

RUHANI COLLEGE · Registered Massage Therapy Diploma Program

COURSE SYLLABUS RU RMT 25 — Hydrotherapy | 10 Days · 70 Hours · 10 Lectures

This syllabus is the governing document for RU RMT 25. Where any other course document states a weighting, a passing requirement or a schedule that differs from what is set out here, this syllabus governs and the other document is to be corrected

1. Course Identification

Course code	RU RMT 25
Course title	Hydrotherapy
Institution	Ruhani College, Brampton, Ontario
Program	Registered Massage Therapy Diploma
Length	10 instructional days · 70 contact hours
Structure	10 lectures delivered across Days 1–8 · 7 contact hours per day · 4 blocks per day · written examinations Day 9 · practical examination Day 10
Prerequisites	None. RU RMT 12 Health & Safety is recommended as a co-requisite for its infection prevention and control content.
Delivery	In person at Ruhani College, Brampton, Ontario, and synchronously online via Zoom
Practical components	In person, on campus — mandatory. 20.25 hours of supervised hands-on demonstration and practice, 3.50 hours of practical examination review, and a 6.25-hour observed Final Practical Examination — 30.00 hours, 42.9% of contact time.
Passing standard	70% overall, a pass on the Final Practical Examination, and the six conditions in §8
Attendance requirement	70% of scheduled hours (49.0 of 70), all in-person practical sessions, and the Final Practical Examination
Governing standards	CMTCA Accreditation Standards for Massage Therapy Education Programs in Canada (2024); FOMTRAC Inter-Jurisdictional Practice Competencies and Performance Indicators (September 2016); CMTO Standards of Practice
Version	Version 2.0 · August 2026

2. Course Description

RU RMT 25 Hydrotherapy teaches the external therapeutic application of water — in any of its three states and across a range of temperatures — as an integral part of massage therapy care. Water is the oldest therapeutic agent in the profession and the one most often used carelessly. It is cheap, familiar and available in every clinic and every home, and precisely because of that familiarity students arrive believing that a hot pack is a low-risk intervention. It is not. Superficial thermal agents cause real and entirely preventable burns, and the clients most likely to be burned are the ones least able to tell you that they are being burned.

The course therefore treats hydrotherapy as a dosed intervention with a screen, a set of parameters, a monitoring routine and a record. It begins with the physical properties of water and the structure of the skin that receives it, then builds the dosing method — the temperature classification, the four variables of intensity, the inverse rule — and the sensory discrimination screen that must precede every application. It sets the professional frame next: scope and competence, the six elements of informed consent, draping and physical privacy, infection prevention and control, record keeping and professional misconduct. Only then does it move through the modalities themselves: local moist heat by thermophore, hydrocollator and alternating hot towels; paraffin wax and facial steam; the warm foot bath, dry brushing and salt glow; ice massage and cold packs; contrast baths and contrast towels; and finally additives, large-scale applications, wraps and compresses.

Roughly 43% of scheduled contact time is spent in supervised hands-on work at the table — 20.25 hours of laboratory practice, 3.50 hours of supervised rehearsal against the examination criteria, and a 6.25-hour observed practical examination. Hydrotherapy is a psychomotor competency: a student who can recite that a hydrocollator pack requires six to eight toweling layers and a skin check at five minutes has not yet demonstrated anything. The laboratory blocks are where the competency is built, the Day 9 rehearsal is where it is tested against the published standard, and the Day 10 examination is where it is certified. Attendance at all three is mandatory and cannot be substituted by a video link.

The course maps directly to the FOMTRAC Thermal Applications competencies 3.4a, 3.4b and 3.4c — perform and direct the patient/client in heat, cold and contrast applications, each at Cognitive Level 2 and Psychomotor Level 2 — together with the professional practice, therapeutic relationship, assessment and treatment competencies listed in full in the Competency Mapping and Curriculum Alignment document.

3. Course Learning Outcomes

On successful completion of RU RMT 25, students will be able to:

- CLO 1. Explain the physical and physiological basis of hydrotherapy — the thermal, mechanical and chemical properties of water, the mechanisms of heat transfer, and the structure and function of the skin as the treatment interface.
- CLO 2. Dose a thermal application using the standard temperature classification and the four variables of intensity, and verify protective sensation by a documented discrimination screen before every application.
- CLO 3. Practise hydrotherapy within the Ontario regulatory framework — scope and competence, informed consent, draping and physical privacy, infection prevention and control, record keeping, and the conduct that would constitute professional misconduct.
- CLO 4. Reason from the physiological effects of heat to its indications, absolute contraindications and cautions, and defend a documented decision to apply, modify or withhold heat for a staged presentation.
- CLO 5. Perform local moist-heat applications — thermophore, hydrocollator and alternating hot towels — to the taught parameters, including layering, skin checks, unit maintenance and burn prevention.
- CLO 6. Perform paraffin wax and facial steam applications safely, including working temperature, technique, distance and duration, unit hygiene and maintenance, and home-use instruction.
- CLO 7. Perform mechanical and derivative applications — warm foot bath, dry brushing and salt glow — with correct technique, endpoint recognition, draping and dignity, and per-client hygiene.
- CLO 8. Reason from the physiological effects of cold to its indications, contraindications and abnormal cold responses, and perform ice massage and cold pack application to the CBAN endpoint.
- CLO 9. Perform contrast therapy by bath and by towel to the standard sequence, ratio, phase durations and temperatures, and screen for the combined contraindications of heat and cold.
- CLO 10. Select, screen for and apply additives, large-scale applications and compresses; monitor systemic load; and integrate a hydrotherapy application into a documented massage therapy treatment plan with home care.

Every outcome is assessed by at least two independent instruments. The coverage matrix is at §7.3 and the full outcome → competency → assessment → vehicle mapping is in the Competency Mapping and Curriculum Alignment document.

4. Delivery Method, Attendance and Participation

4.1 How the course is delivered

RU RMT 25 is delivered concurrently in two modes. Students attend either in person in the classroom and hydrotherapy laboratory at Ruhani College, Brampton, Ontario, or synchronously online via Zoom. Online attendance is live and scheduled; there is no self-paced or asynchronous version of this course. Lecture decks, student handouts, the ten worksheets, the assignment brief, the three study guides and all class materials are issued directly to students in both modes.

Lecture and seminar blocks	In person, or live via Zoom. Cameras on. Students joining online are called on, take part in case discussion, and complete the worksheets on the same schedule as the in-person cohort.
Hands-on demonstration and practice	In person, on campus, mandatory. Sensory discrimination screening, hydrocollator, thermophore, hot towels, paraffin, facial steam, foot bath, dry brushing, salt glow, ice massage, cold packs, contrast baths, contrast towels and the compress laboratory cannot be taught, practised or verified over a video link. Temperature, layering, wringing, pressure and skin response are judged by hand and by eye at the table.
Consent and draping simulation	In person, on campus, mandatory. Draping for a foot bath and for a trunk towel sequence is performed on a partner and observed.
Quiz 01, Quiz 02 and the Final Quiz	Invigilated on campus. Where a student has been approved to write remotely, the paper is proctored live over Zoom: camera on, full desk and room visible, screen shared, no second device.
Final Practical Examination	In person, on campus, mandatory. It cannot be sat online, deferred to a video submission or substituted by any written instrument. A candidate who cannot attend on Day 10 on documented grounds is scheduled for a deferred sitting by the Program Director.

