

**University of Evansville**  
**Master of Science in Athletic Training Program**



**Policies & Procedures Manual**  
**2024-2025**

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# Introduction

*Degree: Master of Science in Athletic Training*

*Program Director: Jeff Tilly, MS, LAT, ATC*

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](#) (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 University of Evansville's Master of Science in Athletic Training Program obtained initial accreditation in 2016-2017 and is accredited through 2031-2032.

The Master of Science in Athletic Training 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 16 NCAA Division I athletic teams, other college 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, athletic trainers in physician practices, physician assistants, 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 regarding race, color, creed or religion, national origin, gender, sexual orientation, age, or disability.

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## 2024-2025 Clinical Preceptors

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## **University of Evansville Mission Statement**

To empower each student to think critically, act bravely, serve responsibly, and live meaningfully in a changing world.

## **UE ATP Mission Statement**

The mission of the University of Evansville 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 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 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 and clinical instruction to facilitate student learning.

## Admission Requirements

Applications will open on approximately August 1 annually for the following summer cohort.

### Direct Entry Admission Requirements:

- In final year of undergraduate education or graduated with bachelor's degree
- Application VERIFIED on ATCAS
  - Accepted on rolling basis from August 1 until UE MSAT Open House (mid-November)
  - On ATCAS, one evaluation/LOR MUST be from an athletic trainer
- Cumulative GPA  $\geq 3.400$  at application date
- REQUIRED coursework completed in the following (B- or better)<sup>1</sup>
  - Anatomy & Physiology + Lab
  - Chemistry + Lab
  - Physics + Lab
  - Biology
  - Psychology
  - Statistics
  - Exercise Physiology
- Fifty (50) observation hours with athletic trainer documented and confirmed with signature
  - Does not need to be completed, but must demonstrate progress at time of application
- In-person visit to campus at UE MSAT Open House or before
  - May be waived on an individual basis with UE MSAT Program Director approval

<sup>1</sup>Applicants are permitted to have up to three courses not completed by application if unofficial transcript shows course(s) in progress and/or registered.

### Standard Admission Requirements:

- In final year of undergraduate education or graduated with a bachelor's degree<sup>2</sup>
- Application VERIFIED on ATCAS
  - Priority deadline January 1 at 12:00 pm CT for on-campus interviews in mid-January.
  - Rolling admission as enrollment dictates after priority deadline. Interviews as dictated by enrollment after January.
- Cumulative GPA  $\geq 3.000$ 
  - If cumulative GPA  $< 3.000$ , GRE scores are STRONGLY RECOMMENDED
- REQUIRED coursework completed in the following (C or better)<sup>3</sup>
  - Anatomy & Physiology + Lab
  - Chemistry + Lab
  - Physics + Lab
  - Biology
  - Psychology
  - Statistics
  - Exercise Physiology

<sup>2</sup>Current University of Evansville students may potentially begin the MSAT program in their undergraduate senior year and complete both their Bachelor of Science in Exercise and Sport Science and Master of Science in Athletic Training in five years. Students should consult with their undergraduate academic advisor if seeking this option.

<sup>3</sup>Applicants are permitted to have courses not completed by application if unofficial transcript shows all required courses in progress or registered.

For Direct Entry or Standard Admission, the following are RECOMMENDED coursework:

- Nutrition
- Biomechanics
- Medical Terminology

- Strength & Conditioning/Sports Performance



## **Athletic Training Program Technical Standards**

The Athletic Training Program at the University of Evansville is a rigorous 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 Athletic Training Program establish the essential qualities considered necessary for students admitted to this program 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, Commission on Accreditation of Athletic Training Education (CAATE). The following abilities and expectations must be met by all students admitted to the Athletic Training 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.

