

**WAYNESBURG UNIVERSITY
ATHLETIC TRAINING PROGRAM**



**ATHLETIC TRAINING PROGRAM MANUAL
2019-2020**

STUDENT POLICIES AGREEMENT

I, _____, have read, received an explanation of, and understand the guidelines contained in this handbook.

I also understand that I must comply with and follow these guidelines and policies during the period of my enrollment as an Athletic Training Student at Waynesburg University.

In accordance with Waynesburg University's clinical affiliation agreement, I grant permission for Waynesburg University's Clinical Preceptors to discuss both my academic standing and clinical progression with any or all of the Program's clinical affiliates. Further, I hold Waynesburg University's administration and faculty harmless for any discussion of my academic and clinical progression and standing with clinical affiliate sites.

STUDENT'S ID

STUDENT'S WU EMAIL

PRINTED NAME

SIGNATURE

DATE _____

PRINTED NAME

CEC SIGNATURE

DATE _____

PRINTED NAME

PD SIGNATURE

DATE _____

TABLE OF CONTENTS

Introduction.....	6
Program Information.....	6
Background Information	6
Definition of Terms.....	7
Athletic Training Faculty and Staff	8
Athletic Training Clinical Services Administrative Chain of Command	8
Athletic Training Education Administrative Chain of Command	9
Directory	10
Waynesburg University Master of Science Athletic Training Program	11
Mission Statement of the Athletic Training Program (MSAT)	11
Athletic Training Program Purpose, Goals, and Student Learning Outcomes	11
Purpose.....	11
Goals	11
Program/Student Learning Outcomes	11
Program Evaluation Policies	12
WU MSAT Program Purpose for Quality Program Assessment.....	12
Relationship between ATEC and MSAT program and CAATE	12
Ongoing Assessment of Outcomes Measured	12
Athletic Training Curriculum	13
Athletic Training Sequence.....	13
Athletic Training Program Requirements	13
Academic Advising and Counseling.....	14
Admission to the MSAT Program	14
Progression and Retention policy	16
Transfer Students	16
Statement of Diversity and Adherence to Technical Standards.....	17
Requirements for Graduation from the MSAT Program	17
Student Requirements	17
CPR Certification.....	18
Clearances	18
HIPAA and OSHA Training	18
Communicable Disease Policy	18
Orientation to Clinical Settings.....	18
ATS Health and Immunization Policies	18
<i>Physical Examination:</i>	18
<i>Immunizations:</i>	19
<i>Flu Shot:</i>	19
<i>PPD Test:</i>	19
<i>Hepatitis B Vaccination:</i>	19
Academic Disciplinary Actions	19
Disciplinary Procedures	19
Academic Progression	19
Non-academic Misconduct	20

Academic Misconduct	20
Re-instatement Policy	20
ATS Grievance Policy	20
Appeals Policy	21
Additional Information	21
Athletic Training Resources	21
Additional University Fees	21
Clinical Education	22
Clinical Experience	22
Clinical Education Requirements	23
Athletic Training Education Clinical Education Plan	23
Documentation	23
Clinical Education Experience Policy	24
General Clinical Roles and Responsibilities	24
Beginner Level ATS	24
Pre-Professional Level ATS	24
Professional Level ATS	25
Responsibilities Listed by Year	25
Beginner Level ATS – 1 st year Fall Semester	25
Pre-Professional Level ATS – 1 st year Spring Semester	25
Professional Level ATS – 2 nd year Fall and Spring:	26
Clinical Education Experience Settings	26
Policy for Preceptor Approval	28
Policy for Preceptor Dismissal	28
Policy for Clinical Placement Facilities Approval	28
MSAT Clinical Plan	29
ATS Expectations during Clinical Education Experience	29
Hours Policy	29
Documentation of Clinical Proficiency and Learning Over-Time	30
Clinical Integrated Proficiencies	30
Clinical Education Performance Evaluations	30
ATS Evaluation	31
ATS Self-Evaluation	31
Clinical Site and Preceptor Evaluation	31
First Responder Policy	31
Commitment to Clinical Education	32
Absence from Clinical Education Experience	32
Professionalism	32
Social Media Policy	34
Electronic Device Use	34
Dress Code	34
Athletic Training Clinic:	35
Indoor Sports	35
Outdoor Sports (Inclement weather – dress appropriately)	35
Off-Site Inter-professional Visits	35
High School Affiliated Sites	36
Relationships with Others	36
Preceptors	36

Team Physician/Allied Health Care Professionals	36
Coaches	36
Patients	37
Participation in Intercollegiate Athletics	37
Employment	38
Time Management	38
Legal Liability	39
Clinical Disciplinary Action	39
Clinical Progression	39
Probation Suspension and Dismissal	39
Probation	40
Non-academic Misconduct	41
Academic Misconduct	41
Re-instatement Policy	41
ATS Grievance Policy	41
Appeals Policy	42
The Athletic Training Student Association (ATSA)	42
Mission Statement	42
Purpose Statement	42
Objectives and Goals	42
Iota Tau Alpha (ITA)	42
Purpose Statement	42
APPENDICES	44
Appendix A: NATA Code of Ethics	45
Appendix B: Curriculum Sequence	47
Appendix B: Clinical Proficiencies Student Manual	48
Appendix C: Admission Evaluation Form	4
Appendix D: Clinical Observation Form	8
Appendix E: Technical Standards Form	10
Appendix F: Exposure Control Plan	12
Appendix G: Communicable Disease Policy	20
Appendix H: Clinical Expectations Form	22
Appendix I: BOC Standards of Professional Practice Version 3.1	24

Introduction

Program Information

The Waynesburg University Master's in Athletic Training (MSAT) program is a competency based educational process that was approved by the National Athletic Trainer's Association (NATA) in 1989 and was initially accredited in 1998. In 2010, the ATP was granted continuing accreditation by Commission on Accreditation of Athletic Training Education (CAATE).

Waynesburg University MSAT Program is accredited by the Commission on Accreditation of Athletic Training Education (CAATE). The program has been placed on Probation as of February 23, 2018, by the CAATE, 6850 Austin Center Blvd., Suite 100, Austin, TX 78731-3101. The Athletic Training Program remains accredited by the CAATE with the next accreditation review during the 2019-2020 academic school year.

Accreditation by CAATE allows the students to sit for the Board of Certification (BOC) Exam to become a certified athletic trainer upon completion of the program requirements.

The Waynesburg University MSAT program in accordance with the strategic alliance of the NATA, CAATE, and BOC has transitioned the program to the graduate level starting the summer of 2018.

Background Information

Athletic training is an intellectually challenging and physically demanding profession. Effective communication skills, critical thinking, physical mobility, strength, stamina, and appropriate behavioral and social attributes are essential. Combining theoretical knowledge with application in the clinical setting is essential to develop the necessary skills to become an efficient and effective athletic training professional. Taking the opportunity to immediately apply classroom knowledge in the clinical education setting will greatly enhance retention of that knowledge. It is the purpose of the Athletic Training Faculty to prepare each Athletic Training Student (ATS) for a successful career as a health care professional. The academic curriculum and structured clinical education experiences will provide the opportunity to gain both competency and psychomotor experiences.

Waynesburg University MSAT program has been structured so that each student continually integrates course instruction with practical application; many of the classes include laboratory sections for this purpose. It is important to understand that successful completion of all coursework, clinical education experiences, and clinical proficiencies is vital to each student's successful completion of the MSAT program and preparation as entry-level athletic trainers.

This manual will provide an organized and detailed description of the ATP at Waynesburg University including roles and responsibilities of the faculty, staff, and students, and educational policies. A brief review of the medical services provided for the University's intercollegiate athletic teams will also be provided.

This manual will guide administrative and professional decisions pertaining to the ATP as its contents describes the various roles and responsibilities the ATS will be expected to perform throughout his/her education. In addition, the policies presented in this manual have

been prepared in order to ensure high standards of excellence are maintained in both the academic and clinical settings.

Definition of Terms

Athletic Training Student (ATS): A student formally enrolled in the professional phase of the athletic training curriculum.

Clinical Education: The application of athletic training knowledge, skills, and clinical abilities on an actual patient base that is evaluated and feedback provided by a Preceptor. Clinical education represents the athletic training students' formal acquisition, practice, and evaluation of the Entry-level Athletic Training Clinical Proficiencies under the direct supervision of a preceptor. Clinical education shall occur for a period of two academic years (4 semesters) and be associated with course credit. Courses shall include educational objectives and specific clinical proficiency outcomes that can be documented over time. Clinical education will include exposure to the following criteria: (For information specific to WU's clinical requirements, see *Clinical Education Requirements*).

- Protective Equipment
- Male and female sport
- Team and individual sport
- Non-sports related
- General medical
- Off-campus
- Clinical Immersion (*Required one semester*)

Clinical Proficiencies: The entry-level athletic training clinical proficiencies define the common set of skills that entry-level athletic trainers should possess. Proficiencies require the ATSs' integration of individual pieces of knowledge and skills (educational competencies) in a decision-making situation. The clinical proficiencies demonstrate learning over time. Whenever possible, proficiencies are assessed in a real-time environment/situation such as evaluating a real injury to an athlete. Simulated evaluations are used to supplement real-time learning situations.