Because the practical components are in person and mandatory, a student enrolled in the online cohort must attend campus for the laboratory blocks on Days 1 to 8, for the practical examination review on the afternoon of Day 9, and for the Final Practical Examination on Day 10. Students are told this at enrolment and again in the Day 1 orientation block.

Because the practical components are in person and mandatory, a student enrolled in the online cohort must attend campus for the laboratory blocks on every one of the ten days. Students are told this at enrolment and again in the Day 1 orientation block.

4.2 Conduct in the online (Zoom) classroom

- Cameras are on for the whole of every taught block. A student who cannot keep a camera on must arrange this in advance with the instructor.
- Online students are called on by name during case discussion and are expected to answer, exactly as the in-person cohort is.
- Sessions are not recorded for redistribution. Where a block is recorded for an approved accommodation, the recording is released only to that student and is deleted at the end of the course.
- Nothing that identifies a real client, clinic or placement is discussed on the link. All course scenarios are constructed.
- Where a laboratory block is running in the room, online students observe the instructor demonstration on the link and then perform the technique themselves on campus. Observation is not a substitute for performance and is not recorded as practical attendance.

4.3 Attendance

Attendance is recorded for every block, in both modes. The requirement is 70% of the 70 scheduled contact hours — 49.0 hours — and attendance at all in-person practical sessions without exception. Late arrival and early departure are recorded and accumulate.

Attendance is a condition of completion in its own right (\$8) and is also Criterion 5 of the Professional Practice, Participation and Attendance component (Appendix A), which carries 10% of the final grade. These are two distinct uses of the same record and both apply.

4.4 Rationale for the delivery and assessment methods

This section is provided for CMTCA criterion 1.8, which requires a written rationale for the delivery and assessment method(s) used for each component of the curriculum, based on adult learning principles.

Concurrent in-person and Zoom theory	Adults learn best when instruction is accessible without being diluted. Live synchronous delivery preserves questioning, correction and case discussion — the elements that convert information into usable knowledge — while removing the travel and scheduling barriers that cause attrition. Recorded, self-paced delivery was rejected because it removes the correction loop.
In-person mandatory hands-on blocks	The competencies in this course are psychomotor (FOMTRAC 3.4a, 3.4b, 3.4c at Psychomotor Level 2). Skill is acquired by supervised performance with immediate corrective feedback and cannot be acquired by watching. Temperature judgement, layer count, wringing, pressure and the reading of skin response all require the instructor's hand and eye at the table.
Demonstration then supervised practice	Modelling before practice is the standard adult-learning sequence for a motor skill and reduces the rate at which an incorrect pattern is learned and then has to be unlearned. Every laboratory block runs demonstration first, then supervised practice with correction, then a record entry.
Practice in trios	Two students plus the instructor at each station gives every student the therapist role, the client role and the observer role. The client role is where students learn what an over-hot pack actually feels like; the observer role is where they learn to see what they will later be asked to correct.
Ungraded worksheets, one per lecture	Formative retrieval practice, spaced across ten days, is the single most efficient consolidation method available for parameter-heavy material. They are ungraded deliberately: the purpose is honest self-assessment, and marks make students conceal gaps rather than flag them.
Multiple-choice quizzes	Hydrotherapy is a parameter discipline — temperatures, durations, layer counts, ratios and exclusions. Multiple-choice assessment samples that base broadly and reliably, and its format is aligned with the multiple-choice component of the jurisdictional registration examination, which meets CMTCA criterion 2.14.
Integrative written assignment	Multiple-choice items cannot show whether a student can reason from a presentation to a defensible dose. The assignment carries the analysis, application and evaluation levels of the course and requires the student to justify a decision in writing to professional standard.
Observed professional practice	The affective and conduct competencies — consent, draping, dignity, hygiene, monitoring — are observable in the laboratory and nowhere else. Recording them at three checkpoints rather than once gives a student in difficulty warning before the grade is fixed.

A course that spends 30 hours at the table cannot certify competence on the strength of multiple-choice recall and a holistic conduct rating. The Final Practical Examination is criterion-referenced: the candidate performs on a person, under time, against a published checklist that the candidate has seen in advance. Publishing the marking sheet and the critical-fault list before the examination is deliberate — for a psychomotor safety competency the purpose of assessment is to make the standard explicit and reachable, not to catch the candidate out. Placing supervised rehearsal against the same criteria on the afternoon of Day 9 follows the same principle: adults perform a motor skill best when they have rehearsed it once under the conditions of the assessment.

5. Required and Recommended Learning Resources

5.1 Texts

Status	Reference and how it is used in this course
Required	Sinclair, M. (2008). <i>Modern Hydrotherapy for the Massage Therapist</i> . Baltimore, MD: Lippincott Williams & Wilkins. ISBN 978-0-7817-9209-7. <i>Primary course text. Carries hydrotherapy technique, dosage and the modality-by-modality protocols on which every practical block in this course is built.</i>
Required	Fritz, S. & Fritz, L. A. <i>Mosby's Fundamentals of Therapeutic Massage</i> . St. Louis, MO: Elsevier. 8th ed. (2024) ISBN 978-0-443-11720-6; 7th ed. (2021) ISBN 978-0-323-66183-6. <i>Program-carried text. Read for indications and contraindications, hygiene, sanitation and safety, and preparation for massage. Either edition serves this course; the student handouts cite the 7th edition and the chapter titles are unchanged in the 8th.</i>
Required	Salvo, S. G. (2023). <i>Massage Therapy: Principles and Practice</i> (7th ed.). St. Louis, MO: Elsevier. ISBN 978-0-323-87815-9. <i>Program-carried text. Read for its hydrotherapy, integumentary and clinical application chapters, and for sanitation and professional practice.</i>
Reference	Rattray, F. & Ludwig, L. (2000). <i>Clinical Massage Therapy: Understanding, Assessing and Treating Over 70 Conditions</i> . Toronto, ON: Talus Incorporated. <i>Canadian condition-by-condition hydrotherapy protocols. Used for staging and modality selection in Lectures 4, 8 and 9 and in the assignment.</i>
Reference	Werner, R. (2019). <i>A Massage Therapist's Guide to Pathology</i> (7th ed.). Philadelphia, PA: Wolters Kluwer. <i>Pathology-driven contraindication screening — vascular, neuropathic, integumentary and inflammatory conditions that change or exclude a thermal dose.</i>
Reference	Cameron, M. H. (2018). <i>Physical Agents in Rehabilitation: An Evidence-Based Approach to Practice</i> (5th ed.). St. Louis, MO: Elsevier. <i>Thermal physics, thermotherapy and cryotherapy evidence base. The authority behind the depth, duration and temperature figures taught in Lectures 4, 5 and 8.</i>
Reference	Tortora, G. J. & Derrickson, B. (2020). <i>Principles of Anatomy and Physiology</i> (16th ed.). Hoboken, NJ: Wiley. <i>Program-wide prescribed text. Integument, cutaneous circulation and thermoregulation for Lecture 1.</i>
Reference	Norris, T. L. (2019). <i>Porth's Essentials of Pathophysiology</i> (5th ed.). Philadelphia, PA: Wolters Kluwer. <i>Program-wide prescribed text. Inflammation, vascular and neuropathic pathophysiology behind the contraindication lists.</i>
Reference	Kisner, C., Colby, L. A. & Borstad, J. (2017). <i>Therapeutic Exercise: Foundations and Techniques</i> (7th ed.). Philadelphia, PA: F. A. Davis. <i>Program-wide prescribed text. Tissue healing stages and heat-assisted stretch, used in Lecture 4 and in the applied treatment plan.</i>
Reference	Biel, A. (2019). <i>Trail Guide to the Body</i> (6th ed.). Boulder, CO: Books of Discovery. ISBN 978-0-9987850-6-6. <i>Program-wide prescribed text. Surface anatomy for locating application sites in every practical block.</i>

Sinclair is the only text purchased for this course. Fritz, Salvo and the four program-wide prescribed texts are carried across the RMT Diploma Program and students already hold them. The reference texts are available in the program library.

