

University of Evansville
Master of Science in
Athletic Training Program



Policies & Procedures Manual
2020-2021

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Introduction

Degree: Master of Science in Athletic Training

Program Director: Jeffrey W. Tilly, MS, ATC, LAT

Athletic Trainers are healthcare professionals who collaborate with physicians to optimize activity and participation of patients and clients. Athletic training encompasses the prevention, diagnosis and intervention of emergency, acute and chronic medical conditions involving impairment, functional limitations and disabilities. Athletic Training is recognized by the American Medical Association (AMA) as a healthcare profession.

The Master of Science in Athletic Training degree is designed for those individuals who are seeking certification as an athletic trainer from the Board of Certification Exam (BOC). All individuals planning to take the national certification exam must have a minimum of a bachelor's degree from an accredited athletic training program. The [Commission on Accreditation of Athletic Training Education](#) (CAATE) is the accrediting body which governs all athletic training programs. The Master of Science in Athletic Training program is accredited by CAATE, which began in the spring 2017. UE's program was granted a five-year initial accreditation through 2022. The University of Evansville's Undergraduate Athletic Training Program has been accredited since 2003 and is accredited through 2018.

The Master's degree program prepares students for the challenges that will be encountered as an allied health professional. This includes clinical skill development and practical experience. The clinical education component is fulfilled primarily while working with the University's 14 NCAA Division I athletic teams and local high schools. Students gain valuable experience working with athletes under the close supervision of the head and assistant athletic trainers, who also serve as preceptors for the program. Off-campus experience provides opportunities to work with other health care professionals such as clinical- and school-based athletic trainers, physicians, physician extenders, and physical therapists in the community.

The University of Evansville is an independent, United Methodist Church-affiliated university which operates, in all aspects pertaining to students, faculty, administration, and staff, under a nondiscriminatory policy with regard to race, color, creed or religion, national origin, gender, sexual orientation, age, or disability.

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Clinical Preceptors

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Collins	Terry	University of Evansville	University of Evansville	tc7@evansville.edu
Coppus	Troy	University of Evansville	University of Evansville	tc88@evansville.edu
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Mission Statement

The mission of the University of Evansville's Athletic Training Program is to provide the educational preparation that will allow each student the opportunity to develop the knowledge, skills, and necessary proficiencies to become a certified athletic trainer and an ethical practicing professional with the necessary job skills to further the advancement of the profession of athletic training.

The University of Evansville's Athletic Training Program is dedicated to preparing athletic training students to reach their full potential and to engage in national and global endeavors.

Goals

Each athletic training student will show competence and proficiency within the domains of athletic training as defined by the accrediting body of athletic training, the Commission on Accreditation of Athletic Training Education (CAATE).

Each athletic training student will develop the knowledge and skills necessary to successfully complete the BOC certification exam and pass on the first attempt above the national average.

Each athletic training student will develop the knowledge and skills necessary to obtain viable employment within the field of Athletic Training.

The Athletic Training Program will maintain high quality didactic instruction and clinical instruction to facilitate student learning.

Non-Discrimination Policy: The Master of Science in Athletic Training will follow the University of Evansville's Non-Discrimination Policy as it pertains to clinical assignments, preceptors, and other institutional matters.

The University of Evansville expects all members of its community to treat each other with respect and civility. Harassing behaviors directed towards any member of our community will not be tolerated. As part of its commitment to non-discrimination, the University specifically prohibits harassment based on any other characteristics set forth in its non-discrimination as follows: including race, color, gender, gender identity and expression, creed or religion, national origin, age, disability, veteran status and all federally protected groups/classes. Any form of harassment undermines the mission of the University and negatively impacts the University as a whole.

Admission Requirements

Entry into the Program is competitive. Admission criteria include:

Completed Bachelor's degree and admission to UE with the following pre-requisite course equivalents:

EXSS 112 and 113 (Human Anatomy & Physiology with Lab)

Recommended:

PYSC 121 (Introduction to Psychology)

EXSS 356 (Biomechanics/Kinesiology)

EXSS 352 (Exercise Physiology)

EXSS 320 (Nutrition)

PT 100 (Medical Terminology)

- Grade of C or better in prerequisite courses (all prerequisites must have been completed within the last 10 years prior to application)
- GRE Score of 1000 or better (if undergraduate cumulative GPA is below 3.0)
- Official Transcripts showing completion of undergraduate degree
- Submission of Entry-level Masters in Athletic Training program application
- Interview (phone or in-person)
- Completed Technical Standards Form
- Physical examination and proof of immunizations
- Hepatitis-B vaccination
- Current Emergency Response & CPR for Professional Rescuer Certification
- Recommended: observational experience documented by a certified athletic trainer

Application deadline: January 1st prior to the summer enrollment. Applications received after January 1st will be considered for rolling admission if spots are still available.

Orientation

Orientation will take place during the first week of Summer I classes. Orientation is designed to give transfer students time to adjust and for the program to begin the necessary paperwork. This paperwork includes but is not limited to: Student's immunization, Background screens, Blood Borne Pathogen training, FERPA/HIPPA training, ATrack orientation, final transcripts received and checked, proper documentation on review of the programs BBP exposure control plan, documentation and review of the program's communicable disease policy. This information can be found in the ELM policy and procedure manual distributed during orientation week. This orientation week is designed primarily due to the short turnaround time after graduation, which is typically one week after undergraduate degrees are conferred.

Technical Standards

The Athletic Training Program at the University of Evansville is a rigorous and intense program that places specific requirements and demands on the students enrolled in the Program. An objective of this Program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The Technical Standards set forth by the Program establishes the essential qualities considered necessary for students admitted to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the Program's accrediting agency, the Commission on Accreditation of Athletic Training Education (CAATE). The following abilities and expectations must be met by all students admitted to the Program. In the event a student is unable to fulfill these Technical Standards, with or without reasonable accommodation, the student will not be admitted to the program. The technical standards will be distributed during the first day with a short orientation of the program. If there are any changes or modifications that need to be made, the student should alert the program director immediately so that these changes can be addressed.

Compliance with the Program's Technical Standards does not guarantee a student's eligibility for the BOC certification exam.

Candidates for selection to the Athletic Training Program must demonstrate:

1. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients
2. Ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively. Students must be able to understand and speak the English language at a level consistent with competent professional practices.
3. Ability to record the physical examination results and a treatment plan clearly and accurately
4. Perseverance, diligence and commitment to complete the athletic training program as outlined and sequenced
5. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations
6. Effective skills and appropriate demeanor and rapport that relate to professional education and quality patient care
7. Skills and ability to maintain clinician/patient safety
8. Ability to successfully complete the coursework, clinical experiences and internships required for this program

Candidates for selection to the Program will be required to verify they understand and meet these technical standards or that they believe that, with reasonable accommodations, they can meet the standards. They will undergo testing and a health examination to determine if they meet the standards. Information is taken from the application and admission review. This information is utilized by the Program's Medical Director to determine if the Technical Standards are met. The Medical Director will meet with each student accepted to the program prior to the start of the school year.