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. the ability to communicate effectively and sensitively with patients and colleagues, including individuals from diverse 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. the ability to record the physical examination results and a treatment plan clearly and accurately
4. the perseverance, diligence and commitment to complete the athletic training education program as outlined and sequenced
5. flexibility and the ability to adjust to changing situations and uncertainty in clinical situations
6. affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care
7. the skills and ability to maintain clinician/patient safety
8. the ability to successfully complete the coursework, clinical experiences and internships required for this program

Candidates for selection to the athletic training 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.

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 ATP. 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 and 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. 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 \$45 per year or \$90 for a 'lifetime' subscription.

The MSAT program also encourages all students to become members of the National Athletic Trainers' Association. For more information on becoming a NATA Student Member, please visit NATA's [website](#).

### Costs for MSAT student, 2024-25 school year

Tuition per credit hour	\$600
Clothing (2 polos, 2 t-shirts, etc)	\$124 (more or less depending on purchase)
NATA Student membership (after July 1)	\$87
ATrack membership (lifetime)	\$90

### UE's Withdrawal and Refund Policy

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

<https://www.evansville.edu/student-financial-services/downloads/charge-and-aid-refund-policy-2020.pdf#:~:text=If%20the%20student%20completely%20withdraws%20on%20or,the%20tuition%20and%20fees%20payment%20received%2C%20directly%20to%07the%07VA%2C%07upon%07receipt%07of%07school%07debt%07letter.>

## **Course Descriptions**

### **AT 521 or AT 486 (2) Applied Human Anatomy Laboratory**

This course is designed for graduate students who need to study human anatomy in a more detailed format. Emphasis is placed on the gross anatomy of the human skeleton, muscular, nervous, and circulatory systems using previously dissected cadavers. Students will explore, in greater detail, specific areas related to orthopaedic clinical evaluation (ankle, knee, hip, wrist, elbow, shoulder). Additionally, students will be expected to complete a teaching component based on instructor assignment of a body area.

### **AT 551 or AT 451 (3) Advanced Psychological Issues in Athletic Training**

This course will provide an overview of the rapidly developing field of sport psychology. A wide range of topics in sport and exercise psychology will be reviewed, including anxiety and performance, overtraining and burnout, psychometric characteristics of sport participants, and other psychological factors that may affect sport performance and injury. Although the major interest of American sport psychology involves applications intended to enhance athletic performance, this course will also cover topics of exercise and mental health. This course is designed to satisfy CAATE competencies and is intended for Professional-Level Master's Athletic Training Students.

### **AT 575 or AT 475 (3) Advanced Nutritional Issues in Athletic Training**

This course addresses a variety of topics 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 competencies and is intended for Professional-Level Master's Athletic Training Students.

### **AT 580 or AT 483 (3) Evidence-Based Inquiry**

This course is designed as an introduction to the field of athletic training and to introduce care and prevention of athletic injuries. Topics include, but are not limited to, the organization, administration, education, and counseling techniques used in caring for athletes, as well as the foundation of injury prevention, assessment, treatment, and rehabilitation. This course also serves as the basis for developing the concept of evidence-based practice in future clinicians. This course is designed to satisfy CAATE competencies and is intended for Professional-Level Master's Athletic Training Students.

### **AT 582 or AT 484 (3) Basic Skills in Athletic Training**

This course addresses a variety of topics 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 competencies related to the above-mentioned content areas and is intended for athletic training majors.

**AT 587 or AT 487 (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 588 or AT 488 (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 or AT 489 (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 590 or AT 480 (1) Graduate Clinical Education I**

This course is one of a series of five clinical education courses in the Graduate Professional Athletic Training Program designed to provide proficiency instruction and clinical experience in the field of Athletic Training. The emphases in this course are clinical anatomy, goniometry, patient assessment, and basic taping and bandaging techniques. This includes palpation of various bony landmarks and soft tissue structures; goniometric skill development; various taping techniques; clinical assessment skills such as blood pressure, pulse rate, and documenting relevant medical history; taping, bracing, wrapping, padding, and strapping. Clinical application and understanding are emphasized. The field experience rotations will be assigned per the clinical instruction plan and will include a variety of settings to introduce the student to the various options available within athletic training. This course is designed to satisfy CAATE competencies and is intended for Professional-Level Master's Athletic Training Students