5.2 Reading map by lecture

The following states what to read before each teaching day. The lecture decks are the taught content; the readings are the authority behind them. Where a source and a slide disagree, the source governs.

Lecture 1 · Day 1	Foundations of Hydrotherapy and the Skin
Primary text	Sinclair Ch. 1–2 — the properties of water, heat transfer and the scales of effect



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Supporting	Tortora & Derrickson — integumentary system and thermoregulation; Salvo — integumentary chapter
Primary sources	Massage Therapy Act, 1991; CMTO Standards of Practice (index)
Lecture 2 · Day 2	Temperature Therapy Guidelines and Sensory Screening
Primary text	Sinclair Ch. 2–3 — temperature classification, dosage variables and the reaction effect
Supporting	Cameron Ch. 6 — thermal agents and physiological response
Primary sources	CMTO Safety and Risk Management; CMTO Record Keeping
Lecture 3 · Day 3	Standards of Practice, Consent and Professional Accountability
Primary text	Sinclair Ch. 1 — professional considerations and record keeping
Supporting	Fritz Ch. 2 (Ethics, Professionalism and Legal Issues) and Ch. 7 (Hygiene, Sanitation and Safety); Salvo — professional practice and sanitation
Primary sources	RHPA 1991; MTA 1991; O. Reg. 544/94 s. 26; HCCA 1996; PHIPA 2004; CMTO Consent, Draping and Physical Privacy, Infection Prevention and Control, Record Keeping, Client-centred Care, Code of Ethics; PIDAC IPAC for Clinical Office Practice
Lecture 4 · Day 4	Physiological Effects of Heat and Clinical Decision-Making
Primary text	Sinclair Ch. 4 — the physiological effects of heat
Supporting	Cameron Ch. 8 — superficial thermotherapy; Werner — vascular, neuropathic and inflammatory conditions; Kisner, Colby & Borstad — tissue healing stages
Primary sources	CMTO Safety and Risk Management; CMTO Client-centred Care
Lecture 5 · Day 5	Local Moist Heat — Thermophore, Hydrocollator and Alternating Hot Towels
Primary text	Sinclair Ch. 5 — local moist heat applications
Supporting	Fritz Ch. 7 — equipment hygiene and safety; Salvo — hydrotherapy equipment
Primary sources	CMTO Infection Prevention and Control; manufacturer instructions for hydrocollator and thermophore units
Lecture 6 · Day 6	Paraffin Wax and Facial Steam Therapy
Primary text	Sinclair Ch. 5–6 — paraffin and vapour applications
Supporting	Cameron Ch. 8 — paraffin; Werner — integumentary contraindications
Primary sources	CMTO Infection Prevention and Control; CMTO Consent
Lecture 7 · Day 7	Mechanical and Derivative Applications — Warm Foot Bath, Dry Brushing and Salt Glow
Primary text	Sinclair Ch. 3 and Ch. 7 — immersion, friction and derivative applications
Supporting	Fritz Ch. 9 (Preparation for Massage) — draping and positioning; Biel — surface anatomy
Primary sources	CMTO Draping and Physical Privacy; CMTO Infection Prevention and Control
Lecture 8 · Day 8	Physiological Effects of Cold, Ice Massage and Cold Packs
Primary text	Sinclair Ch. 4 and Ch. 8 — the physiological effects of cold and cryotherapy applications
Supporting	Cameron Ch. 7 — cryotherapy; Werner — Raynaud's phenomenon, cold urticaria, peripheral vascular disease
Primary sources	CMTO Safety and Risk Management
Lecture 9 · Day 9	Contrast Therapy — Principles, Baths and Towels
Primary text	Sinclair Ch. 9 — contrast applications
Supporting	Rattray & Ludwig — condition protocols using contrast; Cameron — combined thermal agents
Primary sources	CMTO Client-centred Care; CMTO Consent
Lecture 10 · Day 10	Additives, Large-Scale Applications, Compresses and Course Review
Primary text	Sinclair Ch. 10–11 — additives, full-body immersion, wraps and compresses
Supporting	Rattray & Ludwig — home-care protocols; Salvo — client education and self-care
Primary sources	CMTO Consent (product information requirement); PHIPA; CMTO Record Keeping

5.3 Primary regulatory and best-practice sources

These are not purchased. They are the authoritative content base for the course, are provided or linked in class, and are the sources against which examination items are written.

Massage Therapy Act, 1991, S.O. 1991, c. 27 (Ontario)

Used in: Lecture 3 — scope of practice; Final Quiz Section on professional practice

Regulated Health Professions Act, 1991, S.O. 1991, c. 18 (Ontario)

Used in: Lecture 3 — the regulatory structure and controlled acts

O. Reg. 544/94 (General), s. 26 — Professional Misconduct, under the Massage Therapy Act, 1991

Used in: Lecture 3 — conduct that constitutes professional misconduct

Health Care Consent Act, 1996, S.O. 1996, c. 2, Sch. A (Ontario)

Used in: Lecture 3 — capacity, substitute decision-makers, elements of consent

Personal Health Information Protection Act, 2004, S.O. 2004, c. 3, Sch. A (Ontario)

Used in: Lecture 3 and Lecture 10 — records, retention, disclosure

CMTO Standard of Practice: Consent (approved 9 February 2021)

Used in: Lectures 3, 6, 9, 10 — the six elements; the requirement that consent cannot be obtained without product information; written consent for sensitive areas; documentation within 24 hours

CMTO Standard of Practice: Safety and Risk Management (approved 9 February 2021)

Used in: Lectures 2, 4, 5, 8 — screening, monitoring, incident response

CMTO Standard of Practice: Infection Prevention and Control

Used in: Lectures 3, 5, 6, 7 — tubs, basins, linens, brushes, wax and unit hygiene

CMTO Standard of Practice: Draping and Physical Privacy

Used in: Lectures 3, 7, 10 — body-surface and whole-body applications

CMTO Standard of Practice: Record Keeping

Used in: Lectures 3 and 10 — the defensible hydrotherapy record entry

CMTO Standard of Practice: Client-centred Care; Communication; Code of Ethics

Used in: All ten lectures — the professional frame of every application

Public Health Ontario / PIDAC. Infection Prevention and Control for Clinical Office Practice, 1st revision (April 2015)

Used in: Lectures 3, 5, 6, 7 — cleaning, disinfection and equipment reprocessing

Public Health Ontario / PIDAC. Routine Practices and Additional Precautions in All Health Care Settings

Used in: Lectures 3 and 5 — linen handling, hand hygiene, waste streams

FOMTRAC. Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-to-Practice (September 2016)

Used in: Course design, blueprint and assessment mapping

CMTCA. Accreditation Standards for Massage Therapy Education Programs in Canada (2024)

Used in: Course design, blueprint and assessment mapping

All CMTO Standards of Practice cited in this course were approved 9 February 2021 and published in the 2022 Standards of Practice set.