In the event a student does not meet one or more technical standards, the student may be granted admission to the program if he/she states the Technical Standard (s) could be met with reasonable accommodation. The Disability Service Coordinator from UE Counseling Services Department will meet with the student to review documentation, determine eligibility for disability accommodations, and determine appropriate accommodations.

I certify that I have read and understand the technical standards for selection listed above, and I believe to the best of my knowledge that I meet each of these standards without accommodation. I understand that if I am unable to meet these standards I will not be admitted into the program.

I also understand that I will need to drive to and from clinical experiences as deemed essential for graduation from the University of Evansville's Athletic Training Program. I will provide transportation to and from these experiences and will have appropriate insurance for this travel.

Signature of Applicant

Date

I certify that I have read and understand the technical standards of selection listed above and I believe to the best of my knowledge that I can meet each of these standards with reasonable accommodations. I will contact Counseling Services/Disability Services to determine what accommodations may be available. I understand that if I am unable to meet these standards with or without accommodations, I will not be admitted into the program.

I also understand that I will be responsible for transportation to clinical experiences deemed essential for graduation from the University of Evansville's ATP. I will provide transportation to and from these experiences and will have appropriate insurance for this travel.

Signature of Applicant

Date

Tuition and Fee Schedule

Students accepted into the professional phase of the program will need to be appropriately dressed while working or observing in the athletic training room or off-campus clinical sites. T-shirts, polos, sweatshirts, and pull-overs will be available for purchase at various times throughout the school year. Prices will vary in accordance to which items are purchased. Typical start-up costs are roughly \$45 for 2 T-shirts and polo. See the [Dress Code/Appearance](#) for additional information about the ATP's dress code policy.

Effective Fall 2013, the Program will be using ATrack to manage hour logging, student/preceptor evaluations, and other administrative tasks. Access to ATrack is free to NATA Student Members or to non-members at a cost of \$45/year. For more information on becoming a NATA Student Member, please visit NATA's [website](#).

Sample Annual Costs for Master's Students for 2020-2021

Tuition and fees (9-12 credits)	\$21,270
Activity Fees	\$1,046
Summer I, Summer II First Year (10 credit hours x 520/hr)	\$5,200.00
Registration Fee and Technology Fee	\$100.00
Books (approximate)	\$800
BackGround Screen (Initial, 2 nd year)	\$41/\$31
Course fees (AT-related)	\$30
Clothing (approximately average)	\$250
NATA Student Membership/ATrack purposes	\$45
Approximate annual cost for <u>full-time, resident</u> student	\$28,782

UE's Withdrawal and Refund Policy

For more information on UE's withdrawal and refund policy, please check UE's website at:

www.evansville.edu/offices/deanstudents/downloads/handbook.pdf page 29.

Updated Tentative Schedule for MS AT

Summer I First Session

AT 580: Introduction to Graduate Athletic Training [3]

AT 582: Basic Skills in Athletic Training [3]

Summer I Second Session

AT 587: Therapeutic Modalities in AT [3]

AT 590: Graduate Clinical Education I (1)

Fall I

AT 589: Evaluation of Upper Body [3]

AT 521: Applied Human Anatomy [2]

AT 575: Nutritional Issues in Athletic Training [3]

AT 591: Graduate Clinical Education I] [2]

Spring I

AT 588: Evaluation of Lower Body [3]

AT 592: Graduate Clinical Education II [2]

AT 688: Advanced Rehabilitation of Athletic Injuries [3]

Summer II:

Possible Internship

Fall II

AT 690: General Medical/Pharmacology [2]

AT 691: Graduate Clinical Education III [2]

EXSS 551: Psychological Interventions in Athletic Health Care [3]

Spring II

AT 692: Graduate Clinical Education IV [2]

AT 650: Administration of AT [3]

AT 693: Professional Issues in Athletic Training [1]

Electives

HSA 505: Health Care System Issues/Trends [3]

HSA 507: Health Care Research and Design [3]

HSA 506: Jurisprudence/Ethics in Health Care [3]

PT/AT 627: Community Health [3]

Course Descriptions

AT 580 (3) Introduction to Athletic Training/Evidence Based Inquiry

Theory and practice of evidence-based sports medicine for both clinical and research environments, with emphasis on understanding the results of health care interventions and practices for patients and research subjects. This course will introduce the student to clinical epidemiology and the evaluation of the efficacy of prevention, diagnostic, and treatment strategies for acute and chronic conditions. Intended for graduate athletic training majors.

AT 582 (3) Basic Skills in Athletic Training

This course addresses a variety of topics in order to develop the student's competence as an athletic trainer. Emphasis is placed upon skills such as construction and application of protective devices, taping and bandaging techniques, on-field assessment techniques, and emergency care. This course is designed to satisfy CAATE competences related to the above mentioned content areas and is intended for athletic training majors.

AT 587 (3) Therapeutic Modalities in Athletic Training

This lecture/lab course addresses the principles, indications, contra-indications, physiological effects, safety precautions, and application of therapeutic modalities for the treatment of athletic injuries. Information includes knowledge of the inflammatory response to injury/illness and the effectiveness of therapeutic modalities to assist the body in the healing process. This course is designed to satisfy CAATE competences related to the use of modalities and is intended primarily for athletic training majors.

AT 590 (1) Clinical Education in Athletic Training I

This course is one of a series of six clinical education courses designed to provide proficiency instruction and clinical experience in the field of Athletic Training. The emphasis in this course is clinical anatomy and goniometry. This includes palpation of various bony landmarks and soft tissue structures as well as goniometric skill development. Clinical application and understanding is emphasized. The field experience rotations will be assigned per the clinical instruction plan. This class will meet formally approximately 1 hour per week outside of the clinical setting.

AT 592 (2) Clinical Education in Athletic Training II

This course is one of a series of six clinical education courses designed to provide proficiency instruction and clinical experience in the field of Athletic Training. The emphasis in this course is the clinical application of therapeutic modalities. The field experience will include a sport team rotation with an emphasis in the application of modalities. The student will work toward completion of the proficiency check-off sheet. This class will meet formally at least 1 hour per week outside of the clinical setting to ensure adequate progress is being made toward completion of the respective clinical proficiencies.

AT 650 (3) Administration of Athletic Training

This course is designed to familiarize students with the administration and management responsibilities of athletic training. Topics of study include management of athletic training facilities, personnel, students, facility design, purchasing of supplies and equipment, and

budgeting. This course is designed to satisfy CAATE competences related to health care administration and is intended for athletic training majors.