**AT 591 or AT 481 (2) Graduate Clinical Education II**

This course is one of a series of five clinical education courses designed to provide proficiency instruction and clinical experience in the field of Athletic Training. One emphasis in this course is emergency procedures and on field assessment. Another 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 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. This course is designed to satisfy CAATE competencies and is intended for Professional-Level Master's Athletic Training Students

### **AT 592 or AT 482 (3) Graduate Clinical Education III**

This course is one of a series of five clinical education courses designed to provide proficiency instruction and clinical experience in the field of Athletic Training. The emphasis of this course is upper body evaluation. The field experience will include a rotation with an intended emphasis in the application of upper body evaluation skills. The field experience rotations will be assigned per the clinical instruction plan. 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. This course is designed to satisfy CAATE competencies and is intended for Professional-Level Master's Athletic Training Students

### **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 competencies and is intended for Professional-Level Master's Athletic Training Students

### **AT 688 or AT 485 (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 competencies and is intended for Professional-Level Master's Athletic Training Students

### **AT 690 or AT 496 (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. This course is designed to satisfy CAATE competencies and is intended for Professional-Level Master's Athletic Training Students

### **AT 691 (5) Graduate Clinical Education IV**

This course is one of a series of five clinical education courses designed to provide proficiency instruction and clinical experience in the field of Athletic Training. This is a semester-long immersive rotation for the student. The emphasis in this course is utilizing all competencies learned emphasized in previous clinical education courses, plus rehabilitation and lower body evaluation, to progress towards autonomous practice. The field experience may be with any of the clinical sites on campus, local high schools or clinics, or at our remote clinical sites. 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 progress is being made toward completion of the respective clinical proficiencies. This course is

designed to satisfy CAATE competencies and is intended for Professional-Level Master's Athletic Training Students

### **AT 692 (3) Graduate Clinical Education V**

This course is one of a series of five clinical education courses designed to provide clinical experience in the field of Athletic Training. The emphasis in this clinical education course is preparation for the BOC examination and developing a professional presence. The field experience will be assigned per the clinical instruction plan and may include time in a physical therapy clinic, . 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. This course is designed to satisfy CAATE competencies and is intended for Professional-Level Master's Athletic Training Students

### **AT 693 (3) Professional Issues in Athletic Training**

As a capstone class to the program, this course will require synthesis of content from all previous courses in the program. It will place an emphasis on preparation for the 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, athletic training and its role within inter-professional health care, creating a professional presence in athletic training (resume development, networking, and job search tactics), professionalism, and professional ethics. This course is designed to satisfy CAATE competencies and is intended for Professional-Level Master's Athletic Training Students

### **AT 699 (1) Directed Evidence-Based Inquiry (Optional)**

Students will develop a critically appraised clinical topic and evaluate evidence related to its clinical efficacy. A faculty mentor will be assigned to the student who will act an in a supervisory role during the research project.

**The progression of courses can be found in Appendix C**

## Progression & Retention Requirements

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

- Must receive a C or better in all AT courses
  - A student may only earn one C final grade throughout the MSAT program.
  - A student who does not receive a C or better, or a second C, in any coursework must repeat the course in question and clinical education course for that semester before continuing in the MSAT Program. The student will not continue onto the next clinical education course until the course and the clinical education course are appropriately completed. One attempt to retake the course will be allowed.
  - All written exams will score an 80% or higher for completion of the test grade. Scores of 80% or lower will go through the UE MS AT remediation testing policy with the highest possible score on that exam of 80%. This will apply to all in-person courses.
  - The AT faculty can grant provisional progression 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 and clinical education course for that semester must be completed/re-taken. Program progression will be considered by the AT faculty on an individual basis.
- Maintain a cumulative GPA of 3.00 or higher (without numerical rounding) after each semester of coursework
- Maintain appropriate Emergency Cardiac Care certification, consistent with the standards set by the BOC
  - Website of all appropriate certifications [here](#).
- Satisfactory evaluations on all clinical experiences.