Currency is verified at cmto.com before every delivery of the course.

5.4 Course materials and physical resources

Instructional media	Ten lecture decks of 40 slides each — 400 slides across Lectures 1 to 10, with a standing book-citation slide and a standing regulatory-source slide in every deck.
Student handouts	Ten Student Handouts, one per lecture, each carrying the full lecture content in continuous form with learning outcomes, overview, key-terms glossary, summary, review questions, answers with discussion, and references.
Formative instruments	Ten Course Worksheets, one per lecture, ungraded, with a matching instructor Answer Key.
Student support	Quiz 01 Study Guide, Quiz 02 Study Guide and Final Quiz Study Guide — topic explanations with review questions and a discussion answer key at the end of each. No multiple-choice items appear in the study guides.
Assessment instruments	Quiz 01 and answer key; Quiz 02 and answer key; Final Quiz and answer key; Assignment Instructions, Assignment Rubric and Answer Key, and Assignment Marking Sheet; Final Practical Exam Stems, Final Practical Exam Instructor Instructions and Final Practical Exam Marking Sheet.
Hydrotherapy equipment	Hydrocollator tank with silica-gel packs in a range of sizes; thermophore moist-heat pads; paraffin bath units with paraffin and mineral oil; facial steamers; foot-bath and hand basins in pairs for contrast work; natural-bristle brushes; coarse and fine salt; digital and immersion thermometers; ice cups, cubed ice and reusable gel cold packs.
Linen and consumables	Full linen sets, dry toweling in quantity for layering, face cradles and covers, bolsters, plastic sheeting and paraffin liners, disposable cloths, covered hampers, waste streams, hospital-grade disinfectant with a stated DIN and contact time, detergent, alcohol-based hand rub and single-use hand towels.
Records and forms	Unit maintenance and temperature logs for the hydrocollator, thermophore and paraffin units; blank treatment-record forms; blank home-care instruction sheets; screening and consent record templates.
Teaching aids	Treatment tables, timers, skeleton and surface-anatomy charts, and a laminated parameter card for each station.

6. Course Schedule

6.1 How the 70 hours are used

Each day is 7 contact hours in four blocks. Breaks are additional to the contact hours shown. The hours model below is the basis of the Course Blueprint and sums exactly to 70.00.

Directed theory and facilitated discussion	28.50 h	Lecture delivery, worked dosing problems, case discussion, examination briefing and consolidation
Supervised hands-on demonstration and practice	20.25 h	In-person laboratory blocks across Days 1 to 8; instructor demonstration then supervised practice with correction
Practical examination review and supervised rehearsal	3.50 h	Day 9, Blocks 3 and 4 — station rotation run to examination conditions against the published marking criteria
Final Practical Examination	6.25 h	Day 10 — observed one-to-one assessment, 15 minutes per candidate
Guided review and worksheet completion	5.75 h	The ten Course Worksheets, worked in class with the instructor available
Assignment workshop	2.00 h	0.50 h on Days 3, 6, 7 and 8 — release and briefing, then Parts A and B, Part C, and Part D and referencing
Invigilated written assessment	2.50 h	Quiz 01 0.50 h (Day 5); Quiz 02 0.75 h and the Final Quiz 1.25 h (Day 9)
Orientation and safety briefing	0.50 h	Day 1, Block 1
Course close and results administration	0.75 h	Day 10, Block 4
Total contact hours	70.00 h	10 days × 7.00 hours

Supervised hands-on practice in the laboratory is 20.25 hours. Counted together with the 3.50 hours of supervised rehearsal on Day 9 it is 23.75 hours, 33.9% of contact time, and counted together with the 6.25-hour observed Final Practical Examination the course places 30.00 hours, 42.9% of contact time, in in-person practical work at the table. Adding the guided worksheet and assignment-workshop blocks, active and applied learning accounts for 37.75 hours, 53.9% of contact time.

6.2 Applied and simulated practice in this course

Every laboratory block runs to the same protocol, which is stated here so that students and reviewers can see what a practical hour in this course actually contains.

1. Instructor demonstration of the full technique at normal speed, then again with commentary, with the screening step and the record entry included rather than assumed.
2. Students work in trios — therapist, client and observer — and rotate through all three roles. Everybody performs; nobody only watches.
3. Consent is modelled and taken every time, including disclosure of any product used. Nobody undresses beyond what the technique requires, and draping is managed to the same standard as in clinic.
4. Every application is screened before it is given, at every station, every time, including on a partner whose sensation was screened yesterday.
5. Every application is timed and monitored, and skin is inspected at the stated checkpoint by lifting the agent fully rather than peering under it.
6. Every application ends with a record entry naming the modality, temperature, duration, layers or barrier, site, client response and any home-care advice.
7. Any student may stop any station at any moment, for any reason, without explanation. So may the instructor.

Students who are pregnant, who have a vascular, neurological or integumentary condition, or who have any reason not to receive a thermal application, tell the instructor privately before Day 2 and take the therapist and observer roles only. No student is required to disclose a reason.

6.3 Day-by-day schedule

Day 1 — Lecture 1: Foundations of Hydrotherapy and the Skin

Block 1 · 1.75 h	Course orientation, safety briefing and laboratory rules (0.50 h). Lecture 1 opens: hydrotherapy defined; the thermal, mechanical and chemical properties of water; specific heat, latent heat and thermal conductivity; why water is such an efficient thermal agent. <i>Reading and activity. Sinclair Ch. 1. Board work: sort every course modality by the property that leads it.</i>
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Block 2 · 1.75 h	Skin structure and appendages; the stratum corneum as the true barrier; cutaneous circulation; thermoreceptors and how a temperature change becomes a physiological response. <i>Reading and activity. Tortora & Derrickson — integument. Hands-on 0.50 h: partner skin inspection and palpation of regional skin temperature, with the language used to record what is found.</i>
Block 3 · 1.75 h	The five mechanisms of heat transfer with a course example of each. Local, reflex (consensual), derivative and systemic scales of effect. Hydrotherapy within the Ontario RMT scope of practice. <i>Reading and activity. Sinclair Ch. 2; Massage Therapy Act, 1991. Hands-on 0.50 h: supervised tour and safe-operation demonstration of the hydrocollator, paraffin unit, thermophore and basins.</i>
Block 4 · 1.75 h	Client and skin factors that change the dose that may safely be delivered. Consolidation and Worksheet 1. <i>Reading and activity. Hands-on 0.75 h: thermometer handling, temperature verification of tank, bath and basin, and recording the verified figure. Worksheet 1 (1.00 h).</i>
Day 1 total · 7.00 h	Lecture 1 · supervised hands-on 1.75 hours · Orientation 0.50 h · Worksheet 1 · professional practice observation begins