Clinical Site/Setting: A physical area where clinical education occurs. The clinical site/setting shall include the athletic training clinic, athletic practices, competitive events, physician's clinics, physical therapy clinics, hospital settings, and various allied health care settings. The student must be supervised by an appropriate licensed preceptor while in these sites/settings.

Direct Patient Care: The application of athletic training knowledge, skills, and clinical abilities on an actual patient.

Direct Supervision – Direct supervision refers to the close monitoring of the athletic training student during the clinical experience. The preceptor must be physically present and have the ability to intervene on behalf of the athletic training student and the patient. Only clinical hours that occur under the direct supervision of a Preceptor are recognized by CAATE and the MSAT program.

Educational Competencies: The Educational Competencies are the individual cognitive (knowledge), affective (application), and psychomotor (skills) components of entry-level athletic

training programs. Competencies are used to develop the curriculum and educational experiences of students enrolled in CAATE-accredited athletic training programs.

Preceptor: A certified/licensed professional who teaches and evaluates students in a clinical setting using an actual patient base.

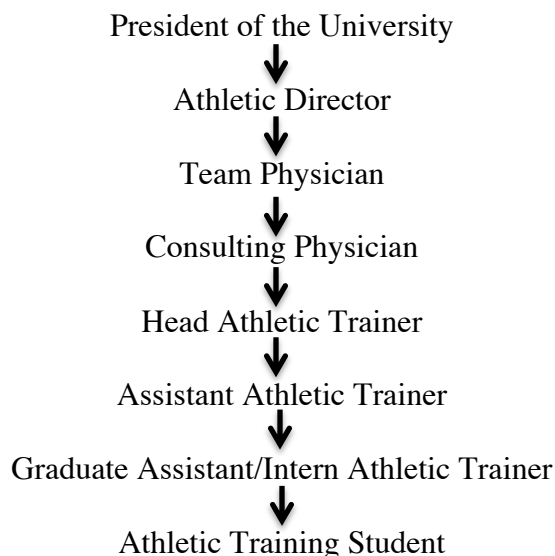
Athletic Training Faculty and Staff

The ATP faculty and staff consists of the Athletic Training Program Director (PD), Coordinator of Clinical Education (CEC), Team Physician/Medical Director, Head Athletic Trainer, Assistant Athletic Trainer, Graduate Assistant Athletic Trainers, and Preceptors.

The Team Physician, Head Athletic Trainer, Assistant Athletic Trainer, and the Graduate Assistant Athletic Trainers will provide primary medical care for Waynesburg University's intercollegiate patients; the PD and CEC will assist as needed.

The Team Physician shall oversee the provision of care administered by the Waynesburg University Athletic Training Program. The Team Physician, or the appropriate Physician Consultant, shall supervise the care rendered by all paramedical personnel to all intercollegiate patients. The final judgment regarding athletic participation at Waynesburg University rests with the Team Physician. All athletic trainers work only under the supervision of the Team Physician. The athletic trainer will be responsible for the day to day care and medical services to the student-athletes. This includes but not limited to evaluation and diagnosis of injured patients; administering first aid and directing their rehabilitation programs, including modalities; and direct and supervise the daily activities of the Athletic Training Facility, under the supervision of the Team Physician. The PD, CEC, Head AT and Preceptors provide direct supervision to the undergraduate ATS during their clinical education experiences.

Athletic Training Clinical Services Administrative Chain of Command



Athletic Training Education Administrative Chain of Command



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Waynesburg University Master of Science Athletic Training Program

Mission Statement of the Athletic Training Program (MSAT)

The Waynesburg University MSAT Program seeks to prepare Athletic Training Students (ATs) for successful careers by instilling a Christian identity with an in-depth study in Athletic Training. The program provides opportunities for students to achieve balance between academic scholarship and the acquisition of skills necessary for careers in athletic training and health care. The curriculum design provides opportunities for the development, synthesis, and demonstration of cognitive competency and professional behavior. The curriculum is guided by the Athletic Training Educational Competencies (ATEC) established by the National Athletic Trainers' Association (NATA) along with the Christian principles on which the University was founded. The NATA Code of Ethics guides our efforts to provide the means, inspiration and values that will enable our ATs to pursue successful, productive, and compassionate lives of service.

Athletic Training Program Purpose, Goals, and Student Learning Outcomes

Purpose

The purpose of the MSAT Program at Waynesburg University is to prepare students for a career in Athletic Training that leads to fulfilling a path of life, leadership, and service within the Christian Faith.

Goals

The goal of the MSAT Program is to:

1. Provide an educational program for students desiring to obtain Board of Certification (BOC) certification.
2. Develop competent and confident students entering the profession of Athletic Training as health care providers.
3. Provide students the ability to practice their knowledge, skills and abilities (learned in the didactic education) in the clinical setting under direct supervision of qualified healthcare preceptors.
4. Incorporate leadership abilities through the Christian faith by fully engaging students in their clinical sites and community service opportunities.
5. Provide opportunities for students to participate in the advancement of the athletic training profession
6. Allow students to compete for scholarly awards, scholarships, and grants

Program/Student Learning Outcomes

The students, upon completion of the ATP, will be able to:

1. Demonstrate cognitive and psychomotor competence in the 8 content areas of the ATEC. (G1,2,3)
2. Integrate communication skills, both written and oral, as a health care provider within the larger context of the health care system to be able to work collectively with other health care providers. (G2,3,5,6)
3. Assess and construct ethical, moral, and legal behavior as an athletic trainer. (G1-3)

4. Manage patient care (based on their development of knowledge, clinical experience, critical thinking, and evidence-based decision making) to integrate the most current technological, innovated, and evidence-based approach to effectively practice with diverse population in a variety of clinical settings, and with various allied healthcare professionals. (G1-6)
5. Integrate the Christian tradition/mission to incorporate life, leadership, and service with and among others. (G2-4)
6. Critique and generate research to enhance the quality of care for the healthcare profession, specifically within the athletic training field. (G1-6)

Program Evaluation Policies

The MSAT program considers student evaluations within the didactic and clinical setting, key components to the viability of providing quality education within the program to prepare students for success with the BOC exam and a career as a healthcare professional. The MSAT program uses four indirect evaluations (SmartEval, Clinical/Preceptor Evaluations, Senior Exit Surveys, and Alumni Surveys) forms and one indirect exam (BOC) to assess the level of quality of both the settings (Didactic and Clinical) and Staff (faculty and clinical preceptors). The MSAT program also uses direct formative and summative evaluations such as exams, papers, practical's, presentations, research projects, and clinical scenarios to assess the viability of the MSAT program.

WU MSAT Program Purpose for Quality Program Assessment

The purpose of our quality program assessment process is to identify if the data we are collecting is reflective of our program's mission, purpose, and goals. Furthermore, this process is a necessity to ensuring our program remains reflective of the University's mission. Our continuous process of assessment provides opportunity to collect and review data with various members within the department and administration on a regular basis.

Relationship between ATEC and MSAT program and CAATE

Our MSAT Program has an active, probationary, accreditation status through the Commission on Accreditation of Athletic Training Education (CAATE). It is our responsibility to develop and implement the curricular framework and structure needed for our students to become certified athletic trainers. Guided by the ATEC, set forth by the CAATE, our framework is designed to ensure our program meets, at minimum, the standards required for continual accreditation and to develop students with the appropriate knowledge, skills, and abilities.

Ongoing Assessment of Outcomes Measured

In continuing with the assessment process, the MSAT program is assessed upon completion of each semester by the PD, CEC, and full-time faculty members. The evaluation tools are reviewed and re-evaluated as to their effectiveness and usefulness for WU faculty and for clinical Preceptors located on and off campus. Data received from these tools are reviewed and discussed among the PD, CEC, and faculty and appropriate steps are taken to improve educational effectiveness of the MSAT program. Any substantive changes or alterations to the program are discussed and processed through the WU Curriculum Committee and GPS committee. Changes approved will then be implemented and assessed.

Athletic Training Curriculum

A specific two-year plan (4 semester curriculum) has been developed at Waynesburg University for students interested in pursuing a Master's degree in Athletic Training. The curriculum has been carefully evaluated and transitioned from the previously established undergraduate degree program to adhere to the new standards associated with the profession of Athletic Training. The advancements in the MSAT curriculum allow for inclusion of new skill development while incorporating research and clinical immersive experiences. The curriculum has also been carefully designed to provide ATS with the necessary knowledge and experience in a gradual, progressive manner, to become effective and efficient entry-level Athletic Trainers upon graduation.

Athletic Training Sequence

The athletic training program is a two year program (56 credits) (*Appendix A*). The first year of the program is dedicated on providing instruction on becoming a clinical athletic trainer. Focus is on emergency care, evaluation, therapeutic intervention, and preventative care. In addition, students will also start their understanding and application of research related to athletic training and the health care field.

The second year of the program provides online didactic education while also providing a year-long immersive clinical education experience for the students to gain confidence in their hands-on skill acquisition.

Athletic Training Program Requirements

Students enrolled in the MSAT program are required to complete competencies, proficiencies, a practical examination, a BOC prep exam, and a Patient Reported Outcome (PRO) project prior to graduation.