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 and by the Program Director and the AT faculty at the end of each spring semester.

Students will be assessed prior to verification for them to register for the BOC exam. Students must achieve an 80 on assessments (or other satisfactory markers) prior to this.

**UE MSAT Remediation Policy:** Students will have access to the exam after the test scores are submitted and will have one week from posted grades to correct the questions that were incorrect and submit them to the AT faculty instructing the course. Incorrect answers will be corrected by using referenced material used within the course for this exam. This remediation will take place within one week of the posted test scores. After submission of the remediation work, the student will take an exam for the possibility of accumulating ½ of the points back that will be added to the original test grade with the maximum possible score of 80% on that exam.

For example, if a student receives a score of 72 on their Lower Evaluation, Knee exam test, they will have one week to submit corrected answers to the professor. These corrected answers will have the exam



number, exam question and correct answer with the referenced material where the answer was found. This will be done for all test questions that were incorrect.

1. A dislocating patella will usually dislocate in which direction?
  - a. Medially
  - b. Laterally
  - c. Inferiorly Incorrect Answer
  - d. Superiorly

Corrected answer to be submitted to the professor

2. A dislocating patella will usually dislocate in which direction?
  - a. Medially
  - b. Laterally
  - c. Inferiorly
  - d. Superiorly

True dislocation of the patella causes it to shift laterally and lock out of place, resulting in obvious gross deformity and spasm of the quadriceps group as it guards the injury.

Examination of Orthopedic and Athletic Injuries – Starkey, Brown, and Ryan p. 392.

## **Learning Objectives by Student Level**

### **MSAT I Learning Objectives:**

- Student will be able to describe and demonstrate the rational 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 lower body and spine
- Student will demonstrate the ability to recognize evaluate and assess selected general medical conditions
- Student will demonstrate an understanding of the use of pharmacological agents in athletic medicine
- Student will demonstrate the ability to recognize evaluate and assess selected general medical conditions.

### **MSAT II Learning Objectives:**

- 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 rational for and design appropriate rehabilitation programs.
- Student will be to describe and demonstrate their understanding of administrative issues in athletic training.
- Student will be able to identify fitness levels and prescribe appropriate exercise programs.
- 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 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
- Student 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 ATSS 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 Laboratories (Graves 104 & 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 always. 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 tables

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

# **Occupational Safety and Health Administration (OSHA) 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 ATSS 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 educates students to use the following guidelines and provisions to manage communicable disease that they may come into contact with in the athletic training facility 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 ATS having 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 (Crayton 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 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. *ATs 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
- Coronavirus
- Diarrhea
- Diphtheria
- Enteroviral Infections
- Hepatitis A, B, C
- Herpes Simplex
- HIV
- Measles
- Mumps
- Pediculosis
- Pertussis
- Rubella
- Scabies
- Streptococcal infection
- TB
- Varicella
- Herpes Zoster
- Viral Respiratory Infections/COVID 19

### **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 ATS's current clinical education class.
- 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).:
  - a) UE ATP post-exposure plan for Bloodborne Pathogens:
    - i) 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."
- ii) Treat all BBP contact as a potential risk (Universal Precautions) and use Personnel Protective Equipment (PPE) located at the designated locations at each site.
  - iii) Remove PPE after it becomes contaminated and before leaving the work area.
  - iv) Used PPE may be disposed of in biohazard containers.
  - v) Immediately wash any skin with soap and water and flush mucous membranes with water if these areas have had contact.
  - vi) Never wash or decontaminate disposable glove for reuse.
  - vii) Where appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or Other Potentially Infectious materials (OPIM).
  - viii) 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.
- 3) Report all BBP contact to Terry Collins, UE's Associate Athletic Director for Sports Medicine, and the Program Director as soon as possible and seek medical referral.
  - 4) Your supervising preceptor will then report to the University of Evansville's Health Center for the proper referral. A medical evaluation and follow-up consisting of the following:
    - a) Documentation of routes of exposure and how exposure occurred
    - b) Identify and document the source individual
    - c) Obtain consent and arrange to have the source tested as soon as possible to determine HIV, HCV, and HBV infectivity. Document results
      - i) New testing may need to be performed if the source is already known to be HIV, HCV and or HBV positive
      - ii) Assure that the exposed employee is provided with the source individual's test results and with information.
    - d) After obtaining consent, collect exposed employee's blood as feasible after exposure incident and test blood for HBV and HIV.
  - 5) Following an exposure incident, an Exposure Incident Report will be completed by the preceptor (Appendix A) as quickly as possible. This report should accompany the ATS to the physician.
  - 6) Any exposure should be handled quickly as the effectiveness of prophylaxis depends on the immediacy of its delivery.