AT 588 (3) Evaluation of the Lower Body

This course addresses the theory, techniques, and laboratory experiences relative to the assessment and evaluation of athletic injuries with emphasis placed on the upper body and the spine. Other topics related to assessment are covered including common illness recognition. Content areas include knowledge and skills for clinical evaluation to determine the proper injury/illness treatment and/or referral when appropriate. This course is designed to satisfy CAATE competences related to evaluation and illness of the lower body and is intended for athletic training majors.

AT 589 (3) Evaluation of the Upper Body

This course addresses the theory, techniques, and laboratory experiences relative to the assessment and evaluation of athletic injuries with emphasis placed on the lower body. Other topics related to assessment are covered including common illness recognition. Content areas include knowledge and skills for clinical evaluation to determine the proper injury/illness treatment and/or referral when appropriate. This course is designed to satisfy CAATE competences related to evaluation and illness of the lower body and is intended for athletic training majors.

AT 688 (3) Rehabilitation of Athletic Injuries

This lecture/lab course provides the student knowledge related to all aspects of the rehabilitation of athletes. Emphasis is placed on development of a theoretical model to assess and fully rehabilitate an athlete following an injury, surgery, or related illness. Lab time is spent developing the skills required to implement a rehabilitation program in the clinical setting. This course is designed to satisfy CAATE competences related to rehabilitation and exercise and is intended for athletic training majors.

AT 690 (3) General Medical and Pharmacology for the Athletic Trainer

Pharmacology and Medical Conditions offers the student an insight on current trends in pharmacology use in an athletic training environment. The course will also offer current evaluation of general medical conditions, treatment, and a referral base for conditions found in athletics.

AT 691 (5) Clinical Education V

This course is one of a series of clinical education courses designed to provide clinical experience in the field of Athletic Training. The emphasis in this course is rehabilitation. The field experience will be assigned per the clinical instruction plan and may include time in a physical therapy out-patient setting. The student will work toward completion of the proficiency check-off sheet. This class will meet formally at the discretion of the instructor outside of the clinical setting to ensure adequate the student toward completion of the respective clinical proficiencies is making progress. A case study approach is utilized to emphasize integration of previously learned skills into the complete care of the athlete.

AT 692 (3) Clinical Education VI

This course is one of a series of six clinical education courses designed to provide clinical experience in the field of Athletic Training. The emphasis in this course is pharmacology, nutritional aspects, and psychosocial intervention and referral. An emphasis will also be placed on preparation for the NATA-BOC certification exam. This class will meet formally at the discretion of the instructor outside of the clinical setting to ensure adequate the student toward completion of the respective clinical proficiencies is making progress. Field experience assignment will be made per the clinical instruction plan.

AT 693 (1) Professional Issues in Athletic Training

As a capstone class to the program, this course will be require synthesis of content from all previous courses in the program. It will place an emphasis on preparation for the NATA-BOC exam and professional development issues related to athletic training. These topics include incorporating evidence-based medicine into clinical practice, patient-oriented outcomes in athletic health care, creating a professional presence in athletic training (resume development, networking, and job search tactics), and professionalism/professional ethics.

Progression & Retention Requirements

Once accepted into the Program, minimum criteria for academic and clinical performance must be met to advance to the next level in the program:

Academic

- Must receive a C+ or better in all courses
 - A student who does not receive a C+ or better in any coursework must repeat the course in question prior to proceeding in the Program. One attempt to retake the course will be allowed
 - Provisional Progression can be granted by the Program Director in certain circumstances and will be evaluated on a case-by-case basis
 - If a student must take an incomplete or W for a given AT course, the course must be completed/re-taken. Program progression will be considered on an individual basis.
- Maintain a GPA of 3.0 or higher (without numerical rounding) after each semester of coursework
 - This will be reviewed by the program on an end of the semester basis
- Maintain current CPR for the Professional Rescuer certification
- Satisfactory evaluations on all clinical experience assignments
- Receive a “Passing” grade on end of the year program examination; passing grades will be determined by the athletic training faculty for each exam given

Clinical

- Each student will have preceptor evaluations at the end of each rotation
- A student must maintain a 3 or higher on assessment data (A likert scale of 1-5 will be used) on all preceptor evaluations
 - A score lower than a 3, will be discussed with the student and the program faculty after the rotation is complete
 - The goal will be to increase performance as the student progresses through the program and any item deemed lower than a 3 by any preceptor will initiate the necessary remediation.
 - The student will have one semester to raise scores and show progress

If any of the above requirements are not met, the student will not be allowed to progress in the program until the student has met the requirement in question. Progression requirements will be reviewed each semester by the Program Director the Athletic Training faculty at the end of each semester.

ACADEMIC HONESTY

Academic honesty and integrity lie at the heart of any educational enterprise. Students are expected to be honest and forthright in all their academic endeavors. To falsify the results of one’s research, to steal or plagiarize the words or ideas of another, to cheat on an examination or to allow another person to commit an act of academic dishonesty corrupts the essential process by which knowledge is advanced.

As a student of this course, the follow honor code is implied:

I understand that any work which I submit for course credit will imply that I have adhered to this Academic Honor Code: I will neither give nor receive unauthorized aid nor will I tolerate an environment which condones the use of unauthorized aid.

Violation of this honor code may result in an automatic failing grade for the assignment and notification to the Academic Dean’s office for further action.

Learning Objectives by Student Level

Level I Learning Objectives (Summer) (Fall) (Spring) –Year 1:

- Student will be able to describe and demonstrate the rationale for and proper clinical use of therapeutic modalities
- Student will demonstrate adequate anatomical knowledge and the ability to identify required anatomical structures.
- Student will be able to prevent, recognize, and manage common emergency situations
- Student will be able to demonstrate required skills in taping, bandaging, and application of protective devices
- Student will demonstrate the ability to recognize evaluate and assess injuries/illnesses related to the upper body and spine
- Student will demonstrate the ability to recognize evaluate and assess selected general medical conditions
- Student will demonstrate the ability to recognize evaluate and assess injuries/illnesses related to the upper body and spine
- Student will be able to describe the rationale for and design appropriate rehabilitation programs.
- Student will be able to identify fitness levels and prescribe appropriate exercise programs.
- Student will begin to integrate knowledge into their clinical education and begin to develop clinical integration of the CAATE proficiencies into their practice with the preceptors guidance
- Student will demonstrate an understanding of professionalism in healthcare.
- Student will demonstrate an understanding of the components of research and the ability to integrate research findings into clinical practice.
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Level II Learning Objectives (Fall)(Spring) Year 2:

- Student will demonstrate the ability to recognize evaluate and assess selected general medical conditions.
- Student will be to describe and demonstrate their understanding of administrative issues in athletic training.
- Student will advance their ability to integrate knowledge into their clinical education and begin to develop clinical integration of the CAATE proficiencies into their practice with the preceptors guidance
- Student will demonstrate the understanding of nutritional concepts related to those involved in physical activity
- Student will demonstrate adequate progression related to his/her clinical development
- Student will demonstrate an understanding of professionalism in healthcare.
- Student will demonstrate an integration of knowledge and demonstrate the skills needed for autonomy in the field of athletic training

- Student will integrate knowledge into their clinical education and develop clinical integration of the CAATE proficiencies into their practice
- Student will demonstrate an understanding of the use of pharmacological agents in athletic medicine
- Student will demonstrate an understanding of the components of research and the ability to integrate research findings into clinical practice.
- Student will demonstrate an understanding of psychological aspects related those involved in physical activity and sport
- Students will demonstrate the knowledge and skills expected of an entry-level athletic trainer

Program Policies

Health Policy

The physical and mental health of an athletic trainer is very important. It is important that ATs strive to promote a healthy lifestyle.

