

Financial Fact Sheet 2023-2024



Introduction: The American Board of Physical Therapy Residency and Fellowship Education (ABPTRFE) has created this Financial Fact Sheet to provide financial transparency to applicants on the true costs to undergo residency and fellowship education.

Instructions: The program will complete Part 1 of this form and publish it on the program’s website. The applicant will complete Part 2 of this form.

Part 1: To be Completed by the Program

Program Information

Program Information

Name of Program: USAF Orthopaedic Physical Therapy Residency

Physical Address: 1100 Wilford Hall Loop, JBSA - Lackland AFB, TX 78236

Program Hours

Educational Hours: 375

Patient-Care Clinic / Practice Hours (inclusive of mentoring): 1584

Mentoring Hours: 160

Program Travel

Please indicate if participants are required to travel greater than 50 miles for any aspect of patient-care clinic/practice hours (does not include daily commute): Select appropriate entity.

Please indicate if participants are required to travel greater than 50 miles for any aspect of educational hours: Select appropriate entity.

Participant Costs

The program will provide all costs associated with this program.

Type of Cost	Year One	Year Two	Year Three	Total
Fees <i>Enter the amount of fees associated with the program (if applicable). Fees are any amount \$1,000 or less. If more than \$1,000, please enter that amount under tuition.</i>	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
<input type="checkbox"/> Fees for this program include: <input type="checkbox"/> CPR <input type="checkbox"/> EMR				

<input checked="" type="checkbox"/> APTA-Related Professional Membership <input checked="" type="checkbox"/> Dues (APTA, Section/Academy) <input type="checkbox"/> Other Professional Membership Dues <input type="checkbox"/> Other: Indicate other fees.				
Tuition (if applicable)	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Curriculum Costs (not included in tuition above)	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Required textbooks, software, apps (not included in program fees)	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Application Fees (program assessed above and beyond RF-PTCAS)	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Conference Registration Fees (not included in fees above)	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Travel Costs (for program education requirements and conference attendance, if applicable)	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Parking/Mass-Transit Fees	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Mentoring Fees	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Malpractice Insurance	\$ Covered by US Feres Doctrine	\$ N/A	\$ N/A	\$ N/A
Other program costs not included above: List other costs.	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Total Program Costs	\$ 0.00	\$ Enter amount.	\$ Enter amount.	\$ Tally row amounts.

Program Sponsored Financial Assistance

The program will provide any financial assistance provided to participants.

Type of Financial Assistance	Year One	Year Two	Year Three	Total
Salary Paid by Program	\$ Salary Commiserate with Rank and Time in Service	\$ Enter amount.	\$ Enter amount.	\$ N/A
Student Financial Aid (for tuition fee programs only)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Graduate Assistantship(s)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Other Assistantship(s)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Scholarships	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Travel Costs/Stipends	\$ Per Diem pay when on USAF travel	\$ N/A	\$ N/A	\$ N/A
Student Financial Aid (for tuition fee programs only)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
ABPTS Board-Certification Examination Fees	\$ Full reimbursement	\$ N/A	\$ N/A	\$ N/A
Other financial assistance not included above: No	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Total Financial Assistance	\$ 87, 264.60 Gross pay	\$ 0.00	\$ 0.00	\$ Tally row amounts.

Part 2: To be Completed by the Applicant

Program Information – This information can be found on the [ABPTRFE Online Directory](#)

Program Structure

Program Type: Multi-Site

Program Format: Full-Time

Program Length: 12 months.

2nd Program Format: Select 2nd program format, if applicable.

2nd Program Length: Enter the 2nd program length in months, if applicable

Number of Participant Positions Each Calendar Year: Determined by USAF Health Professions Education Review Board

Program Applicant Information

Application Deadline Date: Determined by USAF Health Professions Accession Board

Program Start Date: 03 January

2nd Application Deadline Date (if applicable): Enter the 2nd program application deadline date, if applicable.

Program 2nd Start Date: Enter the 2nd program start date, if applicable.

3rd Application Deadline Date (if applicable): Enter the 3rd program application deadline date, if applicable

Program 3rd Start Date: Enter the 3rd program start date, if applicable.

4th Application Deadline Date (if applicable): Enter the 4th program application deadline date, if applicable

Program 4th Start Date: Enter the 4th program start date, if applicable.

Format for Educational Hours: In-person

Affiliated Practice Site Locations: All within close proximity to program's main address

Mentor Appointment to Faculty: Mentors identified by program

Mentor Accessibility: On-site

Applicant Financial Considerations

The applicant will consider the following related to their finances.

Participant Financial Consideration	Year One	Year Two	Year Three	Total
Salary Earned (<i>input your salary, not paid by the program, if you plan to continue</i>)	\$ 0.00	\$ N/A	\$ N/A	\$ N/A

<i>your employment while undergoing the program)</i>				
License Fees	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Malpractice Insurance (<i>not covered by program</i>)	\$ 0.00	\$ N/A	\$ N/A	\$ N/A
Cost of Living Expenses (Forbes Cost of Living Calculator)	\$ Enter amount.	\$ N/A	\$ N/A	\$ N/A
Student Loan Payments (<i>if unable to defer during program</i>)	\$ eligible for reimbursement and PSLF program	\$ N/A	\$ N/A	\$ N/A
Subtotal	\$ Enter amount.	\$ N/A	\$ N/A	\$ N/A
Loan Forgiveness (<i>if eligible</i>)	\$ Variable	\$ N/A	\$ N/A	\$ N/A
Total Participant Financial Considerations	\$ No	\$ No	\$ No	\$ Tally row amounts.

Applicant Financial Debt Summary

The applicant will utilize the total program costs, total program financial assistance, and total participant financial consideration, along with their current debt to calculate the cost-benefit ration of completing this program.

Debt	Total
Debt at time of admission to program (<i>current student loan debt</i>)	\$ Enter total current debt.
Total program costs (<i>enter amount from total costs for entire length of program located above</i>)	\$ 0.00
Total participant financial considerations (<i>enter amount from total financial considerations for entire length of program located above</i>)	\$ 87, 264.60 Gross pay
Subtotal	\$ 87, 264.60 Gross pay
Total program financial assistance (<i>enter amount from total program financial assistance for entire length of program located above</i>)	\$ 87, 264.60 Gross pay
Total Debt After Completion of Program	\$ 0.00

Last Updated: 10/30/2023

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