 14 (IQR 11–21) vs. median post-simulation 8 (IQR 8– 11), was achieved. Effect sizes were moderate to large. No significant differences in vital parameters were observed pre- and post-simulation. No significant differences of the effectiveness of the VR simulation on pain and anxiety levels according to gender were found. Forty-two percent of patients received analgesics before the simulation, and only 11% received opioids. Compared to males, the proportion of females receiving pain medications and opioids was significantly higher. Only three patients received analgesics during the intervention. A significant reduction of pain and anxiety levels was achieved using adjunctive VR.

Discussion

Summary

In this prospective within-subject, repeated-measure interventional pilot study, adjunctive virtual reality simulation proved to be feasible, effective and safe in a convenience sample of adult patients presenting with traumatic and non-traumatic pain, even in the busy setting of an adult ED, to reduce pain and anxiety. Our patients mainly presented with acute and subacute musculoskeletal, and abdominal pain, but also headache. We could demonstrate a significant pain and anxiety reduction after the 20 min VR distraction simulation, regardless of gender. Furthermore, the simulation proved effective regardless of the administration of analgesics before the intervention. We found good tolerability of the VR simulation with a high user satisfaction.

Effectiveness on pain and anxiety

The current study found a significant reduction in pain and anxiety levels through the VR simulation. Our results confirm the little existing evidence regarding effectiveness of VR on pain reduction in the ED. Sikka et al. were the first to study the effect of VR in ED patients with acute pain. In their convenience sample of 100 adult patients presenting to an urban academic ED with undifferentiated pain of at least 3 on a NRS (0–10), around ²/₃ of the population were women and African American, presenting mainly with musculoskeletal, abdominal and back pain. The mean VR application time in their study was shorter. Both their reported pain and anxiety scores dropped significantly from pre- to post-intervention with good tolerability. However, as a main limitation, they did not provide information regarding concurrent analgesic medication administered. In our study, we noticed a significant reduction of pain and anxiety levels, regardless of administration of analgesics before the simulation. Spiegel et al. conducted a prospective randomized controlled study (VR on demand vs. specialized television program) in hospitalized patients with pain scores of at least 3 out of 10 on a NRS and achieved a similar level of pain reduction (mean within-subject difference in immediate pre- and postintervention pain scores in the VR group, with a significantly greater pain reduction in the VR group than in the control group. Although the effect of VR on pre- and post-simulation pain scoring was statistically significant, the absolute reduction in pain scores in these and our patients was relatively small but clinically meaningful. The minimal clinically important difference (MCID) on the NRS usually lies between 1 and 2 points.

A recent study demonstrated that patients perceived a change of 1.65 points on NRS in their pain severity as meaningful. We did not find a significant change in physiological parameters, in line with the current lack of evidence that VR therapy can affect autonomic arousal or demonstrate its analgesic properties through modulation of these parameters. Increased levels of anxiety can lead to worsening pain perception, decreased pain threshold and less cooperative patients. We found significantly higher levels of anxiety in women, and such gender differences have been reported elsewhere. The ability of VR to remove patients from the anxiety-inducing clinical environment of a busy ED and immerse them in a relaxing virtual environment reduced both the associated pain and anxiety regardless of gender in our patients. One might also speculate that VR pain and anxiety control can potentially help reduce the patients' risk of developing chronic pain or post-traumatic stress symptoms in the future.

Conclusion

VR simulation for pain and anxiety reduction in the busy setting of an ED is feasible, effective, and safe. Further and larger randomized controlled studies are needed to better characterize its impact on pain perception and resource utilization.

Adapted from: Birrenbach, T., Bühlmann, F., Exadaktylos, A. K., Hautz, W. E., Müller, M., & Sauter, T. C. (2022). Virtual reality for pain relief in the emergency room (VIPER) - a prospective, interventional feasibility study. BMC Emergency Medicine, 22(1), 113. <u>https://doiorg.ezproxy.sibdi.ucr.ac.cr/10.1186/s12873-022-00671-z</u> University of Costa Rica Master's Program in TEFL Gustavo Alfaro & Christian Vega Unit 2 - Lesson 9 - Speaking Test



Instructions: Prepare a conversation with your partner using the information below. You have <u>5 minutes</u> to prepare the conversation and <u>5 minutes</u> to present it to the teachers.