In addition to the standard UE Student Health requirements including MMR, tetanus, diphtheria, HBV, and a TB test. Vaccinations are made available through the Student Health Center at the direction of the Program Director for those who have not previously been vaccinated. To begin the vaccination sequence, students and staff athletic trainers should consult the Program Director.

Due to constant interaction with others in the health care environment, students who have been diagnosed by a qualified healthcare professional with a communicable disease are to follow instructions regarding interaction with others as stated by the attending healthcare professional.

Athletic Training Laboratory Policies

Use of the Athletic Training Laboratory (Graves 315) is restricted to Athletic Training Student use only.

1. Be respectful and courteous to your classmates during all laboratory sessions.
2. Proper lab attire must be worn at all times. This may vary from course to course; consult your class syllabus and/or instructor
3. Return all equipment, supplies, etc., to their proper places; please leave the lab clean and organized
4. No food or drink allowed
5. No street shoes are to be worn on the plinths

Non-Athletic Training Laboratory Policies

Students may use Graves Hall 329 or 104 after hours (after 5:00 p.m.) or when lab classes are not in session during the day. The following procedures are to be followed:

1. Check laboratory schedules to ensure you do not interfere with a scheduled laboratory, practical or check offs. These are posted on the main lab door.
2. If electrical equipment is used, at least three students must be present. Any student who violates this rule will be barred from the laboratory except for formal lab.
3. All students must sign in with security if using the facility after hours. Security personnel will unlock the building and laboratory for you. Your course instructor will designate which laboratory may be used after hours.
4. You must return the room and equipment to an orderly fashion following use. Clean and unplug any equipment used. Return all equipment to its proper place, etc. Do not leave water standing. Any individuals violating this procedure will not be allowed to use the lab independently for the remainder of the semester.
5. Electrical stimulation units are to be kept on carts. Do not place large clinical modalities on treatment tables as they can damage the vinyl.
6. If electrical equipment is not in WGH 329, please contact the course instructor, so that this equipment can be made available for your use. Requests for this equipment must be made before 3:30 p.m. on the day it is wanted or by 5:00 p.m. if on a Friday.
7. All wet sponges are to be washed and put on the counter to dry.
8. Electrodes must be dried and stored.
9. Return pillows to plinths.
10. Dirty towels and linen must be placed in the laundry hamper.
11. Any damaged equipment must be reported immediately to your instructor.
12. Lock all doors upon leaving.
13. The equipment in WGH 106 may be used only when a faculty member is present in the building and has been informed of the names of the students who will be using the lab.
14. Under no circumstances is a student to use laboratory equipment for self-treatment. Any individuals violating this procedure will not be allowed to use the lab independently for the remainder of the semester.

IN CASE OF AN EMERGENCY, CALL 611, REPORT THE LOCATION, PROBLEM AND
NEED

Occupational Health and Safety Administration (OHS) Policies

Universal Precautions Policy

As a member of the Program, students are required to practice Universal Precautions under the strict guidelines set forth by the Occupational Safety and Health Administration (OSHA). Every precaution must be taken to ensure the health and safety of ATs and athletes. These are the guidelines students are expected to follow while associated with the Program:

1. Wear vinyl or latex examination gloves whenever touching open skin, blood, body fluids, or mucous membranes; do not reuse gloves
2. Wash your hands with soap and water immediately after they have been exposed to blood or body fluids, even if you wore gloves
3. All surfaces (e.g., counters, tables) must be thoroughly washed after being soiled with blood or body fluids. Use a 10% household bleach solution or a commercially available disinfectant
4. Place all used sharps in a special sharps container
5. Place all discarded medical waste in a specially labeled "biohazardous waste" container located at the clinical site
6. When you are working with an outdoor sport and have medical waste to dispose of, place it in a plastic bag and then discard in into the proper "biohazardous waste" container upon returning to inside
7. Do not allow the athletes to share towels that have been contaminated with blood or body fluids
8. Discard towels and clothing that have been contaminated with blood or body fluids into a separate receptacle. Do not put them in with the regular laundry
9. Be sure that all athletes' wounds are well covered before practice or competition
10. If you have an open wound, especially if it is on your hands, avoid providing first aid care to injuries that involve bleeding or body fluids until your wound has healed. If you must do so, cover your wound with Band-Aids or similar protective barrier and use gloves

Communicable Disease Policy

The [Center for Disease Control \(CDC\)](#) outlines specific policies that protect and minimize exposure to communicable diseases within healthcare facilities and between health care providers and patients. The Program is in charge of educating students to use the following guidelines and provisions to manage communicable disease that they may come into contact with in the athletic training room or at an off-campus clinical education site.

CDC Guidelines: Personal Health Guidelines 1998: Well-defined policies should be in place concerning personal contact with patients when patients have the potential for transmittable disease conditions.

This policy includes the following:

1. Personnel responsibility in using the health service on campus and reporting an illness.
2. Work Restrictions: if it is deemed necessary to miss an assignment due to the fact that the ATS has a communicable illness, it is the student's responsibility to notify his/her preceptor.
3. Non-work exclusion policies that encourage personnel to report illnesses or exposures and that the ATS will not be penalized for missing assignments.
4. Communicate and encourage personnel who have signs and symptoms of a possible infectious disease to report their condition promptly to a supervisor and their local health care provider.
5. Include appropriate education for personnel on the importance of good hygienic practices, especially hand washing and covering the nose and mouth when coughing or sneezing.

Program-specific Policy

1. Should an athletic training student become ill, he/she must report to the Student Health Center located in Sampson Hall (Craton E. and Ellen Mann Health Center) or to another medical health care practitioner. Upon evaluation, the medical practitioner will determine the appropriate intervention and treatment for said illness and the amount of time and treatment the ATS will need to overcome this illness. It will also be noted the length of time needed to remain out of contact with others to prevent transmission.
2. If an ATS acquires a communicable disease, the ATS must notify their preceptor as soon as possible. The preceptor will notify the Program Director and Clinical Education Coordinator. The Program Director will record any and all absences.