### *Recordkeeping*

OSHA 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. ATSs should be aware of the potential problems with becoming involved with a peer who is an intercollegiate student-athlete or another ATS. Because clinical education rotations are assigned as a component of curriculum coursework, social situations and/or dating involving an ATS and/or an intercollegiate student-athlete (regardless of gender) or between other ATSs is strongly discouraged and is considered inappropriate.

If an ATS is dating or develops a friendly relationship beyond delivering healthcare services with an intercollegiate student-athlete, fellow ATS, or a patient at an off-campus clinical site, it must be reported to the Program Director and Clinical Education Coordinator immediately. This can range from casual sexual conduct to a serious dating relationship. If the AT faculty becomes aware of a social relationship that was not brought to their 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 any of the parties listed above, the ATS should not interpret this as the AT faculty and preceptors supporting these relationships. If an ATS is 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 ATSs 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 for any social media platform, and email address. ATSs 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. The University of Evansville Student Code of Conduct supports all Policies and Procedures and disciplinary action.

Students should also be aware that inappropriate use of social media will not be tolerated. This includes derogatory, inflammatory, or coercive comments made towards any member of the UE AT Program or the greater UE campus 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 phone use in class or lab is disruptive and unprofessional. Students who use cell phones in class will be dismissed from class and potentially 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 five (5) 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:

<b>Course</b>	<b>Primary subject area</b>
AT 590/AT 480	Vital Signs Surface Anatomy Goniometry/Manual Muscle Testing Taping, Wrapping, Padding, Strapping
AT 591/AT 481	Therapeutic Modalities Acute Care of Injury and Illness Risk Management and Injury Prevention
AT 592/AT 482	Upper Body Assessments and Evaluation General Medical Conditions and Disabilities Pharmacology
AT 691	Lower Body Assessments and Evaluation Therapeutic Exercise Injury Prevention
AT 692	Nutritional Aspects of Injury and Illness Psychosocial Intervention and Referral 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 and Minimum Hour Guidelines

All Athletic Training Students will gain the minimum number of clinical education hours as deemed appropriate by the ATP. The minimum number is 45 hours per credit hour of clinical education course. The credit hours per clinical education course are as follows:

- AT 590 - Graduate Clinical Education I (summer, first year) = 1 credit hour
- AT 591 - Graduate Clinical Education II (fall, first year) = 2 credit hours
- AT 592 - Graduate Clinical Education III (spring, first year) = 3 credit hours
- AT 691 - Graduate Clinical Education IV (fall, second year) = 5 credit hours
- AT 692 - Graduate Clinical Education V (spring, second year) = 3 credit hours

The maximum for AT 590 is 75 hours. The maximum for AT 591 is 250 hours. The maximum for AT 592 and AT 692 is 300 hours. The maximum for AT 691 (semester-long immersive rotation) is TBD. The MSAT Program Director will annually review total hours to maintain adequate hours per rotation (the minimum) and ensure ATSs are acquiring enough experience in each rotation to gain a meaningful educational experience (maximum). The MSAT Program Director will monitor the length of clinical experiences to ensure the ATS has adequate campus work-study balance.