1. Each ATS will be required to complete Athletic Training Education Proficiencies set forth by the CAATE. This is accomplished through a clinical proficiency guidebook (selected by the Program Faculty) and is completed during the first year of the MSAT program in ATP 531 and ATP 532. ATSs must demonstrate competency in each particular task which begins a cycle of learning, feedback, refinement, and more advanced learning.
2. Each ATS will be required to complete the Clinical Integrated Proficiencies (CIP) set forth by the CAATE. This is accomplished through the Waynesburg University Athletic Training Clinical Proficiencies Student Manual (*Appendix B*) and is completed during the fall semester of the second year of the MSAT program in ATP 533. This manual documents practice and reinforcement of learned concepts by gaining clinical experience with real-life applications that readies the ATS for opportunities to demonstrate decision-making and skill integration ability. ATSs should be assessed in their performance of CIPs on actual patients and must achieve a minimum level of "satisfactory" on all clinical proficiencies. If this is not possible,

standardized/simulated patients or scenarios are utilized to measure student proficiency.

3. Each ATS will be required to complete a practical examination at the completion of the fall semester of the second year of the MSAT program in ATP 533. ATSs must complete pass the practical examination with a 90 percent or higher. Remediation will be offered if a student fails to pass the practical examination with a 90 percent or higher.
4. Each ATS will be required to complete a BOC prep examination at the completion of the fall semester of the second year of the MSAT program in ATP 533. ATSs must complete pass the BOC prep examination with a 70 percent or higher within each of the five domains. Remediation will be offered if a student fails to pass the BOC prep examination with a 70 percent or higher. (The BOC prep exam is from the BOC website from their self-assessment exam section)
5. Each ATS will be required to complete a PRO project. Upon completion of the project, each ATS will present their research to the MSAT program at the end of their second year in the MSAT program with a 70 percent or higher.

Academic Advising and Counseling

All ATSs will be assigned an advisor who is a core faculty member within the MSAT program. The advisor will assist each ATS with the selection of courses and guide him/her throughout their University experience. ATSs are encouraged to make an appointment with their Preceptor, advisor, or any one of the Athletic Training Faculty members whenever a problem arises.

Admission to the MSAT Program

Admission into the MSAT program is competitive and only a limited number of students will be accepted on a yearly basis. Enrollment in the MSAT program is based on clinical site affiliation. Currently, a maximum of 20 students* will be admitted into the program in any given year. If a candidate is denied admission to the MSAT program, the student may reapply the following year.

** This number may be increased based off of clinical site availability and available Faculty resources*

There are two options to apply to the MSAT program at Waynesburg University. Students will be selected upon evaluation of the following factors (*Appendix C*)

Option 1 – (for high school seniors interested in Athletic Training)

1. Acceptance into the Integrated Concurrent 5-year degree program

2. Completion of all general education requirements prior to acceptance into the MSAT program
3. A 3.0 GPA
4. C or above in all pre-requisite courses:
 - a. One Semester of Biology with lab
 - b. One Semester of Chemistry with lab
 - c. One Semester of Physics with lab
 - d. One Semester of Human Anatomy with lab*
 - e. One Semester of Human Physiology with lab*
 - f. One Semester of Statistics
 - g. One Semester of Introduction of Psychology
 - h. One Semester of Exercise Physiology

* *Anatomy and Physiology 1 and 2 may substitute for these pre-requisites*
5. Completion of graduate admission application, resume, and two professional references
6. Completion of Clinical Observation Experience
 - a. Minimum of 50 hours
 - i. Completed on the Clinical Observation form included on the graduate admission application (*Appendix D*)
 - b. Must be completed with a qualified Athletic Training Preceptor
 - i. Must be BOC credentialed
 - ii. Must hold current state licensure or registration
7. Complete the Technical Standards form for the MSAT program with or without reasonable accommodation (*Appendix E*).
8. Interview with Faculty of the MSAT program (at the discretion of the program Faculty)

Option 2 – (for college seniors interested in Athletic Training)

1. B.A. or B.S. degree from an accredited institution of higher education
2. A 3.0 GPA
3. C or above in all pre-requisite courses:
 - a. One Semester of Biology with lab
 - b. One Semester of Chemistry with lab
 - c. One Semester of Physics with lab
 - d. One Semester of Human Anatomy with lab*
 - e. One Semester of Human Physiology with lab*
 - f. One Semester of Statistics
 - g. One Semester of Introduction of Psychology
 - h. One Semester of Exercise Physiology

* *Anatomy and Physiology 1 and 2 may substitute for these pre-requisites*
4. Completion of graduate admission application, resume, and two professional references
5. Completion of Clinical Observation Experience
 - a. Minimum of 50 hours
 - i. Completed on the Clinical Observation form included on the graduate admission application (*Appendix D*)
 - b. Must be completed with a qualified Athletic Training Preceptor
 - i. Must be BOC credentialed
 - ii. Must hold current state licensure or registration

6. Complete the Technical Standards form for the MSAT program with or without reasonable accommodation (*Appendix E*).
7. Interview with Faculty of the MSAT program (at the discretion of the program Faculty)

****Exceptions to the admission requirements, including pre-requisite course requirements, will be made on an individual basis provided the student's progression within the MSAT is obtainable*

Upon acceptance into the MSAT program, students will be required to complete:

1. Documentation of Physical Exam and Immunization Record (including: Hepatitis B vaccination, and TB test results).
2. CPR/AED certification from AHA or ARC
3. Clearances (PA Acts: 33 - Child Abuse History Clearance; 34 - Criminal Record Check; 114 - FBI Fingerprint Criminal Background Check)
4. ATRACK Student Membership

Progression and Retention policy

Once accepted into the MSAT Program, the ATS is expected to meet the following criteria to progress through the program and graduate:

- Maintain a GPA of 3.0 overall
- Receive a C or better in all Athletic Training required courses.
- Achieve minimal level of satisfactory on all clinical proficiencies
- Complete all clinical responsibilities as assigned.
- Complete all graduate clinical or PRO project objectives

Transfer Students

Waynesburg University MSAT Program will consider admitting transfer students on an individual basis. The MSAT Program Director and Admission's office will review the transfer student's transcripts to determine the courses that are eligible to be accepted as transfer credits.

All transfer students interested in the MSAT Program will be considered based on:

- Meeting institutional guidelines for graduate admissions to the university
- Provide two letters of recommendations
- Complete an interview performance (at the discretion of program Faculty)
- Have completed all of the prerequisite courses with a C or better
- Complete the technical standards form for the MSAT program
- Provide proof of a physical exam and Immunization Record (including: Hepatitis B vaccination, and TB test results).
- Provide proof of CPR/AED certification through ARC or AHA.
- Have a minimum GPA of 3.0 from previous institution.

If a student is transferring from another CAATE accredited AT Program, AT courses from the previous institution may be considered acceptable equivalents to WU MSAT Program courses. This is at the discretion of the Program Director and will require the submission of syllabi that includes a course description and objectives. Determination of the student's placement in WU's MSAT Program at the time of transferring is at the discretion of the Program Director.

If a transfer student should be admitted, he or she will be required to complete a minimum of one semester of clinical experiences at WU in addition to a minimum of one semester of immersive clinical experience.

Statement of Diversity and Adherence to Technical Standards

Waynesburg University's MSAT program guarantees all ATs equal opportunity without regard to religion, race, color, ancestry, national origin, marital status, sex and age. However, as lifting, carrying and other strenuous activities are inherent in the performance of athletic training skills and duties each ATS accepted into the program must meet the technical standards (*Appendix E*) with or without modification in order to complete the MSAT Program.

Requirements for Graduation from the MSAT Program

To be eligible for graduation from Waynesburg University's MSAT program, the student will need to complete the following:

1. Maintain ATrack membership through the length of the MSAT program
2. Complete all courses with a C or better
3. Complete the MSAT with a cumulative GPA of 3.0
4. Complete and pass the practical exam with a 90 percent or higher
5. Complete and pass the PRO project with a 70 percent or higher
6. Complete all requirements of the program within a seven (7) year period from start of graduate enrollment.

Student Requirements

Upon acceptance within the MSAT program and to the graduate school at Waynesburg University, the student will be required to complete the following material and have present in their academic and clinical file. Completion of these requirements is required in order to work with patient populations during their clinical experiences.

CPR Certification

Each ATS must hold current CPR/First Aid for the Professional Rescuer certification and provide verification of the certification to the PD. Each fall prior to pre-season camp, each ATS will be re-assessed on his/her CPR/First aid skills to remain compliant. If the ATS is not in attendance during this session it is the student's responsibility to make sure their CPR certification is up to date.

Clearances

ATSs will be required to complete three clearances in order to start their clinical experiences in several of the clinical settings, including high school and hospital based settings. Students will be required upon acceptance into the MSAT program to complete their PA Acts: 33 - Child Abuse History Clearance; 34 - Criminal Record Check; and 114 - FBI Fingerprint Criminal Background Check.

HIPAA and OSHA Training

Each ATS must complete annual HIPAA and OSHA training. Each fall, all ATS will participate in a training session to update HIPAA and OSHA standards. If an ATS is not in attendance during this session they will not be allowed to participate in clinical education until completed. Waynesburg University Exposure Control Plan (*Appendix F*) will also be reviewed at this time.