3. The ATS will not be allowed to return to their clinical experience until they have been cleared by a medical practitioner. A signed release from the medical practitioner must be filled out and given to the preceptor and Program Director prior to returning.

The Center for Disease Control (CDC) provides these preventative guidelines for the prevention of spreading of the communicable disease within health care facilities. These regulations are designed to provide for the uniform awareness, prevention, and reporting of diseases in order that appropriate control may be instituted to interrupt the transmission of disease. *ATSs are providing direct health care to patients under the supervision of a preceptor; appropriate precautions must be utilized.* The Program will also utilize the CDC's Personnel Health Guidelines for work restrictions and duration of time away from patients. This document is housed in the Program Director's office.

The partial list of contagious diseases from the CDC includes:

- Conjunctivitis
- Diarrhea
- Diphtheria
- Enteroviral Infections
- Hepatitis A, B, C
- Herpes Simplex
- HIV
- Measles
- Mumps
- Pediculosis
- Pertussis
- Rubella
- Scabies
- Streptococcal infection
- TB
- Varicella
- Zoster
- Viral Respiratory Infections

Bloodborne Pathogen Training and Procedures/Exposure Control Plan:

1. All athletic training students will be administered an on-line course and quiz on Bloodborne Pathogen Training prior to any potential contact in any of the University of Evansville's ATP clinical sites. This on-line course will be from the company InVate2 and will have an associated quiz at the completion of the course. This will serve as an educational resource for all athletic training students on a yearly basis. Follow up training will be conducted yearly for all observational and clinically assigned students. All policies and procedures can be

found on UE's BlackBoard system under the current clinical education class that the ATS is enrolled in.

2. All athletic training students will also go through the proper University of Evansville protocol for post-exposure plan as outlined below and which follows the OSHA bloodborne pathogens standard (29 CFR 1910.1030).:
 1. UE ATP post-exposure plan for Blood Borne Pathogens:
 2. The University of Evansville's athletic training program and the University of Evansville's athletic department is committed to providing a safe and healthful work environment. The following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."
 1. Treat all BBP contact as a potential risk (Universal Precautions) and use Personnel Protective Equipment (PPE) located at the designated locations at each site.
 2. Remove PPE after it becomes contaminated and before leaving the work area.
 3. Used PPE may be disposed of in biohazard containers.
 4. Immediately wash any skin with soap and water and flush mucous membranes with water if these areas have had contact.
 5. Never wash or decontaminate disposable glove for reuse.
 6. Where appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or Other Potentially Infectious materials (OPIM).
 7. Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.
 8. Report all BBP contact to your supervising preceptor, Terry Collins, UE's head athletic trainer, Dr. Kathy Liu, ELM program director, as soon as possible and seek medical referral.
 9. Your supervising preceptor will then report to the University of Evansville's Health Center for the proper Dr. referral. A medical evaluation and follow-up consisting of the following:
 1. Documentation of routes of exposure and how exposure occurred
 2. Identify and document the source individual
 3. Obtain consent and make arrangements to have the source tested as soon as possible to determine HIV, HCV, and HBV infectivity. Document results
 4. New testing may need to be performed if the source is already known to be HIV, HCV and or HBV positive

5. Assure that the exposed employee is provided with the source individual's test results and with information.
6. After obtaining consent, collect exposed employee's blood as feasible after exposure incident and test blood for HBV and HIV.
10. Following an exposure incident, an Exposure Incident Report will be completed by the preceptor as quickly as possible. This report should accompany the ATS to the physician.
11. Any exposure should be handled quickly as the effectiveness of prophylaxis depends on the immediacy of its delivery.

Recordkeeping

Training Records will be collected and kept in the ATS file in the program director's office.

Student-Athlete Socialization

Social relationships are a natural part of the educational environment at the collegiate level. However, professionalism must permeate these relationships. ATs should be aware of the potential problems with becoming involved with a peer who is an intercollegiate student-athlete or another AT. Because clinical education rotations are assigned as a component of curriculum coursework, social situations and/or dating involving an AT and/or an intercollegiate student athlete (regardless of gender) or between other ATs is strongly discouraged and is considered inappropriate.

If an AT is dating or develops a friendly relationship beyond delivering healthcare services with an intercollegiate student-athlete or fellow AT in the athletic training room that they are utilizing for the clinical education experience, or is assigned the same preceptor, it must be reported to the Program Director and Clinical Coordinator immediately. This can range from casual sexual conduct to a serious dating relationship. If the Program Director becomes aware of a social relationship that was not brought to her attention disciplinary action will be taken as outlined in this manual. Further decisions regarding disciplinary actions will be reviewed and established on a per case basis. Although no disciplinary action will be taken if the Program Director is immediately made aware of a social relationship with a peer, the AT should not misinterpret this as the faculty and preceptors supporting these relationships. If an AT has to be moved from his or her initial clinical rotation assignment more than one time in an academic year in accordance with the socialization/fraternization policy, further disciplinary action will be taken.

Clinical experiences where ATs have contact with minors (less than 18 years of age) or any student-athlete enrolled in high school regardless of age are **prohibited from exchanging personal information with student-athletes that may lead to phone call, text messaging, and/or social media exchange**. Personal information includes but is not limited to: phone number, screen /user name, and email address. ATs are expected to follow the Program's cell phone policy in that phones should not be seen nor heard without prior permission from their preceptor. Violations of this policy will be at the preceptor, Program Director, and/or Clinical Education Coordinator's discretion. A single violation may result suspension or termination from the clinical experience, as well as potential legal implications. Subsequent violations will terminate the student from the Program.

Inappropriate professional behavior will not be tolerated. All Policies and Procedures and disciplinary action are supported by the UE Student Code of Conduct.

Students should also be aware that inappropriate use of social media will not be tolerated. This includes derogatory, inflammatory or coercive comments made towards members of the UE AT community. This is considered unprofessional behavior and will be subject to the UE Disciplinary Action Policy. Disagreements must be managed appropriately and professionally utilizing the proper channels. Use of social media must comply with the UE's Social Media Policy.

Cell Phone Use

Cell Phones

Cell phone use in class or lab is disruptive and unprofessional. Students who use cell phones in class will be dismissed from class and subject to a ten percentage-point deduction from their final grade in the course for each occurrence. Please discuss with the professor IN ADVANCE any extenuating circumstance in which a student feels that a cell phone is required.

Clinical Education & Related Policies

Clinical Education Courses

Clinical experiences are tied to individual Clinical Education courses as described below. Following acceptance into the Program, students will begin clinical coursework and experience to be completed in a minimum of 4 semesters.