Situation: You are at an international conference with fellow physical therapist colleagues from all around the world. Your objective is to meet your partner, share your information, and ask for information based on your reason to attend the conference.

Tasks:

- Introduce yourself to your classmate
- Talk about your professional or academic background
- Talk about a reason for you to attend the conference
- Exchange contact information
- Finish the conversation in an appropriate way.



University of Costa Rica Master's Program in TEFL Unit 3 Listening Quiz #1 - Lesson 12 Gustavo Alfaro & Christian Vega Total points: 15 Points obtained: _____ Score: _____ Name: _____ Date: _____

Instructions: Read carefully the instructions in each part of the quiz. You have 30 minutes to complete the quiz. If you have any questions, you can ask the teachers in charge.

Part I: True or False (5 points).

Instructions: Read the statements below. Mark *True* or *False* based on the information in the video. Highlight your answer.

- 1. Physiotherapy is another name for physical therapy.
- A. True
- B. False
- 2. Hydrotherapy is not suitable for patients recovering from a stroke.
- A. True
- B. False
- **3.** Screening is completed after the patients get into the pool.
- A. True
- B. False
- 4. The speaker mentions 3 types of access to the pool.
- A. True
- B. False

5. Through the buoyancy effect of the water, the therapist is able to strengthen joint range of movement.

- A. True
- B. False

Part II. Multiple-choice (5 points).

Instructions: Read the statements below. Mark the option that best completes each of the statements based on the information in the video. Highlight your answer.

- 1. Hydrotherapy is exercise in ...
- A. hot water conditions.
- B. a warm water environment.
- C. cold and warm water conditions.
- D. a swimming pool.
- 2. Hydrotherapy is suitable for a wide range of conditions, for example:
- A. multiple spams.
- B. single-incident trauma.
- C. Alzheimer 's.
- D. orthopedic recovery.
- **3.** During a typical hydrotherapy session, the patient would...
- A. be accompanied to the pool.
- B. get into the pool using the elevator.
- C. wait for instructions.
- D. use the tracking hoist.

4. ______ and _____ are some examples of exercises during a typical hydrotherapy session.

- A. Swimming, jogging
- B. Running, using noodles
- C. Leaning toward the wall, stretching
- D. Walking, using floats

5. _____ and _____ are benefits of hydrotherapy.

A. Reduction of edema and swelling in the limbs, feeling safer

B. Pain relief in the nervous system, improving the cardiovascular system

C. Body and joint support, moving in a weightless position

D. Hands-on specific areas of weakness, increase of edema and swelling

Part III. Vocabulary (5 points).

Instructions: Complete the summary using the vocabulary words from the *Word Bank*. There are <u>2 extra words</u> which aren't needed in any of the blanks.

		Word B	ank		
buoyancy	v noo	dles	empowe	ering	range
scre	eening	strength	en	properties	

Hydrotherapy is suitable for a complete ______ of conditions. The clients that we regularly treat suffer from neurological conditions. Providing the

______ doesn't flag up any contraindications, anyone is able to get into the water. We will determine how you'll be accessing the water. Whether it's by our tracking hoist or using our platform lift. The ______ of the water can help to support your body and support your joints, but it can also help you work against the water to ______ muscles. We may also use floats on your back to move your body in a completely weightless position. With the use of assistive devices, such as floats and noodles, we are able to ease tight muscles and muscle spasms. Hydrotherapy can allow patients to feel more confident to be able to stand without using walking aids, and that's something we find really ______. University of Costa Rica Master's Program in TEFL Unit 3 Listening Quiz #1 - Lesson 12 Gustavo Alfaro & Christian Vega Answer Key



Part I: True or False (5 points).