Day 2 — Lecture 2: Temperature Therapy Guidelines and Sensory Screening

Block 1 · 1.75 h	The standard hydrotherapy temperature classification in degrees Celsius and Fahrenheit; the working thermal window of approximately 10–43 °C; the four variables that set intensity and why they multiply; the inverse rule of thermal dosing. <i>Reading and activity. Sinclair Ch. 2–3. Worked dosing problems at the board.</i>
Block 2 · 1.75 h	Primary and secondary (reaction) effects; tonic against sedative dosing; the temperature thresholds at which tissue damage becomes likely and the mechanism of injury above 43 °C. <i>Reading and activity. Cameron Ch. 6. Hands-on 0.50 h: temperature-class identification drill — classify unlabelled basins by thermometer, then by hand, and compare.</i>
Block 3 · 1.75 h	Sensory screening laboratory. Hot/cold, sharp/dull and light-touch discrimination screens performed in pairs, in both directions, with vision occluded. <i>Reading and activity. Hands-on 1.75 h, in person, mandatory. Instructor demonstration, then supervised practice with correction. Sinclair Ch. 3.</i>
Block 4 · 1.75 h	Interpreting an abnormal or inconsistent screen; the three-part response — do not proceed as planned, modify or withhold, document and advise. Worksheet 2. <i>Reading and activity. Hands-on 0.75 h: writing the screen result and the resulting plan modification into a record entry. CMTO Record Keeping. Worksheet 2 (1.00 h).</i>
Day 2 total · 7.00 h	Lecture 2 · supervised hands-on 3.00 hours · Worksheet 2 · professional practice observation

Day 3 — Lecture 3: Standards of Practice, Consent and Professional Accountability

Block 1 · 1.75 h	The regulatory structure: RHPA, the Massage Therapy Act, 1991, O. Reg. 544/94 and the CMTO. Scope of practice against personal competence. The Standards of Practice most engaged by hydrotherapy. <i>Reading and activity. RHPA; MTA; CMTO Standards of Practice. Fritz Ch. 2.</i>
Block 2 · 1.75 h	Consent: the six elements of the discussion; the requirement that consent cannot be obtained where the therapist lacks information about risks, benefits and contraindications; capacity and substitute decision-makers under the HCCA; written consent for sensitive areas. Record keeping, PHIPA and professional misconduct. <i>Reading and activity. CMTO Consent; HCCA 1996; PHIPA 2004; O. Reg. 544/94 s. 26.</i>
Block 3 · 1.75 h	Consent and draping simulation laboratory. Each student conducts a full consent discussion for a named modality, discloses the product to be used, and drapes a partner for a foot bath and for a trunk towel sequence. <i>Reading and activity. Hands-on 1.75 h, in person, mandatory. CMTO Draping and Physical Privacy. Peer and instructor feedback against the six elements.</i>
Block 4 · 1.75 h	Infection prevention and control for tubs, basins, linens, brushes and units. The defensible hydrotherapy record entry. Assignment released and briefed. Worksheet 3. <i>Reading and activity. Hands-on 0.25 h: record-entry drill at the table. PIDAC IPAC for Clinical Office Practice. Assignment workshop 0.50 h. Worksheet 3 (1.00 h).</i>
Day 3 total · 7.00 h	Lecture 3 · supervised hands-on 2.00 hours · Assignment released and briefed (0.50 h) · Worksheet 3 · professional practice checkpoint 1 recorded

Day 4 — Lecture 4: Physiological Effects of Heat and Clinical Decision-Making

Block 1 · 1.75 h	The vascular response to local heat and its four mechanisms; metabolic, muscular and connective-tissue effects; nerve conduction, pain gating and interruption of the pain–spasm–pain cycle; tissue extensibility and the stretch window. <i>Reading and activity. Sinclair Ch. 4; Cameron Ch. 8; Kisner, Colby & Borstad — healing stages.</i>
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Block 2 · 1.75 h	Depth of penetration and the honest limits of superficial heat. Cardiovascular and systemic responses. Staging acute, subacute and chronic. Indications, absolute contraindications, cautions, and the medications that change the picture. <i>Reading and activity. Werner — vascular, neuropathic and inflammatory conditions. Rattray & Ludwig — condition protocols.</i>
Block 3 · 1.75 h	Screening and decision laboratory. Staged case stations: students screen a partner, stage the presentation, select or withhold heat, state the parameters, and justify the decision aloud. Erythema recognition and palpation before and after a warm application. <i>Reading and activity. Hands-on 1.75 h, in person, mandatory. CMTO Safety and Risk Management.</i>
Block 4 · 1.75 h	Documenting the rationale for using or withholding heat to professional standard. Worksheet 4. <i>Reading and activity. Hands-on 0.50 h: writing the decision and its rationale into a record entry. Worksheet 4 (1.00 h).</i>
Day 4 total · 7.00 h	Lecture 4 · supervised hands-on 2.25 hours · Worksheet 4 · professional practice observation
Day 5 — Lecture 5: Local Moist Heat — Thermophore, Hydrocollator and Alternating Hot Towels	
Block 1 · 1.75 h	How each of the three modalities produces moist heat. Working temperature, toweling requirement and duration for each. The two mechanisms behind almost every moist-heat burn. Compression burns. <i>Reading and activity. Sinclair Ch. 5. Hydrocollator 71–77 °C, 6–8 layers, 15–20 min, skin check at five.</i>
Block 2 · 1.75 h	Hydrocollator laboratory. Tank and water-level check, pack selection, layering, application, five-minute skin check by lifting the pack fully, removal, skin inspection and record entry. <i>Reading and activity. Hands-on 1.75 h, in person, mandatory. Instructor demonstration then supervised practice.</i>
Block 3 · 1.75 h	Selecting between the three modalities for region, client and treatment goal. Unit inspection, cleaning, storage and the maintenance record. Thermophore laboratory. <i>Reading and activity. Hands-on 0.75 h: thermophore application, momentary switch discipline, layering and monitoring. CMTO Infection Prevention and Control.</i>
Block 4 · 1.75 h	Alternating hot towels laboratory. Worksheet 5. Quiz 01 (30 minutes, Lectures 1–5). <i>Reading and activity. Hands-on 0.50 h: wringing, temperature, exchange every two to three minutes, continuous contact. Worksheet 5 (0.75 h). Quiz 01 (0.50 h).</i>
Day 5 total · 7.00 h	Lecture 5 · supervised hands-on 3.00 hours · Quiz 01 written at the end of the day (0.50 h) · Worksheet 5
Day 6 — Lecture 6: Paraffin Wax and Facial Steam Therapy · Lecture 7: Mechanical and Derivative Applications — Warm Foot Bath, Dry Brushing and Salt Glow	
Block 1 · 1.75 h	Paraffin: the bath at 51–54 °C, latent heat of fusion, the insulating glove, dip-and-wrap and paint methods. Steam: latent heat of vaporisation, why steam at a given temperature burns more severely than water, and why distance rather than measured temperature is the controlling parameter. Indications, contraindications and cautions for both modalities, home-use advice with explicit stop criteria, and unit cleaning, wax replacement and the maintenance record. <i>Reading and activity. Sinclair Ch. 5–6; Cameron Ch. 8; CMTO Infection Prevention and Control.</i>
Block 2 · 1.75 h	Paraffin laboratory. Screening and skin inspection, unit and temperature check, six to twelve dips, wrapping, the 15–20 minute rest, removal, single-client wax disposal, and completion of a maintenance record. <i>Reading and activity. Hands-on 1.75 h, in person, mandatory.</i>
Block 3 · 1.75 h	Facial steam laboratory. Distance at approximately 30 cm, 5–10 minutes, continuous monitoring, additive and airway caution. Worksheet 6. Lecture 7 opens: the warm foot bath and its local, reflex and derivative effects; hydrostatic pressure and buoyancy; dry brushing and the salt glow, with brush selection, direction, friction and the damp-and-crumblily consistency. <i>Reading and activity. Hands-on 0.25 h. Worksheet 6 (0.50 h). Sinclair Ch. 3 and Ch. 7 (1.00 h).</i>
Block 4 · 1.75 h	Mechanical and derivative laboratory. Warm foot bath set-up, draping and monitoring; dry brushing to the even-pink endpoint; salt glow preparation, section-by-section friction and clean-up. Worksheet 7. Assignment workshop 1 — Parts A and B, sources and structure. <i>Reading and activity. Hands-on 1.00 h, in person, mandatory. CMTO Draping and Physical Privacy. Worksheet 7 (0.25 h). Workshop 0.50 h.</i>
Day 6 total · 7.00 h	Lectures 6 and 7 · supervised hands-on 3.00 hours · Assignment workshop 1 (0.50 h) · Worksheets 6 and 7 · professional practice checkpoint 2 recorded