AT 590, 591, ,592, 691, and 692 are designed to allow the student ample opportunity to acquire and practice clinical skills essential to entry-level athletic training. The Clinical Education course instructor presents and evaluates the entry-level athletic training clinical proficiencies for the respective subject area. Each clinical education course will have specific objective criteria that the ATS will be evaluated on during that rotation by their preceptor. These objective criteria will be outlined in each course syllabi and summarized below:

Course	Primary subject area
AT 591	Surface Anatomy Goniometry Manual Muscle Testing, Therapeutic Modalities
AT 592	Assessments and Evaluation Risk Management and Injury Prevention Acute Care of Injury and Illness
AT 691	Therapeutic Exercise and Injury Prevention
AT 692	General Medical Conditions and Disabilities Nutritional Aspects of Injury and Illness Psychosocial Intervention and Referral Pharmacology Health Care Administration Professional Development and Responsibilities

Course Evaluation

Each clinical rotation, ATSs will be evaluated by their preceptor. Clinical objectives and competencies will be evaluated, as well. Competencies will be evaluated in accordance with the Clinical Education course the ATS is enrolled in and will be evaluated based on the skills they perform during this rotation. All competencies may not be covered or seen, as not all experiences can be guaranteed during each rotation. ATSs will evaluate all preceptors per clinical rotation and off site clinical education sites as necessary.

Course Credit/Clinical Education Hours

Course credit is consistent with the University of Evansville internship policies in requiring 45 hours per academic credit hour at a minimum. All clinical education courses are two credit hour courses. ATSs will gain a minimum of 90 hours per semester. Maximum hours per semester will be based on a six day work week, twenty hours per week times fifteen weeks or three hundred hours per semester. This is in-line with the NCAA standards for a student athlete. This also requires that students receive one day off per week constituting no work in the athletic training room. Each clinical education course is based on Total hours will be reviewed yearly by the Program Director in order to maintain adequate hours per rotation (the minimum) and to ensure ATSs are acquiring enough experience in each rotation to gain a meaningful educational experience. The length of clinical experiences will be monitored by the Program Director to ensure comparable lengths with other programs and to ensure that the ATS has had adequate time off and to maintain campus work-study guidelines.

Clinical Experiences

Clinical experiences allow exposure to athletic practices, competitive events, and general training room coverage. Experiences are distributed over a two year period that allows ATSs to engage in clinical rotations with the University of Evansville athletic teams, local high school football teams, and other affiliated sites. Rotations are assigned to ensure a balance between male and female sports, upper and lower extremity sports, and equipment intensive sports. Evaluation of the student's performance throughout the experience is included in the academic grade for each clinical education class.

The **Level 1** experience is devoted to four, six week and two, four week rotations that cover the above described sports. One of the two, four week rotations will be devoted to adequate time off and clinical skill development. Additional experience may be obtained at physical therapy clinics. These experiences are coordinated on a case-to-case basis.

The **Level II**, fall semester is spent working with an area high school football team, satisfying the equipment intensive rotation. Students will be assigned to a preceptor at an area high school and remain with that team through the entirety of that season. The ATS will not have any requirements on-campus during this time. When the high school football season is completed, typically mid to late October, students will have this time off for the remainder of the semester. The Level II, spring semester will be two, eight week rotations designed to work on evaluation skills and prepare for senior sport assignments.

The **Level III** experience is devoted to a senior clinical rotation that will prepare ATSs for experiences that will enable them to obtain an entry-level athletic training position, provide supervised autonomy to advance clinical skills, and allow application of administrative principles. Additionally, All Level III students will be placed in a general medical rotation where the student will shadow a physician at a predetermined health care facility, a minimum of 2 days a week for four weeks.

Students may be required to be in attendance during periods of time when regular University classes are not in session.

Clinical Experiences Available:

Upper Body Exposure Sport:

Baseball, Softball, Volleyball
Swimming, Tennis and Golf

Lower Body Exposure Sport:

Soccer, Cross Country, Basketball

Equipment Intensive:

Affiliated High School Football & Lacrosse, Collegiate Football

Individual Sports:

Swimming, Cross Country, Wrestling, Golf

Male Sports:

Basketball, Baseball, Soccer, Swimming, Tennis, Cross Country, Golf

Female Sport:

Volleyball, Basketball, Soccer, Softball, Tennis, Cross Country, Golf, Swimming

Rehabilitation and Age Diverse Exposure:

ProRehab, PC
Orthopedic Associates

General Medical:

St. Mary's Family Practice Clinic, affiliated physician, physician assistant, and nurse practitioner sites

Direct Supervision & Supervised Autonomy

Goal of Clinical Education: to assist the student in becoming a better clinician by preparing him/her to transition from doing the skill correctly (proficient) to using the skill correctly in a clinical environment (mastery and sound clinical decisions).

Clinical Supervision of ATs will take place using the Unified Theory: **all supervising ATs are preceptors. There is no delineation between clinical education and field experience, and all learning settings, including experimental learning, “count” as clinical education.** Clinical experience will be supervised in nearly all cases by a preceptor that will allow the “*line between field experience and clinical education to be blurred*” (Chad Starkey, Ohio University)

All supervision is performed by preceptors. Supervision and learning from a preceptor is the utmost important but difficult factor to control and utilize. Direct supervision of ATs is paramount in order to provide the best quality education possible for ATs.

Direct Supervision: a preceptor must be physically present and have the ability to intervene on behalf of the ATs to provide on-going and consistent education
(Strategic Alliance Statement on Athletic Training Student Supervision, November 2011)

Why is Direct Supervision important?

- Allows expert clinicians to mentor future professionals in the knowledge, skill, and culture of our profession
- To protect the student and the patient
 - Delivery of appropriate and safe health care
 - Reinforces student learning and clinical decision making
- To protect preceptor and the institution
 - Student liability insurance
 - University liability

Direct Supervision is NOT:

- Contact with a student via cell phone
- Intermittent contact with a student (e.g. the “drop in” or the “stop in and check”)
- The “Proximity Rule” (i.e. being within a few minutes response time of a student)
- Unsupervised First Aider/Responder
- If a Preceptor is not physically present with the ability to intervene, the student is NOT directly supervised

Misconceptions

- Preceptor must always be looking over a student’s shoulder
- Student must always be specifically directed in terms of performing tasks
- Students cannot make autonomous decisions while under direct supervision
- Students are to become automatons who cannot perform without being told what to do
- Direct supervision prevents students from developing:
 - critical thinking skills
 - self-confidence as professionals

Supervised Autonomy allows varying degrees of direct supervision while mentoring the student to foster the independent, but guided, application of clinical proficiencies and critical thinking skills to match the individual student’s level of clinical competency. Supervision and autonomy are not mutually exclusive.