Communicable Disease Policy

The Center for Disease Control (CDC) outlines specific policies for minimizing exposure of communicable diseases within health care facilities and between health care providers and patients. The Waynesburg University MSAT program is educating health care providers and chooses to use the provisions outlined in the Communicable Disease Policy (*Appendix G*) to manage communicable diseases that may arise during the ATS' clinical educational experiences.

Orientation to Clinical Settings

Each ATS must complete a Clinical Expectations Form (*Appendix H*) when starting a new clinical setting. This form provides a record that the ATS reviewed the policies, EAP, BBP, and any other important information related to that specific clinical setting with their Preceptor.

ATS Health and Immunization Policies

The following health requirements are mandatory for each ATS prior to their enrollment into the MSAT program. Failure to complete these health requirements will be cause for removal from clinical assignments and may impede progress in the completion of the degree. The following requirements must be on file with the Program Director:

Physical Examination:

A physical examination is required of all ATSs. If the physical is not on file with the university (student health center or athletic training services department), the student will be required to obtain a physical examination prior to involvement in clinical assignments.

Immunizations:

All immunizations must be up to date, including Hep B, DTP, measles, mumps, rubella (MMR), polio and varicella.

Flu Shot:

Healthcare Facilities are requiring their employees to have regular flu shots. This may be required prior to observation at several of our affiliated sites. If required, it will be the student's responsibility to obtain a flu shot prior to attending any off site clinical education.

PPD Test:

The **Mantoux test** (also known as the **Mantoux screening test, Tuberculin Sensitivity Test, Pirquet test, or PPD test** for Purified Protein Derivative) is a diagnostic tool for tuberculosis. Some clinical sites may require to have a PPD test completed prior to doing any observation. The ATS will be responsible for obtaining this test and subsequent results.

Hepatitis B Vaccination:

All ATSs are required to receive a hepatitis B vaccination prior to admission to Waynesburg University and the MSAT program.

Academic Disciplinary Actions

Disciplinary Procedures

Waynesburg University graduate and professional studies programs has a two C requirement for progression. Should a student receive more than two C's in any one semester, the University reserves the right to halt progression within any program.

Academic Progression

Any student whose cumulative GPA falls below a 3.0 will be placed on probation for one semester. The student will have one semester to raise their GPA to a 3.0 or higher. If the student fails to achieve a 3.0 in the subsequent semester, the student will be dismissed from the MSAT program. It is highly recommend that the student meet with his/her academic advisor and/or the PD for counseling and continual advisement.

Any student who receives a grade below a C in any Athletic Training Course will be placed on suspension for one full year and required to retake the deficient course the following year. Should the student receive a grade below a C in the same course, the student will be dismissed from the program.

While on probation, the student will receive a letter indicating probation status and the letter will be placed in the student's academic file. It is highly recommend that the student meet with his/her academic advisor and/or the PD for counseling and continual advisement.

Any student who does not achieve a C or better in any required course risks an interruption in his/her progression through the MSAT program.

A student on probation:

- May be required to participate in one-on-one sessions with program faculty to help

with the academic shortcoming.

- Will be required to improve deficient areas. A remediation contract will be established by program faculty. Contracts will be constructed according to the individual student's needs.
- Will be dismissed from the program for failure to correct problem areas in the designated time frame.

Non-academic Misconduct

Any ATS that is disruptive during classroom or clinical education experiences is subject to disciplinary action. Disciplinary action will be discussed between the PD and CEC of the MSAT program. During this meeting, the PD and CEC will discuss the student's behavior and recommend an appropriate action. Disciplinary action may result in probation, suspension, or dismissal from the program. Each case will be independently reviewed.

Academic Misconduct

The MSAT program follows University-wide policies regarding academic misconduct. Each ATS should familiarize himself or herself with the Rules of Conduct in the University Handbook. Academic misconduct is any form of cheating, including using concealed notes during exams, copying or allowing others to copy from an exam, ATSs substituting for one another in exams, submission of another person's work for evaluation, preparing work for another person's submission, unauthorized collaboration on an assignment, submission of the same or substantially similar work for two courses without the permission of the professors.

Plagiarism is a form of academic misconduct that involves taking either direct quotes or slightly altered, paraphrased material from a source without proper citations and thereby failing to credit the original author. Plagiarism includes cutting and pasting sources from the Internet, as well as purchasing papers from other students or specialized websites.

Be forewarned; under no circumstances will academic misconduct be tolerated.

Disciplinary action in such cases will be severe and swift, ranging from receiving a failing grade on an exam or paper to dismissal from the MSAT program and/or the University. The MSAT program faculty follows the Academic Integrity Policy set by Waynesburg University (*refer to the current University catalog for more information*).

Re-instatement Policy

A student will only be reinstated into the MSAT program once he or she has met or surpassed the requirements designated as deficient. Any student that feels he/she did not receive fair process may appeal following the Waynesburg University Student Grievance Policy (*refer to the current University catalog for more information*).

ATS Grievance Policy

If a student in the MSAT program has a grievance in a specific required course, policy, or procedure the student may follow the Waynesburg University Student Grievance Policy. The student may also meet with the graduate academic chairperson who will record information from the student and then convene with the Graduate and Professional Studies Grievance Committee including the academic chairperson, PD (or other appointed MSAT faculty member if PD is involved in grievance), and one faculty member not from the MSAT program (appointed by the chairperson) to review the grievance and recommend appropriate action. The student also has

direct access to the Academic Dean or Provost to present the grievance (*refer to the current University catalog for more information*).

Appeals Policy

Students have the right to appeal their probation/suspension/dismissal from the MSAT program. Students will submit their appeal to the Graduate and Professional Studies Grievance Committee on appeals to be heard. A decision will be rendered from the committee and a letter will be sent to the student and PD of the MSAT program. (*refer to the current University catalog for more information*).

Additional Information

Athletic Training Resources

Program Faculty maintains an up to date library of materials in each of their respected offices. These resources are available for the ATS to gain extensive knowledge in athletic training concepts. The journals and textbooks housed in faculty offices are available for use, but cannot be removed without permission.

Additionally, the MSAT program maintains a small library of textbooks, journals, and video resources in the Athletic Training Clinic. ATSs are encouraged to use these resources, but they must remain in the location where they are housed. Finally, the University's Eberly Library has a diverse collection of textbooks, journals, and periodicals to assist ATSs in their research. The MSAT program faculty is continually adding to the library holdings. It is recommended that ATSs use these materials frequently as resources for research papers, and to learn the use of the University library system.

In addition to the materials housed on campus, the MSAT program relies on online journals and databases for ATSs to use in most courses throughout the program. ATSs are educated on use of these databases and how to search to adequately prepare them to use throughout the program. The Journal of Athletic Training and position statements are used frequently as well as Pubmed, Cochrane Library, PEDro, Google Scholar databases, and Ebscohost search engine.

Additional University Fees

- Tuition for Graduate School (Master of Science in Athletic Training) - \$670.00 per credit
- Withdrawal and refund policy (*refer to the current University catalog for more information*).

Students in the MSAT Program will encounter additional expenses associated with the program. Those expenses include:

- **Apparel:** Due to the rising cost of athletic training apparel and the number of students in the ATP, students must purchase MSAT program apparel for use during clinical rotations (at minimum this includes one polo shirt and two t-shirts) through a 3rd party apparel company. Students may elect to purchase additional clothing/items at their discretion.

- Identification: One name badge is purchased for each student; however, replacement badges due to loss or damage are the financial responsibility of the student. Students are required to wear their name badge during all clinical rotations.
- Travel expenses to clinical sites: Students must provide their own transportation to their assigned clinical rotations. Expenses for this travel are the student's financial obligation. Communication between students can help set up carpool to clinical sites.
- Physical Examination and Immunizations: Proof of a physical exam and Immunization Record (including: Hepatitis B vaccination, and TB test results) must be completed prior to the start of clinical rotations.
- Meals: Students may need to supply some of their meals while on campus for orientation and pre-season. However, meals may be available through the WU Cafeteria.
- ATRACK Fees: This membership will grant the student access to ATRACK which will be used to input their clinical records.
- Healthcare Clinical Fee: Waynesburg University holds a Professional Liability Occurrence Insurance Policy for ATs. This fee is \$160 per semester and billed through the ATs' tuition.
- (Optional) Personal liability insurance: Although the ATs are covered under a blanket liability policy through the University, ATs are encouraged to acquire additional professional liability insurance in the event of unforeseen litigation.
- (Optional) NATA Membership Fees: Students are encouraged to hold current student membership with the NATA to be able to access pertinent information regarding the athletic training profession.
- (Optional) BOC Certification Exam: Upon graduating, ATs may sit for their national certification examination through the Board of Certification (BOC).

Clinical Education

Clinical Experience

A significant and important by-product of the educational experience is the quality health care provided to patients at all affiliated clinical sites. Each Athletic Training Student (ATS) will learn athletic training concepts in the classroom and practice skills in the laboratory setting and clinical experiences. As the ATS progresses through the program and develops more skills, he or she will be encouraged to apply their knowledge by assisting with the health care of patients under the direct supervision of a Preceptor. Eventually, as the ATS progresses and learns to integrate cognitive knowledge and psychomotor clinical skills, he/she will develop the ability to make clinical decisions with the supervision of a Preceptor.