Day 7 — Lecture 8: Physiological Effects of Cold, Ice Massage and Cold Packs

Block 1 · 1.75 h	The vascular response to cold; reactive vasodilation and the Hunting response; effects on nerve conduction, pain, muscle spasm and metabolism. The CBAN sequence as a dosing tool and how to brief a client on it before beginning.
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Reading and activity. Sinclair Ch. 4 and Ch. 8; Cameron Ch. 7.

Block 2 · 1.75 h Ice massage laboratory. Preparation, CBAN briefing to the partner, focal moving technique, five to ten minutes to numbness, skin inspection and record entry.

Reading and activity. Hands-on 1.75 h, in person, mandatory.

Block 3 · 1.75 h Indications and contraindications; abnormal cold responses that must be screened by history — cold urticaria, Raynaud's phenomenon, cryoglobulinaemia; frostbite and cold-injury recognition; cold within an acute-injury management framework; home-use advice.

Reading and activity. Werner. Hands-on 0.25 h: barrier selection and preparation drill for cold packs.

Block 4 · 1.75 h Cold pack laboratory. Damp-cloth barrier, application, the 10–20 minute ceiling and monitoring. Worksheet 8. Assignment workshop 2 — Part C, the applied treatment plan.

Reading and activity. Hands-on 0.75 h, in person, mandatory. Worksheet 8 (0.50 h). Workshop 0.50 h.

Day 7 total · 7.00 h Lecture 8 · supervised hands-on 2.75 hours · Assignment workshop 2 (Part C, 0.50 h) · Worksheet 8 · professional practice observation

Day 8 — Lecture 9: Contrast Therapy — Principles, Baths and Towels · Lecture 10: Additives, Large-Scale Applications and Compresses

Block 1 · 1.75 h The vascular pump mechanism. Begin hot, end cold; hot phase three to four minutes, cold phase thirty to sixty seconds, an approximate 3:1 ratio, three to four cycles. Contrast carries the contraindications of both heat and cold. Contrast as a subacute modality and the requirement to re-stage at every visit. Teaching contrast bathing as home care with explicit stop criteria.

Reading and activity. Sinclair Ch. 9; Rattray & Ludwig. Worksheet 9 begins (0.25 h).

Block 2 · 1.75 h Contrast laboratory. Two-basin set-up for hand and for foot, hot basin at 38–43 °C and cold at 10–16 °C, thermometer-verified and maintained across the sequence, cycle timing and record entry; then contrast towels for the back, neck, shoulders and trunk, with draping.

Reading and activity. Hands-on 1.75 h, in person, mandatory.

Block 3 · 1.75 h Worksheet 9. Lecture 10: additives and the chemical property of water; allergy and sensitivity screening, patch testing, dilution and recording. The neutral bath, full immersion and the wet-sheet wrap in three stages; surface area as the dominant safety variable. The mustard plaster and the castor oil pack.

Reading and activity. Worksheet 9 (0.25 h). Sinclair Ch. 10–11; CMTO Consent — the product-information requirement (1.50 h).

Block 4 · 1.75 h Compress laboratory: mustard plaster prepared at 1:4 to 1:8 with a cloth barrier and a firm 15–20 minute ceiling; castor oil pack at 30–60 minutes; additive patch-test drill. The universal application checklist from screening to documentation. Worksheet 10. Assignment workshop 3 — Part D and referencing. Assignment due at the end of the day.

Reading and activity. Hands-on 0.75 h, in person, mandatory. Worksheet 10 (0.50 h). Workshop 0.50 h.

Day 8 total · 7.00 h Lectures 9 and 10 · supervised hands-on 2.50 hours · Assignment workshop 3 and assignment due (0.50 h) · Worksheets 9 and 10 · all taught content complete

Day 9 — Written Examinations and Final Practical Examination Review

Block 1 · 1.75 h Examination briefing: conduct, timing, permitted materials and the remote-proctoring arrangement. Quiz 02 (40 minutes, Lectures 6–10). Consolidation and question period across the modality parameters before the cumulative paper.

Reading and activity. Briefing 0.25 h. Quiz 02 (0.75 h). Consolidation 0.75 h.

Block 2 · 1.75 h Final Quiz (60 minutes, Lectures 1–10, cumulative). Paper collection, close-out and the issue of the Final Practical Examination stem sheet, the marking criteria and the critical-fault list to every candidate.

Reading and activity. Final Quiz (1.25 h). Close-out and stem issue 0.50 h.

Block 3 · 1.75 h Final Practical Examination review, rotation 1. Supervised rehearsal at the heat stations — hydrocollator, thermophore, alternating hot towels, paraffin and warm foot bath — run to examination conditions against the published marking sheet, with the screening step, the consent discussion and the record entry performed in full.

Reading and activity. Hands-on 1.75 h, in person, mandatory. Peer and instructor feedback against the published criteria.

Block 4 · 1.75 h Final Practical Examination review, rotation 2. Supervised rehearsal at the cold and contrast stations — ice massage, cold packs, contrast foot and hand baths, contrast towels. The eight critical faults walked through at the table. Professional practice checkpoint 3 recorded.

Reading and activity. Hands-on 1.75 h, in person, mandatory. CMTO Safety and Risk Management; CMTO Consent.

Day 9 total · 7.00 h Quiz 02 · Final Quiz · practical examination review 3.50 hours · professional practice checkpoint 3 recorded (grade of record)

Day 10 — Final Practical Examination

Block 1 · 1.75 h Final Practical Examination. Room set-up verified, equipment temperatures checked and recorded, peer clients confirmed and screened. Candidates examined one at a time: 2 minutes preparation, 10 minutes assessed performance, 3 minutes changeover and marking. Candidates not yet examined wait outside the examination room and do not observe.

Assessed. In person, on campus, mandatory. Marked out of 30 against the published marking sheet.

Block 2 · 1.75 h Final Practical Examination continues. Equipment temperatures re-checked and recorded at the midpoint of the session.

Assessed. Stems assigned so that the cohort covers heat, cold and contrast applications, and no two consecutive candidates receive the same stem.

Block 3 · 1.75 h Final Practical Examination continues. Any stopped attempt is recorded on the marking sheet with the reason, the client attended to first and the incident record completed afterwards.

Assessed. Marking is completed as each attempt is observed, not from memory afterwards.

Block 4 · 1.75 h Final Practical Examination concludes (1.00 h). Course close: cohort feedback on the examination, results administration, remediation and supplemental-attempt planning, and the anonymous course evaluation.