- Supervision must be direct and on site
- Supervision should be more mentoring than simply being there and directing,
- Direct supervision is a continuum and should be applied based on the individual student’s knowledge, skill, ability, and confidence,
- Supervision, or “direct mentoring” of students in their clinical experiences is vital to their development as professionals

Supervision is a continuum and is task (or new learning) specific. Once an ATS demonstrates proficiency and has some experience with a particular skill, the ATS should be granted supervised autonomy and be permitted to initiate actions, perform initial evaluations, and develop and implement rehabilitation plans with the preceptor in the room.

Generally, Level II students can begin supervised autonomy that mimics entry-level practice during AT 592, AT 691, & AT 692. All ATSs will be evaluated to see if they can tolerate graded supervision. If an ATS does not meet academic or clinical progressions through the Program, they will not be granted graded supervision.

An ATS can physically remove themselves from a rotation in which they feel they are not supervised without any repercussions from the Program.

Communication between the Program, Program Director, and Clinical Education Coordinator and preceptors is critical in determining the individual needs of ATSs at each level in the educational process. Formal preceptor instruction is performed during on-boarding/refreshing held during the summer to update preceptors on proper education and expectations of the ATSs.

Communication also becomes very important in determining when ATSs can perform certain competencies (once they have been tested and passed at a level appropriate (usually >70%)). This communication will take place via face-to-face meetings, email, and phone. Correspondence with all preceptors will be the Clinical Education Coordinator's responsibility. Adequate supervision will also be the Clinical Education Coordinator's responsibility.

Supervision of athletic training students has been maintained at a ratio lower than the necessary eight to one student to preceptor ratio as recommended by the Commission on Accreditation of Athletic Training Education (CAATE).

Class Attendance Policy

There will be no absence or early departure from class or lab other than for excused absences. Excused or expected absences should be communicated to the course instructor prior to the absence. The determination of whether the absence is excused or unexcused is **at the discretion of the instructor**. Some class sessions may be scheduled at times other than those noted on WebAdvisor. This is necessary to accommodate guest speakers and occasional off-campus lab experiences. **It is the student's responsibility to be aware of additional attendance policies for each class.** Unexcused absences may affect your final grade and ultimately may affect your progression in the program.

Clinical Experience Attendance Policies

AT 591 and 592: Students are expected to attend all clinical experiences and scheduled classes on time as directed by their preceptor(s). If you anticipate missing a scheduled experience (i.e. practice), the preceptor is to be notified **prior** to the absence. The determination of whether the absence is excused or unexcused is **at the discretion of the preceptor**. Level I students may only miss **one day** of unexcused clinical experience per semester. Program administration will consult with the student's preceptor if absences become excessive and clinical progression is inhibited. More than three days may result in a failing grade for the course.

AT 691 and 692: Students are expected to attend all clinical experiences and scheduled classes on time as directed by their preceptor(s). If you anticipate missing a scheduled experience (i.e. practice), the preceptor is to be notified **prior** to the absence. The determination of whether the absence is excused or unexcused is **at the discretion of the preceptor**. Level II students may only miss **one day** of unexcused clinical experience per semester. Program administration will consult with the student's preceptor if absences become excessive and clinical progression is inhibited. More than two days may result in a failing grade for the course.

Dress Code & Appearance

Appearance is a non-verbal communicator of professional attitude. As a result, students are expected to dress according to the occasion (as described below) and maintain appropriate professional personal hygiene. Students are expected to adhere to the following policies in order to promote professionalism as a representative of the Athletic Training Program.

General

1. Students should keep hands clean, nails trimmed, etc.
2. Students should maintain a neat and professional haircut. Facial hair is acceptable, however a preceptor or AT faculty member may request its removal if it is not kept neat and professional.
3. Earrings should be studs only. Facial or body piercings should be minimal and non-distracting. A preceptor or AT faculty member may request removal if earrings or piercings appear non-professional.
4. Students should lead by example in diet, rest, and general well-being. Students engaging in non-healthy behaviors may be referred to the Office of Counseling Services for support in terminating non-healthy behaviors and may be removed from a clinical rotation at the discretion of the preceptor until the non-healthy behavior no longer interferes with the students' clinical experience.

Athletic Training Room Dress

1. Approved UE Athletic Training collared shirt/sweatshirt OR team-issued top only. Approved UE Athletic Training t-shirts may be worn at the discretion of the preceptor. T-shirts provided by partnering entities that do not have a UE logo are unacceptable. T-shirts with inappropriate comments or innuendos are not acceptable (this may include t-shirts provided by the ATSA)
 - 1.1. Shirts must be long enough to be tucked in. If a shirt is appropriate to wear un-tucked, it must be long enough to cover the belly and back when bending over.
2. Pants/shorts must be khaki style. Acceptable and encouraged colors are black and various shades of tan/neutral. Jeans are NOT acceptable.
 - 2.1. Shorts must be of appropriate length – the bottom seam must be at least even with the fingertips.
 - 2.2. Sweatpants and wind pants (in black, purple, or gray colors only) may be worn at the discretion of the preceptor.
3. Shoes must be functional and close-toed. Sandals, flip flops, or any variation are not acceptable.
 - 3.1. Shoes with socks must be worn at all times. It is recommended and preferred that students wear clean sneaker/sport shoes in the Athletic Training Room.
 - 3.2. Slip-on shoes are not acceptable.
4. Hats are not allowed inside the Athletic Training Room and *for outdoors sports only*. Hats must be UE logo only.

Practice Dress

The above policies remain in effect for practice attire with the following additions:

1. Jackets and/or rain gear should have a University of Evansville logo or contain no logo with the exception of the manufacture's logo.
2. Hats must be UE logo only. The hat should be clean and un-frayed.
3. Weather-appropriate boots are acceptable during inclement weather.

Game Dress

Your preceptor should communicate to you what attire is appropriate for game coverage. The above policies remain in effect for practice attire with the following additions:

1. Outdoor sports should follow the above guidelines and must include an approved UE Athletic Training collared shirt.
2. It is the student's responsibility to ensure they are able to follow the dress code for those indoor sports that require dressier attire (basketball, volleyball).

Clinic/Off-Campus Dress

As a representative of the program, students must adhere strictly to the above guidelines detailing appropriate and professional dress. Exceptions may be made at the discretion of the preceptor as weather or environment dictates.

Unacceptable Dress

Professionalism in the Athletic Training Room is of utmost importance. If a student is in violation of any of the above dress codes, a reduction in points from the student's currently enrolled clinical education class will be enforced. The student will be notified of each violation by a Professional Violation Form (Appendix X). A preceptor or AT faculty can find a student in violation of dress code and ask for the removal of the student from the clinical experience until the violation is addressed.

Lockers may be rented in the Student Fitness Center for changing and storing of clothing.