ATs will be expected to make a commitment to their clinical education and assume a great deal of responsibility as they progress and learn. Their main function will be to gain clinical proficiency by assisting in the prevention, evaluation, treatment, and rehabilitation of athletic injuries under the direct supervision of a Preceptor.

Clinical Education Requirements

The Waynesburg University MSAT Program clinical proficiencies were taken from the 5th edition Athletic Training Educational Competencies Manual. Each Athletic Training Student is required to show on-going learning during the two years of the MSAT program in the areas that fall under the 8 content areas of athletic training.

Athletic Training Content Areas

1. Evidence-Based Practice
2. Prevention & Health Promotion
3. Clinical Examination and Diagnosis
4. Acute Care of Injury and Illness
5. Therapeutic Interventions
6. Psychosocial Strategies and Referral
7. Health Care Administration
8. Professional Development and Responsibility

The clinical proficiencies will be completed during didactic courses and clinical experience courses throughout the entire program. Clinical experiences are obtained in a variety of settings, including Waynesburg University's Athletic Training Clinic and other off-campus affiliated sites.

Athletic Training Education Clinical Education Plan

Clinical education experiences are assigned based on the Athletic Training Student progression through three specific phases: Beginner (1st year, Fall Semester), Pre-professional student (1st year, Spring Semester), and Professional student (2nd year, Fall and Spring Semesters). Beginner students will be assigned clinical hours by the CEC to allow the students the opportunity to gain a diverse understanding of the profession. The beginner level students will be required to adhere to the CEC's plan of progression in order to efficiently and effectively utilize skills learned in the didactic courses. The Pre-professional level students continue to build from the beginner level phase. However, the pre-professional level students will now have more knowledge and skill development to provide added hands-on experiences. The professional level students are assigned to clinical immersion education experiences that align with specific criteria set forth by the CAATE as well as the student's interest. The ATS will have the opportunity to request clinical experiences, however, discretion will be used by the CEC to keep the ATS on track to graduate.

Documentation

Students are required to become a member of ATrack at the start of the MSAT program. This will enable the ATS to document his/her clinical hours, on ATrack, for the purpose of tracking the amount of time spent during their educational experiences and completing clinical proficiencies. The ATS will document only supervised (by Preceptor) clinical education hours. The CEC has developed a strategy to monitor clinical hours throughout each semester to ensure ATSs are correctly progressing through the clinical required experiences. If the ATS has difficulty completing course work or studying for classes, the ATS should discuss this with the Preceptor and modify a clinical experience schedule as necessary. Communication with the Preceptor during any clinical experience is necessary to allow for a beneficial educational experience for the ATS.

Clinical Education Experience Policy

During the first semester in the program, the CEC will develop a clinical progression plan for each ATS. ATSs will be assigned to specific Preceptors throughout their progression through the MSAT. The ATS will gain clinical education experiences alongside their Preceptor with the day-to-day management of patient medical care at the appropriate level of proficiency. These duties will include, but not limited to, game and practice preparation and clean up, injury management, rehabilitation, record keeping and patient care. The number of ATSs assigned to a Preceptor depends upon the Preceptor's clinical site, location for medical treatment, the number of patient interactions per week, and the likelihood of injury management and care with patients. The ratio of Preceptor to ATS will not exceed 1:8. In addition, the ATS will also be required to complete off-site practicum requirements with various health professionals (recognized by the American Medical Association). These requirements are specified in each practicum course and meet the General Medical clinical education experience required for each student.

General Clinical Roles and Responsibilities

Beginner Level ATS

The Beginner Level ATS will create a knowledge base through their didactic course work and practice skill developments in guided practical experiences both within the classroom and clinical experiences. These experiences will be guided by their Preceptors and faculty of the MSAT program. The ATS are encouraged to take advantage of every learning opportunity that arises during class and clinical experiences.

Beginner Level ATS experiences will involve instruction and evaluation of fundamental athletic training skills specific to the transition from a Beginner-Level ATS to a Pre-Professional Level ATS. These experiences will consist of a minimum of 2 to 3 days or approximately 5-20 hours a week at the ATS' clinical affiliated site. Each ATS is assigned to clinical experiences, by the CEC, which is relevant to the clinical practicum course the ATS is currently enrolled in. It is the responsibility of the ATS to communicate with their assigned Preceptor to develop a schedule that is conducive to the ATS' academic schedule and an effective learning experience.

Pre-Professional Level ATS

The Pre-Professional ATS will continue to add to their knowledge and skill base while gaining more responsibility to practice and/or assist with tasks that are closely supervised by a Preceptor. Pre-Professional Level ATSs will perform skills with guided critical thinking to enhance their understanding of evidence-based and patient-based practices.

Pre-Professional ATS experiences will involve less instruction but more evaluation of athletic training skills specific to the transition from a Pre-Professional Level ATS to a Professional Level ATS. These experiences will consist of a minimum of 3 to 4 days or approximately 10-20 hours a week at the ATS' clinical affiliated site. Each ATS is assigned to clinical experiences, by the CEC, which is relevant to the clinical practicum course the ATS is currently enrolled in. It is the responsibility of the ATS to communicate with their assigned Preceptor to develop a schedule that is conducive to the ATS' academic schedule and an effective learning experience. Should an ATS struggle with maintaining the high level of professionalism in the clinical setting and/or struggle with balancing clinical

experiences with didactic requirements, the ATS should discuss this with the Preceptor, CEC, and PD.

Professional Level ATS

Professional Level ATSs will engage in immersive clinical educational experiences focused on advanced skill application and integration under the direct supervision of a Preceptor. The focus of the immersive experience is to have the ATS experience the daily life of the Preceptor in their environment. During the immersive clinical experiences, the ATS will have the opportunity to demonstrate integrated knowledge, skills, and abilities specific to the didactic coursework previously completed. These clinical assignments are to prepare the student for clinical responsibilities and decision making skills that will be used with guided autonomy as often as possible.

Professional Level ATS experiences will consist of a minimum of 4 to 5 days or approximately 14-28 hours a week at the ATS' clinical affiliated site. Each ATS is assigned to clinical experiences, by the CEC, to a Preceptor affiliated with Waynesburg University Athletic Training Program based on student's career goals and the type of clinical exposure the Preceptor provides. It is the responsibility of the ATS to communicate with their assigned Preceptor to develop a schedule that is conducive to the ATS' academic schedule and an effective learning experience. Should an ATS struggle with maintaining the high level of professionalism in the clinical setting and/or struggle with balancing clinical experiences with didactic requirements, the ATS should discuss this with the Preceptor, CEC, and PD.

Responsibilities Listed by Year

Beginner Level ATS – 1st year Fall Semester

- Observes roles and responsibilities in the Athletic Training Clinic and during clinical assignments
- Responsible for field set-up and break down with certified athletic training staff
- Assists 2nd year ATS and PRECEPTOR with preventative stretching, taping, and wrapping
- Assists 2nd year ATS and PRECEPTORS with practices and game coverage
- Files charts in cabinet
- Stocks taping drawers and counter top
- Reports to PRECEPTOR and 2nd year ATS
- Maintains overall cleanliness of Athletic Training Clinic
- Completes clinical proficiencies in ATP 531 clinical practicum courses

Pre-Professional Level ATS – 1st year Spring Semester

- Maintains and restocks medical kit with PRECEPTOR
- Responsible for field set-up and break down with certified athletic training staff
- Responsible for packing supplies for away trips with 2nd year ATS and PRECEPTOR
- Assists PRECEPTOR with medical records management
- Assists PRECEPTOR with the evaluation, treatment planning, and rehabilitation program set up for injured patients.
- Works with 2nd year ATS and PRECEPTOR to provide treatment and rehabilitation
- Reports to 2nd year ATS and PRECEPTOR

- Maintains overall cleanliness of Athletic Training Clinic
- Completes clinical proficiencies in ATP 532 clinical practicum courses

Professional Level ATS – 2nd year Fall and Spring:

- Facilitates emergency plan for assignment with PRECEPTOR
- Assists PRECEPTOR with medical records management
- Assists PRECEPTOR with Coach's Report
- Attends coaches meetings with PRECEPTOR
- Assists PRECEPTOR with the evaluation, treatment planning, and rehabilitation program set up for injured patients.
- Oversees practice and game preparation with PRECEPTOR
- Supervises and mentors 1st year ATS
- Reports directly to PRECEPTOR
- Maintains overall cleanliness of Athletic Training Clinic
- Completes CIPs in ATP 533 clinical practicum course

Clinical Education Experience Settings

During their clinical education, each ATS will be assigned to a Preceptor who will guide the educational process for the student to meet the demands needed to graduate from Waynesburg University's MSAT Program. The clinical experience settings listed below provide exposure to the many roles and responsibilities of certified athletic trainers and other health care providers who work in various environments. The CEC will ensure all ATS will engage in each criterion prior to graduation. Each ATS will have the opportunity to develop specific skills in any of the following settings:

The CAATE requires ATSs to experience certain criteria before graduation can be obtained.

- Protective Equipment (football, men's lacrosse or ice hockey)
- Male Population
- Female Population
- Individual Sport
- Team Sport
- Clinical Non-athletic Population
- General Medical Population

Waynesburg University's MSAT program also requires ATSs to experience certain criteria before graduation can be obtained.