Instructions: Read the statements below. Mark *True* or *False* based on the information in the video. Highlight your answer.

- 1. Physiotherapy is another name for physical therapy.
- A. <mark>True</mark>
- B. False
 - 2. Hydrotherapy is not suitable for patients recovering from a stroke.
- A. True
- B. <mark>False</mark>
 - **3.** Screening is completed after the patients get into the pool.
- A. True
- B. False
 - 4. The speaker mentions 3 types of access to the pool.
- A. True
- B. False

5. Through the buoyancy effect of the water, the therapist is able to strengthen joint range of movement.

- A. True
- B. False

Part II. Multiple-choice (5 points).

Instructions: Read the statements below. Mark the option that best completes each of the statements based on the information in the video. Highlight your answer.

- 1. Hydrotherapy is exercise in ...
- A. hot water conditions.
- B. a warm water environment.
- C. cold and warm water conditions.
- D. a swimming pool.
 - 2. Hydrotherapy is suitable for a wide range of conditions, for example:
- A. multiple spams.
- B. single-incident trauma.
- C. Alzheimer 's.
- D. orthopedic recovery.
 - 3. During a typical hydrotherapy session, the patient would ...
- A. be accompanied to the pool.
- B. get into the pool using the elevator.
- C. wait for instructions.
- D. use the tracking hoist.

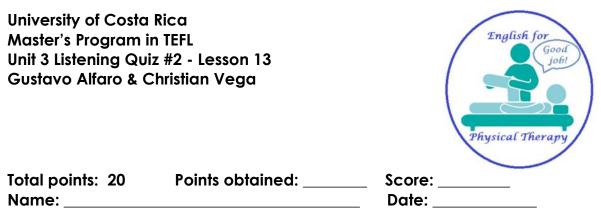
4. _____ and _____ are some examples of exercises during a typical hydrotherapy session.

- A. Swimming, jogging
- B. Running, using noodles
- C. Leaning toward the wall, stretching
- D. Walking, using floats
 - 5. _____ and _____are benefits of hydrotherapy.
- A. Reduction of edema and swelling in the limbs, feeling safer
- B. Pain relief in the nervous system, improving the cardiovascular system
- C. Body and joint support, moving in a weightless position
- D. Hands-on specific areas of weakness, increase of edema and swelling

Part III. Vocabulary (5 points).

Instructions: Complete the summary using the vocabulary words from the *Word Bank*. There are <u>2 extra words</u> which aren't needed in any of the blanks.

Hydrotherapy is suitable for a complete <u>range</u> of conditions. The clients that we regularly treat suffer from neurological conditions. Providing the <u>screening</u> doesn't flag up any contraindications, anyone is able to get into the water. We will determine how you'll be accessing the water. Whether it's by our tracking hoist or using our platform lift. The <u>buoyancy</u> of the water can help to support your body and support your joints, but it can also help you work against the water to <u>strengthen</u> muscles. We may also use floats on your back to move your body in a completely weightless position. With the use of assistive devices, such as floats and noodles, we are able to ease tight muscles and muscle spasms. Hydrotherapy can allow patients to feel more confident to be able to stand without using walking aids, and that's something we find really <u>empowering</u>.



Instructions: Read carefully the instructions in each part of the quiz. You have 35 minutes to complete the quiz. If you have any questions, you can ask the teachers in charge.

Part I. Multiple-choice (5 points).

Instructions: Read the items below. Mark <u>the option</u> that best completes each item based on the information in the video. Highlight your answer.

- 1. The exercises Polly (the patient) is going to perform can ...
- A. be with or without weight.
- B. be weightless.
- C. help her breathe better.
- D. have a little bit of resistance.
- 2. Polly starts doing small arm circles, and then she ...
- A. relaxes.
- B. makes her arms bigger.
- C. doesn't have any pain.
- D. has her arms partially extended.
- 3. Why should senior patients perform bicep curls?
- A. To play sports.
- B. To carry heavy bags.
- C. To pick up light items.
- D. To open doors and windows.