## Clinical Experiences

Clinical experiences allow exposure to athletic practices, competitive events, and athletic training facility coverage. Experiences are distributed over a two-year period that allows ATSs to engage in clinical rotations with the University of Evansville intercollegiate athletic teams, local high school football teams, and many other affiliated sites. Rotations are assigned to ensure a balance between male and female sports, team and individual 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 **MSAT I** experience is devoted to gaining experience in a variety of settings. The initial clinical level in the summer will have sites with an athletic trainer in a physician's practice, outpatient rehabilitation clinic, intercollegiate athletics, and high school athletics. The fall and spring semesters are dedicated to obtaining clinical experiences using the criteria noted on the next page: male and female, team and individual sports, and upper and lower extremity sports. MSAT I students may have time off during the late fall and winter holiday seasons. Their clinical rotations are finished by the end of spring semester finals. Additionally, MSAT I students will obtain clinical experience with general population patients at one of our non-athletic setting clinical sites.

The **MSAT II**, fall semester is spent in a semester-long immersive rotation. Students will be assigned to a preceptor at any of our clinical sites and will be expected to obtain hours that would be comparable to autonomous professional practice. The ATS will not have any on-campus didactic requirements during this time. The MSAT II, spring semester will contain any rotation(s) to fulfill the clinical experience needs of the student as they prepare for the BOC examination. Additionally, MSAT II students will obtain clinical experience with general population patients at one of our non-athletic setting clinical sites.

**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 & Diving

### **Lower Body Exposure Sport:**

Soccer, Cross Country, Indoor Track & Field, Outdoor Track & Field, Basketball, affiliated HS or College Football

### **Equipment Intensive:**

Affiliated HS or College Football & Men's Lacrosse, Evansville Thunderbolts Hockey

### **Individual Sports:**

Cross Country, Indoor Track & Field, Outdoor Track & Field, Swimming & Diving, affiliated HS or College Wrestling, Gymnastics

### **Male Sports:**

Baseball, Basketball, Cross Country, Indoor Track & Field, Outdoor Track & Field, Soccer, Swimming & Diving, affiliated HS or College Football, Lacrosse

### **Female Sport:**

Basketball, Cross Country, Indoor Track & Field, Golf, Soccer, Softball, Outdoor Track & Field, Swimming & Diving, Volleyball, affiliated Lacrosse, Gymnastics

### **Rehabilitation and Age Diverse Exposure:**

ProRehab, PC; Rehabilitation and Performance Institute; Orthopedic Associates; AceCare

### **General Medical:**

St. Vincent'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) Preceptors perform all supervision. Supervision and learning from a preceptor is the utmost important but difficult factor to control and utilize. Direct supervision of ATs is paramount 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 AT 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 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, MSAT II students can begin supervised autonomy that mimics entry-level practice during AT 691. In AT 692, the ATS will be expected to conduct themselves with low levels of supervision in preparation for autonomous practice. 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 MSAT 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 Director, 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/or phone. Correspondence with all preceptors will be the AT faculty's responsibility. Adequate supervision will also be the AT faculty'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 Self Service. 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 590, 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**. MSAT I students may only miss **two (2) days** 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.

**AT 691 and 692:** Students are expected to attend all clinical experiences and scheduled classes one 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**. MSAT II students may only miss **one (1) 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 one unexcused absence 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 to promote professionalism as a representative of the Athletic Training Program.

### **General**

1. Students should keep hands clean, nails trimmed.
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, physical activity, 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 Facility Dress**

1. Approved UE Athletic Training collared shirt/sweatshirt OR team-issued top is most appropriate. 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 can be worn at the discretion of the preceptor. T-shirts with inappropriate comments or innuendos are not acceptable (this may include t-shirts provided by the UE 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, navy blue, gray, 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 always be worn. It is recommended and preferred that students wear clean sneaker/sport shoes in the Athletic Training Facility.
  - 3.2. Slip-on shoes are not acceptable.
4. Hats are not allowed inside the Athletic Training Facility and *for outdoors sports only*. Hats must be UE logo or at the discretion of the preceptor.