- Off Campus
- Clinical Athletic Population
- Inter-professional Clinical Experience

Examples of clinical education experiences MSAT students would experience:

- | | |
|---|--|
| <ul style="list-style-type: none"> • University | |
| University Football | <ul style="list-style-type: none"> • University Soccer |
| <ul style="list-style-type: none"> • University Men's Lacrosse | <ul style="list-style-type: none"> • University Wrestling |
| <ul style="list-style-type: none"> • University Women's Lacrosse | <ul style="list-style-type: none"> • High School Football |

- High School Spring Sports
- University Basketball
- University Baseball
- University Softball
- University Volleyball
- University Track & Field
- Hospital (Clinical, Emergency, Non-Emergency)
- Physician Offices
- Physical Therapy/Post-Surgical Rehabilitation
- Strength & Conditioning – University or affiliated strength coach/exercise physiologist

Policy for Preceptor Approval

For an individual to be approved as a Preceptor with the MSAT program, the individual must show proof they are a qualified healthcare provider (example: MD, PT, ATC) with active status of their credentials (Certification and/or Licensure). The healthcare provider is also required to be available to attend all mandatory Preceptor training sessions. If the individual meets the above criteria, then he or she will qualify to provide direct supervision to the ATS in the MSAT program.

Policy for Preceptor Dismissal

For an individual to be dismissed as a Preceptor affiliated with the MSAT program, the CEC will take a three step approach. If the Preceptor does not remediate their behavior or issue following the three step approach, then the Preceptor will be removed immediately as a Preceptor for the program and the ATS will be re-assigned accordingly.

The three step approach includes:

Step 1: A one on one meeting with the preceptor and CEC will occur on the first available day following the confirmed report of an incidence/issue/complaint.

Step 2: Following a confirmed second reported incidence/issue/complaint, the CEC will conduct a meeting with the Preceptor, PD, and Preceptor's immediate supervisor to discuss the report and remediation plan will be implemented including an online preceptor training in-service.

Step 3: Following a confirmed third reported incidence/issue/complaint, the CEC will conduct a meeting with the Preceptor, PD, and Preceptor's immediate supervisor to discuss the report and to terminate affiliation with the Preceptor.

**Disclaimer: At any time a Preceptor has violated the Athletic Training Code of Conduct, including but not limited to sexual harassment, inappropriate touching, or bullying, the ATS will be immediately removed from the clinical site and the Preceptor will be immediately dismissed from having affiliation with the MSAT Program.*

Policy for Clinical Placement Facilities Approval

For a clinical facility to be used by the MSAT program, the clinical site will be evaluated to determine the ability of the site to be a valued educational opportunity for our ATSs. To be considered a valued educational opportunity for our ATSs, the following criterion needs to be met:

- Have access to patients.
- Have access to adequate equipment to ensure appropriate patient/client care conducive to the facility.
- Have access to a designated space that is appropriate for providing healthcare services.

Once the site is considered a valued educational opportunity for our ATSs, the clinical site must sign an Affiliation Agreement with Waynesburg University's MSAT program. The clinical site must maintain and produce evidence of the following criteria:

- Affiliation agreement between WU MSAT program and Clinical Site

- Accurate record keeping documents
- Certification and safety checks of appropriate modalities and equipment
- Emergency Action Plan posted in a visible location
- Bloodborne Pathogens Document
- Standard Operating Procedures
- Appropriate state and national credentials and licensures
- Maintenance of a clean and orderly patient care facility

MSAT Clinical Plan

The CEC will assign each ATS to a clinical assignment that will increase exposure where he/she can use the skills he/she has learned in his/her courses to show clinical proficiency in the skills. If clinical proficiencies are not demonstrated during the ATS's clinical education experience, the clinical proficiency will be assessed within the clinical practicum course the ATS is enrolled in at that time. ATSs are encouraged to have clinical proficiencies assessed during 'real life' clinical experiences. Practical examinations and assignments will be given during clinical practicum courses to assist in evaluating clinical proficiencies as needed.

ATS Expectations during Clinical Education Experience

ATSs are expected to:

- Maintain a positive attitude and self-image
- Maintain a neat and well-groomed appearance by wearing athletic training appropriate clothing
- Be punctual and dependable during didactic and clinical experiences.
- Be able to accept constructive criticism from others (i.e., AT Staff, coaches, and Preceptors)
- Use common sense and be level headed
- Be honest and loyal to the program and others
- Be enthusiastic and eager to learn
- Think critically to solve problems
- Act in accordance with the standards established in this handbook and the MSAT Program, as well as standards of professional practice (*Appendix I*) and the NATA Code of Ethics (*Appendix A*).

Hours Policy

Hours will be tracked via ATrack to ensure ATS are committed to their clinical experiences. Each ATS will record their daily hours at the clinical site and submit them for verification from the Preceptor. Each Preceptor will be responsible for verifying, modifying, or deleting hours logged in ATrack. The CEC will coordinate with Preceptors to ensure verification is being performed. The ATS will have three (3) days MAXIMUM to enter hours (3 days at a time). Failure to log hours within the three (3) day window will result in forfeiture of the hours.

ATSs are expected to communicate with their preceptors regarding their attendance/absence and any conflicts that arise during the semester. It is the primary responsibility of the ATS to plan and communicate with their preceptors to ensure that they meet AT LEAST the minimum total number of hours required per semester. ATSs are expected to log a minimum total hours per semester according to their rank in the program:

Rank	Total Hours
1 st year (Fall)	100 hours total
1 st year (Spring)	150 hours total
2 nd year (Fall)	250 hours total
2 nd year (Spring)	250 hours total

With 15 total weeks in the semester the average RECOMMENDED weekly hours needed to stay on track per semester to meet the total is:

Rank	Total Hours
1 st year (Fall)	6.6 hours/week
1 st year (Spring)	10 hours/week
2 nd year (Fall)	16.6 hours/week
2 nd year (Spring)	16.6 hours/week

**There is opportunity for hours obtained during Fall preseason and semester breaks if the ATS chooses*

Although there is a minimum number of hours required, students are encouraged to communicate with their Preceptors to pursue as many hours as possible to gain a quality educational experience at their clinical rotation, up to 1200 total clinical hours. ATSs are expected to obtain between 750 to 1200 clinical experience hours before graduating.

Documentation of Clinical Proficiency and Learning Over-Time

The MSAT program values the progression of skill development and will engage with the ATS various times throughout the curriculum. The assessment of the clinical proficiencies will be measured at multiple times throughout various courses with varying level of complexity to help the student develop confidence and mastery of the skill. In order for an ATS to perform “Real-life” experiences and be assessed clinically, the ATS will be taught and given practice time within course laboratories.

Clinical Integrated Proficiencies

The Clinical Integration Proficiencies (CIP) represent the synthesis and integration of knowledge, skills, and clinical decision-making into actual client/patient care. In most cases, assessment of the CIPs should occur when the student is engaged in real client/patient care and may be necessarily assessed over multiple interactions with the same client/patient. In a few instances, assessment may require simulated scenarios, as certain circumstances may occur rarely but are nevertheless important to the well-prepared practitioner. ATSs will complete their CIP assessments throughout their clinical experiences and clinical courses. Completion of each CIP will be denoted via a document of completion that is placed in each student file.

Clinical Education Performance Evaluations

As part of the athletic training practicum courses, clinical education performance evaluations will be completed during the semester and included as part of the course grade for the respective clinical practicum course. Evaluations must be submitted in adherence to communicated deadlines in order for the ATS to receive full credit for this portion of the practicum grade. All evaluations will be used to demonstrate professional development of the

ATS (clinical proficiency and professional demeanor/skills) and the effectiveness of the Preceptors and affiliated sites.

All evaluations will be completed through ATrack. The evaluations are described as follows:

ATS Evaluation

Preceptors will complete an evaluation on each ATS for the clinical experience that is concurrent with the student's practicum level. Athletic training students are evaluated two times per semester (Fall: end of October, and end of the semester; Spring: end of March, and end of the semester). These specific dates will be included in the athletic training practicum syllabus. This assessment will give the ATS constructive feedback for improvement in professional preparation. The Preceptor will rate the ATS on athletic training skills, clinical proficiency, clinical dispositions, foundational behaviors for professional practice, and overall performance during the supervised clinical experience. A one-on-one meeting between the Preceptor and the ATS will be scheduled near the due dates of each evaluation to discuss the student's performance and goals. However, it is encouraged for the Preceptor and ATS to have continued communication regarding the student's performance during the entire clinical experience.

ATS Self-Evaluation

Each ATS will complete a self-evaluation, using the same evaluation form as the ATS evaluation three times per semester (Fall: end of September, end of October, and end of the semester; Spring: end of February, end of March, and end of the semester). The overall goal of this evaluation is to develop reflective practice and to facilitate discussion between the ATS and Preceptor on the performance of the ATS. To ensure this goal is met, the ATS will schedule a meeting with their Preceptor and bring a copy of this evaluation for the ATS and Preceptor to review together.

Clinical Site and Preceptor Evaluation

Clinical site and Preceptor evaluations are to be completed by the student at the end of each clinical experience. This evaluation tool allows the ATS to evaluate the clinical experience site and the Preceptor by whom they were supervised. ATSs will also track their total number of patient contacts per semester to ensure they are receiving quality patient-oriented education.