Assessed, then course close 0.75 h. Verbal feedback is given only once the whole cohort has been examined.

Day 10 total · 7.00 h Final Practical Examination 6.25 hours · course close 0.75 h · course evaluation completed

Assessment scheduling note. Quiz 02 covers Lectures 6 to 10 and the Final Quiz is cumulative, so both fall after the last taught lecture, which is now Lecture 10 on Day 8. Both are written on the morning of Day 9, which leaves the afternoon of Day 9 for supervised rehearsal against the published practical criteria and the whole of Day 10 for the examination itself. Where a cohort is large enough that Day 10 cannot accommodate every candidate at 15 minutes each, the Program Director schedules the overflow on the next program assessment day; no weighting changes.

7. Assessment

7.1 Assessment scheme

Assessment	Format	Marks	Weight	When
Quiz 01	25 multiple-choice items, 30 minutes, closed book	25	15%	End of Day 5
Quiz 02	30 multiple-choice items, 40 minutes, closed book	30	15%	Day 9, morning
Final Quiz	50 multiple-choice items, 60 minutes, closed book	50	30%	Day 9, morning
Final Practical Examination	Observed practical station, 2 min preparation + 10 min performance	30	20%	Day 10
Integrative Written Assignment	1,500–2,000 words, APA, four parts Day 8	100	10%	Released Day 3 · due
Professional Practice, Participation & Attendance	rubric checkpoints Days 3, 6, 9	20	10%	Continuous observation against the Appendix A Throughout ·

Total 100%

Marks are converted to a percentage score for each component, the score is multiplied by the component weight, and the weighted figures are summed. Round once, at the end. Rounding each line separately can move the total by a tenth of a percent and decide a pass at the 70% boundary. The Final Practical Examination converts as the mark out of 30 divided by 30 and multiplied by 20 — a raw 24 of 30 is 80%, which is 16.0 of the available 20.

The ten Course Worksheets are ungraded. They carry no marks and no weight, they have no row on the Final Marking and Course Completion Sheet, and completion of all ten is a condition of completion assessed under Criterion 4 of the Appendix A rubric. Everything in them is examinable.

7.2 What each instrument does

Quiz 01 — 15%	Twenty-five multiple-choice items, 30 minutes, closed book, written at the end of Day 5. Covers Lectures 1 to 5: foundations, temperature and screening, standards and consent, heat, and local moist heat. Assesses CLOs 1, 2, 3, 4 and 5. Its purpose is to verify the physical, dosing and screening base before the technique-heavy second half of the course begins.
Quiz 02 — 15%	Thirty multiple-choice items, 40 minutes, closed book, written on the morning of Day 9. Covers Lectures 6 to 10: paraffin and steam, mechanical applications, cold, contrast, and additives and review. Assesses CLOs 6, 7, 8, 9 and 10.



Fifty multiple-choice items, 60 minutes, closed book, written on the morning of Day 9. Cumulative across all ten lectures, with a substantial professional-practice section covering consent, records, PHIPA, misconduct and infection prevention, and a closing set of integrative clinical scenarios. Assesses all ten CLOs and is the principal evidence of retention across the course.

Final Practical Examination — 20%

An observed one-to-one practical station on Day 10, marked out of 30 against a published criterion-referenced marking sheet: treatment plan and informed consent 10 marks, hydrotherapy application 20 marks. The candidate is given a stem naming a modality, a treatment area and a stage, then has 2 minutes to prepare and 10 minutes to screen the client, obtain informed consent and deliver the application to the taught parameters. Eight set stems cover heat, cold and contrast. A pass requires 21 of 30 with no critical fault; the eight critical faults are published in advance and any one of them is an automatic fail. This is the only instrument in the course that assesses psychomotor competence against a checklist rather than describing it, and it carries all of the criterion-referenced performance evidence for FOMTRAC 3.4a, 3.4b and 3.4c at Psychomotor Level 2.

Integrative Written Assignment — 10%

A 1,500 to 2,000 word paper in APA style, marked out of 100 against a published rubric and answer key. Released Day 3, due Day 8. Four parts: A foundations and rationale (20), B clinical reasoning and decision-making (25), C applied treatment plan (25), D professional practice and reflection (20), with 10 marks for communication, structure and integrity. Part C requires a full plan under six named sub-headings for one of three given scenarios. Assesses all ten CLOs and carries the analysis and evaluation evidence in the course.

Professional Practice — 10%

Marked out of 20 against the five-criterion rubric at Appendix A, recorded at three checkpoints — end of Day 3, end of Day 6, end of Day 9. The Day 9 record is the grade of record and is taken before the Final Practical Examination, so that a student whose conduct is unsatisfactory is remediated before being examined. This component carries the observed evidence of safe, consented, hygienic conduct across the laboratory programme, and the completion of the ten worksheets.

7.3 Outcome coverage

Assessment	1	2	3	4	5	6	7	8	9	10
Quiz 01	X	X	X	X	X	—	—	—	—	—
Quiz 02	—	—	—	—	—	X	X	X	X	X
Final Quiz	X	X	X	X	X	X	X	X	X	X
Final Practical Examination	—	X	X	X	X	X	X	X	X	X
Integrative Written Assignment	X	X	X	X	X	X	—	X	X	X
Professional Practice & Attendance	X	X	X	X	X	X	X	X	X	X
Independent sources	4	5	5	5	5	5	4	5	5	5

Every outcome is assessed by at least four independent instruments, against a required two. CLO 1 (foundations) and CLO 7 (mechanical and derivative applications) are the thinnest at four. CLO 1 is not separately examinable in a practical station because it is the physical and physiological base beneath every station rather than a technique in itself. CLO 7 carries no assignment marks, because the three Part C scenarios are a moist-heat, a contrast and a paraffin presentation; it is assessed by Quiz 02, by the Final Quiz, by observation in the Day 6 laboratory and by practical examination stem H, the warm foot bath. The addition of the Final Practical Examination raises eight of the ten outcomes from four independent sources to five.

8. Passing Requirements

A student passes RU RMT 25 only when all six of the following are met. Failure of any one is an unsuccessful completion regardless of the other five.

- Minimum overall grade 70% of the weighted total across the six components in §7.1.
- All graded assessments completed Quiz 01, Quiz 02, the Final Quiz, the Final Practical Examination and the Integrative Written Assignment must all be written, sat or submitted. The Professional Practice component is recorded by the instructor and requires attendance to generate.
- Final Practical Examination passed A minimum of 21 of 30 (70%) on the Final Practical Examination with no critical fault recorded. This is the only component carrying a separate pass mark, because it is the sole criterion-referenced evidence that the student can perform a hydrotherapy application safely on a person. A student who does not meet it is entitled to one supplemental attempt, scheduled by the Program Director.

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| 4. All learning activities completed | All ten Course Worksheets complete. Assessed under Criterion 4 of Appendix A and recorded on the Final Marking and Course Completion Sheet. |
| 5. Attendance | 70% of the 70 scheduled contact hours — 49.0 hours — and attendance at every in-person practical session and at the Final Practical Examination. |
| 6. Safety and professional conduct | The essential safety and conduct requirements of Appendix A are met. An Unsatisfactory on Criterion 1 (Safety, screening and hygiene conduct) at the Day 9 checkpoint requires a remediation plan and a repeat supervised demonstration of safe application before the student may sit the Final Practical Examination, whatever the weighted total. |

Apart from the Final Practical Examination, there is no separate pass mark on an individual component. A student may perform poorly on one written instrument and still pass the course, provided the weighted total reaches 70% and the other five conditions are met. The 70% figures printed on the quiz papers are diagnostic remediation triggers, not pass gates.