Confidentiality and Patient Privacy

The University of Evansville strives to remain in compliance with the Family Education Responsibility and Privacy Act (FERPA). Faculty, Administrators and Staff are urged to make themselves aware of FERPA compliance by reviewing the FERPA link within their webadvisor menus.

Under the provisions of the FERPA, UE allows students and parents the ability to protect the information that is maintained on our systems. Toward that end, certain privacy and directory 'opt-out' options have been made available to students.

However, to continue to conduct the business of the University, faculty, staff, and administrators must at times have access to this information. As a general rule, no member of the faculty, staff or associates should in any way disclose academic or private information about any of our students without first receiving the expressed permission of the students. This includes, for athletic training and their students and staff, no release of medical information to anyone.

If there are any questions, please speak to the Registrar's office concerning this privacy request.

For more information about FERPA, please see the FERPA at Dept of Education.

All athletic training students will take an online course with associated quiz, yearly to further provide education and compliance with FERPA as part of their fall clinical education course.

Grievances

The grievance procedure allows the student to present a complaint, perceived injustice, unresolved conflict, or other issue related to an individual course or the program as a whole. Students are encouraged to attempt to resolve a grievance as soon as possible. The initial step in the grievance process is to contact the individual instructor responsible for the course or issue. If the issue is not resolved to the student's satisfaction with a verbal conversation, the student should present the issue to the instructor in written form. If the instructor's response does not resolve the issue to the student's satisfaction, the issue enters a "due process" system.

The following procedure outlines the steps to be taken when making an appeal that enters the "due process" system:

- Academic grade appeals

For all grade appeals, the student will follow the procedures listed in the Student Life Handbook. All University policies apply.

- Clinical education issues
- Program progression and retention

STEP 1: Grievances must be presented to the Program Director in writing within 30 days of the occurrence. The Program Director will attempt to resolve the issue through mediation with all parties involved.

STEP 2: If a satisfactory solution is not achieved, the grievance may be presented to the Athletic Training Faculty and the School of Public Health Department Chair. This must be presented in writing within 15 days of the unsatisfactory decision. The student must clearly articulate his/her rationale for the continued grievance.

Members of the Athletic Training Faculty and/or the School of Public Health Department Chair may meet with the student or other parties to obtain as much information as possible.

The Athletic Training Faculty and School of Public Health Department Chair will meet and make a decision about the grievance presented. This will be presented in writing to the student and all parties involved.

STEP 3: If the decision made by the Athletic Training Faculty and School of Public Health Department Chair is not acceptable, the student may then appeal the decision to the Dean of the College of Education and Health Sciences. It is the student's responsibility to report all pertinent information in writing for review.

Athletic Training Room Policies & Procedures

The majority of the student's clinical education experience will take place in the University of Evansville Athletic Training Room. The following policies and procedures have been established with collaboration with the University of Evansville Athletic Training Staff and are to be followed when participating in a clinical education experience at this location.

Students will participate in the care of athletes and active individuals under the direct supervision of their preceptor. A student must demonstrate adequate knowledge of proficiency prior to performing it in the clinical setting. Actions of the student athletic trainer are the responsibility of the preceptor.

General duties *may* include:

1. Perform correct and effective application of padding, bandaging, taping, wraps, etc.
2. Perform assessment of injuries and illnesses along with consultation of a preceptor.
3. Perform correct procedures in application of therapeutic modalities, including ice, heat, ultrasound, muscle stimulation, massage, etc.
4. Apply proper first aid and emergency care. This includes the OSHA standard of care for blood and body fluid exposure.
5. Assist in maintaining a clean, professional athletic training room, including tables, floor, modalities, carts, hydrotherapy area, taping areas, counters tops, etc.
6. Follow through with paperwork, including initial injury evaluation, treatment and rehab forms, insurance sheets, catastrophic claim forms, prescription release, referral slips, treatment time appointments, etc.
7. Carry out the policies and procedures of the clinical site. Cooperate with the preceptor and athletic training staff as directed.

A complete list of policies and procedures for the Athletic Training Room can be obtained from the Head Athletic Trainer.

Verification of Knowledge and Adherence

By signing this document, I confirm that I have read, understand, and agree to adhere to all policies and procedures set herein.

Athletic Training Student: _____ (Print name clearly)

Signature: _____ Date: _____

I also agree that I have read the Infectious and Communicable Disease Policy/Bloodborne Pathogen Policy set forth by the University of Evansville's Athletic Training Program and agree to abide and adhere to it.

Athletic Training Student: _____ (Print name clearly)

Signature: _____ Date: _____

Course Schedule for MSAT (50 hours)

Summer I First Session [6]

AT 580: Evidence-Based Inquiry [3]

AT 582: Orthopedic Wrapping, Taping, and Related Skills [3]

Summer I Second Session [3]

AT 587: Therapeutic Modalities [3]

AT 590: Graduate Clinical Education (1)

Fall I [10]

AT 589: Evaluation of the Upper Extremity [3]

AT 521: Applied Anatomy and Physiology Lab [2]

AT 575: Advanced Nutritional Issues in Athletic Training [3]

AT 591: Graduate Clinical Education I [2]

Spring I [11]

AT 588: Evaluation of Lower Extremity [3]

AT 592: Graduate Clinical Education II [2]

AT 688: Advanced Rehabilitation of Athletic Injuries [3]

PH 542: Health Systems and Policy [3]

Fall II [11]

AT 690: General Medical and Pharmacology [3]

AT 691: Graduate Clinical Education III [5]

AT 551: Psychological Interventions in Athletic Health Care [3]

PH 535: Public Health Law and Ethics [3]

Spring II [9]

AT 692: Graduate Clinical Education IV [2]

AT 650: Administration of Athletic Training [3]

AT 693: Professional Issues in Athletic Training [1]

AT 699: Directed Evidence-Based Inquiry [3]

Appendix A: Bloodborne Pathogen Exposure Incident Form

EXPOSURE INCIDENT REPORT

(Routes and Circumstances of Exposure Incident)
Please Print

Employee's Name _____ Date _____

Date of Birth _____ SS# _____

Telephone (Business) _____ (Home) _____

Job Title _____

Date of Exposure _____ Time of Exposure _____ AM _____ PM _____

Hepatitis B Vaccination Status _____

Location of Incident _____

Describe what job duties you were performing when the exposure incident occurred _____

Describe the circumstances under which the exposure incident occurred (what happened that resulted in the incident) _____

What body fluid(s) were you exposed to? _____

What was the route of exposure (e.g., mucosal contact, contact with nonintact skin, percutaneous)? _____

Describe any personal protective equipment in use at time of exposure incident _____

Did PPE fail? _____ If yes, how? _____

Identification of source individual(s) (names) _____

Other pertinent information _____