First Responder Policy

No ATS is to assume the role of a Certified Athletic Trainer. No student will travel with an athletic team as an ATS without a Preceptor affiliated with the Waynesburg University MSAT program being present at the event to supervise the ATS. This includes giving advice to athletes while not supervised (i.e.: in a residence hall, dining hall or other area). The ATS should refer all patients with questions or concerns about potential injuries to the Preceptor who is directing their care. The ATS is only able to render care under the direct supervision of the Preceptor. The ATS is allowed to render first aid and CPR as any first responder should as long as they maintain their Professional Rescuer and First Aid certification through the American Red Cross or American Heart Association.

Commitment to Clinical Education

Athletic Training can be very rewarding, but it often requires the sacrifice of personal time. ATSs will be required to spend many hours per week and per semester participating in their clinical assignment, working with their Preceptors to develop their clinical skills. This may sometimes include weekends and holidays. Although ATS involvement in the clinical education may seem like a work experience, its main purpose is to expose ATS to the athletic training profession in the “real-life” setting and provide an optimal educational experience. As practice does make perfect, each ATS should think of the time at their clinical assignment as additional opportunities to practice skills and techniques. The following examples are instances when an ATS will be able to demonstrate his/her commitment and dedication to the MSAT program and his/her education: The following experiences are voluntary but are highly encouraged for professional preparation.

1. Preceptors covering fall sports will ask each ATS to return for pre-season camp in August to assist with medical coverage. ATSs will be notified between May and July when they are to return for pre-season camp.
2. Each ATS assigned to Preceptors with fall sports are encouraged to be present for practices and games during Fall break.
3. Each ATS assigned to Preceptors with winter sports are encouraged to be present for practices and games during Winter break.
4. Each ATS assigned to Preceptors with spring sports are encouraged to be present for practices and games during Spring break.
5. Any ATS may be asked to interact with prospective students when they are visiting campus. The ATS can share their educational experience with the visiting student and be an advocate to our program and the profession.

Absence from Clinical Education Experience

It is very important and essential for ATS to be at all classes, meetings, in-services, and clinical experiences. The success of each ATS’s education depends on the ATS fulfilling his/her clinical responsibilities.

An ATS who is unable to attend classes, meetings, in-services, or clinical experiences must notify their Preceptors as soon as possible. Valid reasons for absence from the clinical experience may include but are not limited to:

- Illness
- Class commitment
- Death of a family member.

Each ATS should be aware that excuses for non-athletic training commitments are not permissible and are unacceptable. Requests for excusal may be submitted to the Preceptor at least 1 week in advance of the anticipated absence. It is up to the Preceptor to determine if the request should be granted. Any uncertainty regarding the request should be directed to the CEC and/or the PD. A request does not guarantee the ATS will be excused. Disciplinary action will be taken when the ATS continually miss clinical assignments without regard for this policy.

Professionalism

The Athletic Training Clinic is a medical facility. One of the attractions to working in the traditional athletic training environment is the relaxed and casual atmosphere. In this atmosphere, it is very important to be acutely aware of what is being said and who might be listening. A patient’s medical file is **personal and confidential**, and the information contained

in it cannot be given out without the express written consent of the patient. To do so is a violation of the Health Insurance Portability and Accountability Act (HIPAA). Maintaining confidentiality of medical records is one aspect of professionalism. Additional characteristics of professional conduct are listed below:

1. Assist the Preceptor with the daily functions of the Athletic Training Clinic.
2. Assist the Preceptor in maintaining accurate treatment logs and other medical records.
3. Assist the Preceptor in maintaining confidentiality.
4. Complete assigned tasks in an appropriate and timely manner pertinent to your practicum level.
5. Respect the right of confidentiality of the patients and their medical conditions.
6. Use the proper channels to answer questions and for procedural advice.
(Communicate with your Preceptor).
7. Practice universal precautions and maintain excellent sanitary conditions in all procedures.
8. Consult your Preceptor prior to administering any treatments on patients.
9. Never leave a patient unattended during a treatment.
10. Be aware of your practicum level and your limitations.
11. Grant special privileges to **no one**. All team members are equals.
12. There is no excuse for tardiness or absenteeism.
13. Have a working knowledge of the appropriate Emergency Action Plan.
14. Perform your responsibilities in a mature and professional manner.
15. Treat the Athletic Training Clinic and equipment with respect and care.
16. Apply appropriate tapings, wrappings, and bandages as instructed.
17. Complete Injury Report Evaluations for all new injuries and log treatments as rendered.
18. Follow rehabilitation protocols on the patients chart as instructed.
19. Write and sign SOAP notes on the patients' charts as instructed.
20. Communicate with Preceptor regarding new injuries.
21. Be prepared to assist with the care of an injured patient who is brought in for first aid.
22. When answering the phone during on-campus clinical rotations, use the phrase, "Waynesburg University Athletic Clinic. This is (say your name). How may I help you?"
23. Take accurate phone messages that indicate who called, the time and date of the call.
24. Always remember that you are representing Waynesburg University MSAT program.
25. When you have free time in the Athletic Training Clinic, use it to discuss relevant topics in sports medicine, or practice athletic training skills.
26. Maintain and stock tables, drawers and counters with the proper items whenever necessary.
27. See things that need to be done and do them without being asked.
28. Inappropriate conduct or the use of alcohol and or drugs while serving in the capacity of ATS is not acceptable. Any ATS who inappropriately uses alcohol or drugs will be disciplined and may be dismissed immediately from the MSAT program.

29. Flirting or misconduct during clinical assignments will not be tolerated. Being an ATS is not a dating service. This behavior will lead to disciplinary actions. It is inappropriate to flirt, date or fraternize with your Preceptors, patients, or instructors.

Social Media Policy

Social media is continually growing and can be used to assist the ATS in professional development. However, improper or unwise use of social media can have deleterious personal and professional effects. It is wise to follow common sense and Waynesburg University Computer/technology use policies.

The following are guidelines for appropriate behavior regarding social media should be followed:

- Do not send or accept vulgar, hateful, offensive or disparaging videos, pictures or words.
- Do not post pictures/videos of yourself or other ATS doing something that is against the policies of Waynesburg University or the MSAT program.
- Do not post pictures of one's self or other ATS dressed in WU Athletic Training clothing doing something that is not associated with WU Athletic Training.
- Do not use social media to "stalk". Online stalking can be documented very easily, and that documentation is admissible in a court of law. Stalking is a criminal act.
- Do not use social media during clinical hours.
- Be aware that 70% of future employers reported that they **WILL** check social media posts **BEFORE** they call for an interview; it is best to keep posts "vanilla".
- Keep in mind the Golden Rule of Social Media: "Would I want my grandmother to see this post?" Or "Do I want my Program Director or Preceptor to see this post?"
- Think before posting to social media. (*See Golden Rule of Social Media above*).
- Verify (at least monthly) that individual privacy settings have not changed.

Electronic Device Use

Having access to a workable phone or other electronic device is important for emergencies in the clinical setting. Cell phones with enough power and tower accessibility assist in early response and better outcomes for people who are suffering a life-threatening emergency. Cellular telephone should be used **FOR EMERGENCIES ONLY**.

Certainly there are times when others need to have access to the ATS and vice versa; communicate these times and situations with the Preceptor at the start of clinical experience for the day. Using smart phones to access *Twitter, Facebook, Vine, Snap-Chat* or other social media or to play games is strictly prohibited in all settings.

The use of photography or video on electronic devices is prohibited unless written consent is obtained by the patient. Any video or photo taken must be used for educational or research purposes and cannot include any defining characteristics (name, face, etc.).

**Violations of this policy will result in an activation of the disciplinary actions.*

Dress Code

The way in which ATSs present themselves to patients and the public is very important. People often perceive and judge one's abilities by his/her general appearance. Presenting one's self in a professional manner by dressing neatly and professionally will go a long way toward

gaining the respect and trust of those around. ATSs are encouraged to gear their clinical wardrobe around the following acceptable colors for shirts and pants or shorts: orange, white, black, or khaki. Remember, each ATS will be representing him or herself, the Athletic Training Program, the Athletic Training faculty and staff, and Waynesburg University.

**Failure to adhere to the following dress code guidelines will result in the ATS being asked to leave the Athletic Training Clinic. Continued failure to adhere to the policy will lead to disciplinary actions.*

Athletic Training Clinic:

1. Waynesburg University Athletic Training polo or t-shirt neatly tucked in and without the sleeves rolled up.
2. Appropriately colored pants or shorts with pockets; khaki preferred.
3. Dress shirt, blouse, or sweaters are appropriate.
4. Casual dress shoes or tennis shoes; no open toed or high heeled shoes are allowed.
5. Program issued Name Tag

Indoor Sports

1. *Practice:*
 - a. Waynesburg University Athletic Training polo or tee shirt neatly tucked in and without the sleeves rolled up.
 - b. Appropriately colored pants or shorts with pockets; khaki preferred.
 - c. Casual dress shoes or tennis shoes; no open toed or high heeled shoes are allowed.
2. *Games (at the discretion of the Preceptor):*
 - a. Business professional attire
 - b. Waynesburg University Athletic Training polo and khaki pants.
 - c. Casual dress shoes; no open toed or high heeled shoes are allowed.