8.1 Grading scale

Letter	Percentage	Standing	Descriptor
A	90–100%	Pass	Outstanding — comprehensive, accurate, consistently well applied
B	80–89%	Pass	Very good — accurate with minor gaps
C	70–79%	Pass	Satisfactory — meets the minimum program standard
F	60–69%	Fail	Below standard — remediation and reassessment considered
F	Below 60%	Fail	Unsatisfactory — remediation plan required

Carried from RU RMT 01 for program consistency. F spans two bands and they are not equivalent: 60–69% may lead to reassessment, below 60% requires a remediation plan. Record the percentage, not only the letter.

9. Academic Policies

Academic integrity	All assessments are governed by the Ruhani College Academic Integrity Policy. For the assignment, submitted work must be the student's own, sources must be cited in APA style, and text generated by an artificial-intelligence tool and presented as the student's own reasoning is a breach. Substantiated breaches are recorded and may result in a mark of zero on the component or failure of the course.
Examination conduct	Possessing unauthorized material at the desk, communicating with another candidate, using a second device, or removing or distributing examination content are breaches. For remotely proctored papers, leaving the camera view without permission is treated as a breach.
Late submission	The assignment attracts a deduction of 10% of the earned grade per calendar day late, to a maximum of five days, after which it is recorded as not submitted. Extensions are granted only in advance and only on documented grounds.
Missed assessment	A missed quiz is recorded as zero unless the absence is documented and approved, in which case a deferred sitting is scheduled. A missed laboratory block must be made up in a supervised session before the Day 9 checkpoint; it cannot be waived, because the course cannot certify a competency it has not observed.
Accommodation	Students with an approved accommodation plan receive the accommodations on file for all components — extended writing time, a separate room, a modified station layout, a written prompt card, or a modified role in the laboratory, as the plan specifies. Accommodation adjusts how a competency is demonstrated; it does not lower the safety standard, and the screening and monitoring requirements are not waived.
Health and practical participation	A student who should not receive a thermal application tells the instructor privately and takes the therapist and observer roles only, without loss of marks and without any requirement to state a reason.
Appeals	Grade and assessment appeals are made under Ruhani College policy RC-ACA-001 within the stated window.
Student records	Marks, checkpoint records, worksheet completion records and the completed Final Marking and Course Completion Sheet are filed in the student record and are confidential. Any personal health information disclosed in the course of a laboratory block or the assignment is handled under PHIPA.

10. Course Evaluation and Quality Improvement

Students complete an anonymous course evaluation at the end of Day 10, after the practical examination and before results are released. The evaluation covers the clarity of the taught material, the adequacy of laboratory time and equipment, the usefulness of the handouts and study guides, the fairness of the assessments, and the quality of instruction in both the in-person and the online mode. Results are tabulated by the program office, shared with the instructor and the Faculty Head, and reviewed at the program quality meeting. Actions taken as a result are recorded in the course file and reported to students at the start of the next delivery. This meets CMTCA criteria 2.5, 7.1, 7.4 and 7.5.

Item-level analysis of the three quizzes, and a review of the mark distribution and critical-fault record of the Final Practical Examination, are carried out after every delivery. Items with a facility below 0.30 or a negative discrimination index are reviewed before the paper is used again, and any change is recorded in the Course Blueprint version history.

Appendix A — Professional Practice, Participation and Attendance Rubric

Marked out of 20. Four marks per criterion. Recorded at three checkpoints — end of Day 3, end of Day 6, end of Day 9. The Day 9 record is the grade of record, taken before the Final Practical Examination.

1. Safety, screening and hygiene conduct

In the laboratory, at the table, and around tanks, baths, basins, wax and product

4 — Exemplary	Consistently safe and hygienic without prompting; screens before every application; self-corrects aloud; protects partners and equipment
3 — Proficient	Safe and hygienic; screens reliably; occasional minor lapse corrected on a single prompt
2 — Developing	Needs repeated prompting; lapses recur within the same session; screening sometimes omitted
0–1 — Unsatisfactory	Unsafe or unhygienic conduct, an unscreened application, or a lapse that placed another person at risk. Triggers the §8 condition.

2. Consent, draping and respect for the person

In all partner and simulated work

4 — Exemplary	Seeks and confirms consent every time, including product information; drape and dignity managed without being asked
3 — Proficient	Consent and draping consistently correct with minor prompting
2 — Developing	Inconsistent; consent or drape sometimes assumed rather than obtained
0–1 — Unsatisfactory	Proceeded without consent, applied a product without disclosing it, or exposed a partner unnecessarily

3. Applied technique and professional engagement

In person in the laboratory and live on Zoom for the taught blocks

4 — Exemplary	Prepared, present, camera on; technique accurate to the taught parameters; monitors the partner throughout; supports peers' learning
3 — Proficient	Prepared and engaged; technique broadly accurate; contributes when invited
2 — Developing	Passive; technique inconsistent or approximate; preparation inconsistent
0–1 — Unsatisfactory	Disengaged, absent from practice, or disruptive

4. Completion of required learning activities

The ten Course Worksheets, one per lecture

4 — Exemplary	All ten complete and on schedule, in the student's own words, with honest gaps flagged
3 — Proficient	Substantially complete and broadly on schedule
2 — Developing	Partially complete, or completed late and in bulk
0–1 — Unsatisfactory	Largely or wholly incomplete

5. Attendance and punctuality

Across the 70 scheduled hours

4 — Exemplary	Full attendance; punctual to every block; present for all in-person practical sessions
3 — Proficient	At or above 90%; isolated lateness, notified
2 — Developing	Between 70% and 90%, or repeated lateness
0–1 — Unsatisfactory	Below 70%, or absent from a mandatory in-person practical session

A rating of Unsatisfactory on Criterion 1 at the Day 9 checkpoint is not merely a low mark. It triggers the safety condition in §8 requirement 6: a remediation plan and a repeat supervised demonstration of safe application are required before the student may sit the Final Practical Examination, regardless of the weighted total.



Version Control and Approval

Version 1.0 · August 2026

First issue of the RU RMT 25 syllabus. Established the five-component assessment scheme, the in-person and live-Zoom delivery model, the required texts and reading map, the ten-day block schedule, the supervised practical programme and the passing conditions. Author: curriculum development, RMT Diploma Program.

Version 2.0 · August 2026

Adds the Final Practical Examination as a graded component and re-weights the scheme to six components (Quiz 01 15%, Quiz 02 15%, Final Quiz 30%, Final Practical Examination 20%, Integrative Written Assignment 10%, Professional Practice, Participation and Attendance 10%). Restructures the schedule: Lectures 1 to 10 are now delivered across Days 1 to 8, Day 9 carries the two written papers in the morning and practical examination review in the afternoon, and Day 10 is the Final Practical Examination and course close. Adds a sixth passing condition requiring a pass on the practical examination. The hours model, the day-by-day schedule, the outcome coverage matrix and the Appendix A checkpoint days are revised accordingly. Author: curriculum development, RMT Diploma Program.

Course instructor

Program Director

Academic review