4. Steve (the therapist) advises Polly to count out loud because it helps her ...

- A. to hold her breath.
- B. to continue breathing normally.
- C. to sleep better at night.
- D. to reinforce full range of motion.

- 5. Chair dips help senior patients to _____ more easily.
- A. walk
- B. buy groceries
- C. get in and off a car
- D. get up and out of a chair

Part II. Vocabulary (10 points).

Instructions: Complete the outline with the corresponding words from the video in each blank.

Introduction

- The exercises in the video can be done in a chair at _____.
- If the exercises are too simple, then you can add a little bit of

Arm circles

- Start making small circles by sitting up nice and tall, and having good
- Next, make bigger circles to work full range of motion.
- Focus on _____ to ____ repetitions per range.

Bicep curls

- Extend and bend arms all the way to the _____, working on full range of motion.
- Focus on breathing and _____.
- After _____ to ____ repetitions, switch to a pushing and pulling exercise.

Chair dips

- Lift yourself up using just your _____.
- Straighten your arms all the way up and then lower back down.
- Using your arms and your _____ facilitates getting up and out of a chair.
- Stick to _____ to ____ repetitions.

Part III. Critical thinking (5 points)

Instructions: Provide a short answer to the questions below based on the information in the video and your own experience.

1. In order to increase the difficulty of the arm circles and the bicep curls, Steve (the therapist) suggests using Coke cans or water bottles. What else could you use? (1 point)

2. What should the therapist do if the patient is having pain while performing any of the exercises? (2 points)

3. If you don't have a chair with armrests, where else could you have the patient do dips? (2 points)

University of Costa Rica Master's Program in TEFL Unit 3 Listening Quiz #2 - Lesson 13 Gustavo Alfaro & Christian Vega Answer Key



Part I. Multiple-choice (5 points).

Instructions: Read the items below. Mark <u>the option</u> that best completes each item based on the information in the video. Highlight your answer.

- 1. The exercises Polly (the patient) is going to perform can ...
- A. be with or without weight.
- B. be weightless.
- C. help her breathe better.
- D. have a little bit of resistance.
 - 2. Polly starts doing small arm circles, and then she ...
- A. relaxes.
- B. makes her arms bigger.
- C. doesn't have any pain.
- D. has her arms partially extended.
 - 3. Why should senior patients perform bicep curls?
- A. To play sports.
- B. To carry heavy bags.
- C. To pick up light items.
- D. To open doors and windows.

4. Steve (the therapist) advises Polly to count out loud because it helps her ...

- A. to hold her breath.
- B. to continue breathing normally.
- C. to sleep better at night.
- D. to reinforce full range of motion.

- A. walk
- B. buy groceries
- C. get in and off a car
- D. get up and out of a chair

Part II. Vocabulary (10 points).

Instructions: Complete the outline with the corresponding words from the video in each blank.

Introduction

- The exercises in the video can be done in a chair at **home**.
- If the exercises are too simple, then you can add a little bit of <u>resistance</u>.

Arm circles

- Start making small circles by sitting up nice and tall, and having good **posture**.
- Next, make bigger circles to work full range of motion.
- Focus on <u>10</u> to <u>20</u> repetitions per range.

Bicep curls

- Extend and bend arms all the way to the **<u>shoulder</u>**, working on full range of motion.
- Focus on breathing and <u>counting out loud</u>.
- After **<u>10</u>** to **<u>20</u>** repetitions, switch to a pushing and pulling exercise.

Chair dips

- Lift yourself up using just your **<u>arms</u>**.
- Straighten your arms all the way up and then lower back down.
- Using your arms and your <u>legs</u> facilitates getting up and out of a chair.
- Stick to <u>10</u> to <u>15</u> repetitions.

Part III. Critical thinking (5 points).

Instructions: Provide a short answer to the questions below based on the information in the video and your own experience.