### **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 except the manufacturer's logo.
2. Hats must be UE logo or at the discretion of the preceptor. The hat should be clean and unfrayed.
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 can follow the dress code for those indoor sports that require more formal 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 Facility 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 A). 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 Educational Rights and Privacy Act (FERPA).

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 rule, no member of the faculty, staff, or associates should in any way disclose academic or confidential information about any of our students without first receiving the expressed permission of the students. This includes, for athletic training 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 U.S. Department of Education website.

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

HIPAA (Health Insurance Portability and Accountability Act) is important regarding patient privacy and protected health information. For more information about HIPAA, please see the U.S. Department of Health and Human Services website.

All athletic training students will take an annual online course with associated quiz to further provide education and compliance with HIPAA as part of their summer/fall clinical education course.

### **Sports Betting**

In conjunction with HIPAA (Health Insurance Portability and Accountability Act), sports betting in any NCAA sponsored sport is prohibited and may result in dismissal from the program.

## 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 general program. 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 (Appendix B) 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 Health Sciences 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 AT Faculty and/or the School of Health Sciences Chair may meet with the student or other parties to obtain as much information as possible.

The AT Faculty and School of Health Sciences Chair will meet and decide 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 AT Faculty and School of Health Sciences 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 Facility Policies & Procedures

The majority of the student's clinical education experience will take place in the University of Evansville Athletic Training Facility. 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 athletic training student 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 facility, 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 Facility can be obtained from the Associate Athletic Director of Sports Medicine/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: \_\_\_\_\_

# Appendix A: BBP Exposure Incident Report

## 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 \_\_\_\_\_

\_\_\_\_\_

## **Appendix B: Professional Violation/Grievance Form**

**University of Evansville  
Athletic Training  
Program Professional  
Violation Form**

**Name of student in violation:**\_\_\_\_\_

**Violation that occurred**\_\_\_\_\_

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**Date of Violation:**\_\_\_\_\_

**ATC/Instructor Signature (if applicable):**\_\_\_\_\_

**ATS Signature:**\_\_\_\_\_



## Appendix C: Course Sequencing

### Summer Session I, First Year (6 credits)

AT 580 Evidence-Based Inquiry (3)

AT 582 Foundational Skills in Athletic Training (3)

### Summer Session II, First Year (4 credits)

AT 587 Therapeutic Modalities in AT (3)

AT 590 Graduate Clinical Level I (1)

### Fall Semester, First Year (13 credits)

AT 551 Psychological Interventions in Athletic Health Care or AT 575 (3)

AT 588 Evaluation of the Lower Extremity (3)

AT 591 Graduate Clinical Level II (2)

AT 690 General Medical and Pharmacology (3)

AT 521 Applied Human Anatomy (2)

### Spring Semester, First Year (9 credits)

AT 589 Evaluation of the Upper Body (3)

AT 688 Advanced Rehabilitation of Athletic Injuries (3)

AT 592 Graduate Clinical Level III (3)

### Summer, Second Year

AT Internship

### Fall Semester, Second Year (11 credits)

AT 575 Advanced Nutritional Concepts in Athletic Training or AT 551 (3)

AT 691 Graduate Clinical Level IV (5)

AT 650 Administration in Athletic Training (3)

### Spring Semester, Second Year (9 credits)

AT 693 Professional Issues in Athletic Training (3)

AT 692 Graduate Clinical Level V (3)

ELECTIVE (3)

ELECTIVE: Choose one of the following:

- PH 501 – Epidemiology
- PH 515 – Health Behavior
- PH 542 – Health Systems and Policy
- PH 580 – Programs, Problems, and Policies in Public Health

### TOTAL CREDIT HOURS = 52

For students with research-intensive projects, the following course may be added to the Spring Semester, Second Year:

AT 699 – Directed Evidence-Based Inquiry (1)