 In order to increase the difficulty of the arm circles and the bicep curls, Steve (the therapist) suggests using Coke cans or water bottles. What else could you use? (1 point) <u>Answers vary.</u>

<u>I could use anything that weighs from 1 to 5 pounds: floats, noodles, weights, etc.</u>

2. What should the therapist do if the patient is having pain while performing any of the exercises? (2 points) <u>Answers vary.</u>

<u>The therapist should stop the exercise, make sure the patient can</u> <u>continue, and then move to another exercise.</u>

3. If you don't have a chair with armrests, where else could you have the patient do dips? **(2 points)** <u>Answers vary.</u>

If I have a chair without armrests, I could try to have the patient do dips on the edge of the chair if he/she is able to do them. If not, the patient could do dips on a dip bar, or on the floor with boxes.

University of Costa Rica Master's Program in TEFL Final Oral Presentations - Lesson 14 Alfaro, G. & Vega, C.



Instructions for the Final Oral Presentation

- On <u>November 15th</u>, you will give the class an <u>individual</u> presentation about a physical therapy treatment or procedure for pain management or to improve movement.
- You are required to prepare a presentation (using PowerPoint, Google Slides, Canva, etc) <u>favoring the use of images over text</u>. However, you can have headings, subheadings, key words, and quotes in your slides.
- The allotted time per presentation is <u>3 to 5 minutes</u>. After each presentation there will be another 3 to 5 minutes for your classmates to ask questions or comment on your presentation.
- 4. Choose a topic for your presentation and the time you would like to present by entering that information here: <u>https://docs.google.com/document/d/1ZCU_aLSi1T1rLHObji6h3_qclS</u> <u>CC_DOEDMPSJ1f1638/edit</u>

University of Costa Rica Master's Program in TEFL Final Oral Presentations - Lesson 14 Alfaro, G. & Vega, C.



Topics for the Final Oral Presentation

Student's name	Торіс	Time
Student G	How pain is transmitted throughout the body	5:30 pm - 5:40 pm
Student A	Embodiment perspective in PT	5:40 pm - 5:50 pm
Student E	Watsu	5:50 pm - 6:00 pm
Student D	Mirror therapy	6:10 pm - 6:20 pm
Student C	Neuro and how it works in CENARE	6:20 pm - 6:30 pm
Student F	How much physical activity is necessary for being healthy	6:30 pm - 6:40 pm
Student B	Aquatic therapy	6:40 pm - 6:50 pm

Appendix L

University of Costa Rica
Master's Program in TEFL
Unit 2 Partial Exam - Speaking Test - Lesson 9
Alfaro, G. & Vega, C.



Total points: 50 Points obtained: _____

Score: _____

Name:_____

Date: _____

Rubric-Speaking Test

Category	Score	Criteria
Grammar 10 points	8-9-10	Accurate use of the simple present and simple past tenses. Correct formulation of Wh- and yes/no questions. Correct sentence structure: subject-verb agreement. Correct use of expressions studied in class.
	5-6-7	Some errors in grammatical structures of the simple present and simple past tenses. Some errors when formulating Wh- and yes/no questions. Some errors in sentence structure: subject- verb agreement.
	1-2-3- 4	Frequent grammatical errors even in simple structures. Use of isolated words.
Vocabulary 10 points	8-9-10	Excellent use of vocabulary and expressions studied in class. Wide range of technical vocabulary. Use of appropriate and formal vocabulary at conferences.
	5-6-7	Good level of vocabulary and expressions studied in class. Some use of technical vocabulary. Some use of informal or inappropriate expressions.
	1-2-3- 4	Poor use of vocabulary studied in class. Frequent errors make the conversation difficult to understand. Frequent use of Spanish. Frequent use of inappropriate expressions.
Fluency 10 points	8-9-10	Speech is effortless and smooth with a speed that comes close to an advanced speaker. No long-pauses when asking or answering questions.
	5-6-7	Speech is mostly smooth but with some hesitation when asking or answering questions.

1-2-3- 4	Speech is slow and often hesitant and irregular. Long-pauses when asking or answering questions.
8-9-10	Appropriate pronunciation of vocabulary studied in class. Correct stress and intonation when asking and answering questions. Correct pronunciation of -ed sounds.
5-6-7 Some pronunciation errors of vocabulary studied in a Some stress and intonation errors when asking and a questions. Some errors in the pronunciation of -ed so	
1-2-3- 4	Poor pronunciation of vocabulary studied in class. Frequent stress and intonation errors when asking and answering questions. Frequent errors in the pronunciation of -ed sounds.
8-9-10	Included all the studied steps required in a conversation when meeting fellow colleagues at a conference (greeting, reason(s) to attend the conference, asking questions, providing answers, expressions to show interest, follow-up questions, farewell).
5-6-7	Included most of the steps required in a conversation when meeting fellow colleagues at a conference (greeting, reason(s) to attend the conference).
1-2-3- 4	Did not include most of the steps required in a conversation when meeting fellow colleagues at a conference (greeting, reason(s) to attend the conference).
	4 8-9-10 5-6-7 8-9-10 5-6-7 1-2-3-

University of Costo Master's Program Final Oral Presente Alfaro, G. & Vega	in TEFL ations - Lesson 14		English for Good jobt Physical Therapy
Total points: 50	Points obtained:		ingstate manapy
Score:			
Name:		Date:	

Rubric- Presentation

Category	Score	Criteria
Grammar 5 points	4-5	Accurate use of the simple present, present continuous, simple past, and simple future tenses. Correct sentence structure: subject-verb agreement. Correct use of expressions studied in class. Infrequent use of isolated words.
	1-2-3	Inaccurate use of the simple present, present continuous, simple past, and simple future tenses. Frequent use of isolated words.
Vocabulary 10 points	8-9-10	Excellent use of vocabulary and expressions studied in class. Wide range of technical vocabulary. Use of appropriate and formal vocabulary related to physical therapy. No use of Spanish.
	5-6-7	Good use of vocabulary and expressions studied in class. Good range of technical vocabulary. Use of appropriate and formal vocabulary related to physical therapy. Some use of Spanish, but is able to carry on with the presentation.
	1-2-3- 4	Poor use of vocabulary and expressions studied in class. Use of informal or inappropriate vocabulary. Frequent use of Spanish. Unable to carry on with the presentation in the target language.
Fluency 10 points	8-9-10	Speech is effortless and smooth with a fluent speed. No long- pauses when presenting the topic. The speech is formal without reading from the presentation.
	5-6-7	Speech is mostly effortless and smooth with a regular speed. Few long-pauses and hesitation when presenting the topic. The speech is formal with occasional reading from the presentation.

	1-2-3- 4	Speech is slow and often hesitant. The speech is informal with frequent reading from the presentation.
Pronunciation 10 points	8-9-10	Excellent pronunciation of vocabulary studied in class. Correct stress and intonation when presenting the topic.
	5-6-7	Good pronunciation of vocabulary studied in class. Some stress and intonation errors when presenting the topic.
	1-2-3- 4	Poor pronunciation of vocabulary studied in class. Frequent stress and intonation errors while speaking.
	8-9-10	The topic is relevant to the field of physical therapy. The presentation has a coherent organization of ideas, easy to follow. Meaning is clear.
Content 10 points	5-6-7	The topic is related to the field of physical therapy. The presentation lacks organization of some ideas, but it is somewhat coherent and easy to understand.
	1-2-3- 4	The topic is poorly related to physical therapy. The presentation lacks a coherent organization of ideas. Meaning is obscure and difficult to follow.
Visual Aidsaudience understand the topic of the presentation. In mostly key words in the presentation.		Excellent use of visual aids to support the speech and help the audience understand the topic of the presentation. Includes mostly key words in the presentation.
5 points	1-2-3	Poor use of visual aids to support the speech. Includes large texts to read during the presentation.
Comments:		