Outdoor Sports (Inclement weather – dress appropriately)

1. *Practice:*
 - a. Appropriately colored pants or shorts with pockets (wind pants or sweats are acceptable during practice only, not in athletic training clinic).
 - b. Waynesburg University Athletic Training polo or tee shirt neatly tucked in and without the sleeves rolled up, or sweatshirt.
 - c. Hats are only appropriate outdoors. All hats must be a Waynesburg University hat or a hat that is a neutral color with a neutral logo (Nike, Reebok, Adidas, etc.). No other school logo is appropriate.
2. *Competition:*
 - a. Waynesburg University Athletic Training polo neatly tucked in.
 - b. Khaki pants or shorts with pockets.
 - c. Hats are only appropriate outdoors. All hats must be a Waynesburg University hat or a hat that is a neutral color with a neutral logo (Nike, Reebok, Adidas, etc.). No other school logo is appropriate.

Off-Site Inter-professional Visits

- a. Waynesburg University Athletic Training polo neatly tucked in
- b. Khaki pants or shorts with pockets.

- c. Business professional attire (setting dependent).
- d. Casual dress shoes; no open toed or high heeled shoes are allowed.

High School Affiliated Sites

- a. Minimum dress code is the same as other off-site visits.
- b. Preceptor will review the policy for that specific site with the ATS.

The following attire is **not** acceptable in the Athletic Training Clinic, or while functioning as an ATS representing the MSAT program:

1. Cut-off shorts; pants with anything written across the seat; exceptionally baggy shorts or pants.
2. Tank tops
3. Any shirt that is open in the back.
4. Jeans of any kind or color.
5. Skirts or dresses that do not allow performance of the clinical skills required.
6. Sandals or any open toes shoes; heels or other non-functional shoes.
7. Ragged or inappropriate t-shirts; no t-shirts with inappropriate logos of any kind.
8. Bandanas.
9. Hats worn backward or crooked.
10. Underwear exposed.
11. Excessive/inappropriate cleavage.

Relationships with Others

Preceptors

Each ATS will be supervised by and responsible to his/her Preceptor at all times while in the clinical setting. He/she is encouraged to discuss educational and clinical issues with the Preceptor whenever an appropriate time presents itself. If a personal issue arises, the ATS has the option to discuss the situation with the Preceptor. The Preceptor has the option to stop the discussion and refer the ATS to a more appropriate individual at any time. If conflicts develop, attempt to resolve them immediately by openly discussing the problem with the Preceptor. If conflicts cannot be resolved in this manner, please inform and meet with the CEC as soon as possible.

Team Physician/Allied Health Care Professionals

Each ATS will have the opportunity to meet and observe the Team Physician and his designees (Fellows, Physician Assistants, and Registered Nurses). The ATS will learn a great deal by observing and listening to these health care professionals as they evaluate patients afflicted with various injuries and conditions. The ATS are also encouraged to ask questions at the appropriate times.

Coaches

Possessing the ability to “work and play well with others” is crucial part of being a team member. Certified Athletic Trainers and coaches have the common goal of preparing the best team on the field in order to provide the best opportunity to win. Frustrating situations occur, but can be minimized by effective communication and constant follow-up. Although Preceptors are ultimately responsible for teams and communication with coaches, the ATS may sometimes be called upon to communicate with coaches concerning injuries to their

patients. It is important to be thorough, concise, professional, and honest in all communications. Information should not be volunteered about an injured patient's condition without explicit instructions from the Preceptor. If a coach asks about a particular patient's condition and the Preceptor has not asked the ATS to speak with the coach, please refer the coach to the Preceptor for an answer.

Patients

All patients should be treated with integrity, respect, and courtesy. The same should be expected from them. Strive to combine friendliness and concern with professionalism. Confidence and respect will be gained by exhibiting a basic knowledge of the injury and/or condition and proficiency in athletic training skills necessary to evaluate and treat said injury/condition. In time, the ATS will learn the attitudes, temperaments, and peculiarities of individual patients, and to use this insight to foster a trusting and professional relationship with them. The ATS should require patients to adhere to all of the rules and regulations pertaining to them while in the Athletic Training Clinic. General Rules to adhere to when working with patients are:

1. Grant special privileges to no one. All team members are to be treated equally.
2. Do not allow patients to dictate what they want done or how to do it. ATS should work directly with their Preceptor, Team Physician, and the patients when decisions are made regarding the care of an illness or injury.
3. The Team Physician and Preceptor are responsible for estimating when a patient will return to participation following an illness or injury. The ATS should never provide the patient, or anyone else, information or opinions that may conflict with that given by the Team Physician and/or Preceptor.
4. Refrain from doing things for patients that are against policy.
5. A patient may confide in the ATS, rather than seeking the advice of a Preceptor or the Team Physician. The ATS should make patients aware that he/she is obligated to discuss injuries and illness with the Preceptor when a patient's health and well-being are concerned, and they should encourage the patient to do the same. Information should never be withheld from the Preceptor, especially when a patient's health and well-being may be jeopardized by continued athletic participation.
6. The Athletic Training Faculty strongly discourages personal relationships between ATSs and patients or other ATS. If any observation of such relationships interferes with objectivity and professionalism, the ATS will be removed from the clinical assignment and potentially be subject to disciplinary action.

Participation in Intercollegiate Athletics

The rigors of athletic participation at the intercollegiate level necessitate a high amount of time be committed to physical conditioning, practices and competitions. Should a student have eligibility remaining, permission may be granted by the PD and CEC during the first year within the MSAT program. However, due to the demands of the MSAT program during the second year of the program, no athletic participation will be granted.

Both academic preparation and athletic participation require immense time commitments. Those students wishing to attempt to participate on a Varsity intercollegiate athletic team will need to demonstrate superior communication skills, time management skills, and professionalism. Continued progression in the MSAT program as a student-athlete will be determined on an individual basis.

An ATS may participate in intercollegiate athletics, provided **ALL** of the following criteria are continually met:

1. The ATS may only participate in **one** sport season during the 1st year of the MSAT program. During the off-season, training must take place during the ATS personal time and ATP responsibilities will take priority.
2. An ATS who participates in intercollegiate sports at Waynesburg University is responsible to schedule a meeting with the assigned Preceptor at the beginning of the semester to determine a schedule that includes enough time per week to meet the total hour requirement. This schedule needs to be signed by the Preceptor, ATS, and Coach then presented to the CEC for final approval. This will allow the student to have clinical experiences to assist with assignments and learning opportunities during that sport season. An ATS completing **ONLY** the minimum commitment to clinical education may struggle to full develop as an ATS. It is **HIGHLY ENCOURAGED** that the ATS engage in **MORE** than the minimum.
3. All clinical education requirements (observation and/or practicum assignments and proficiency requirements) must be completed even if the student is participating as an intercollegiate athlete.
4. Each ATS must complete one experience with football, men's lacrosse, or ice hockey during their 1st year of supervised clinical education.(CAATE requirement).
5. If the ATS does not maintain the minimum standards to remain in the MSAT program, or is placed on probation for any reason, the student will be encouraged to reconsider his/her participation in sports.
6. For the purpose of a season, the following definitions will be used:
 - a. Fall: August through October, possibly into early November
 - b. Winter: Mid-October through February
 - c. Spring: March through May

Employment

Maintaining an outside job while pursuing a Master's degree in athletic training may be very difficult. It should be noted that the Athletic Training Faculty strongly discourages outside employment during the professional preparation. Each ATS is asked to maintain a minimum GPA, complete clinical experiences on and off campus, and be responsible for earning a minimum grade of C or better in all required courses. This rigorous schedule will not leave much free time. If the ATS feels a job is necessary, the Athletic Training Faculty cannot prohibit the ATS from working. However, if employment interferes with the professional preparation and clinical experiences, a meeting will be scheduled with the Program Director to discuss other options.

Time Management

Each ATS must learn early to manage his/her time during clinical experiences. Most faculty members will assign their course requirements in the beginning of each semester. Do not wait to get started on assignments. The ATSs should work on projects and study at regular intervals throughout the semester to ensure that he/she does not fall behind. Early planning and an organized lifestyle will ensure the best possible educational experience at Waynesburg University.

As previously stated, there will be times when the roles and responsibilities of the ATS seem tedious. There will also be times when even the best efforts go unnoticed and deserved

credit or a pat on the back for a job well done is not given. Most of the time, satisfaction will have to come from within. An ATS's ability to take and use constructive criticism will serve him/her well in healthcare or any professional setting. It is important to remember that the Athletic Training Faculty/Preceptor's main goal is to provide each ATS with the best possible learning experience.

Legal Liability

Every ATS should be aware that lawsuits are increasingly common in the athletic training setting. To minimize the chances of becoming involved in a lawsuit, each ATS must be supervised whenever dealing with a patient. Also, an ATS should never openly criticize any Preceptor, particularly in front of patients, coaches, or parents. Most importantly, an ATS must know his/her own professional limitations and practice within those limitations. It is far better to say "I don't know, but I can find out", rather than to try to do something the ATS has not yet been trained to do. The simplest ways to avoid litigation is to be knowledgeable, use common sense, makes sure the Preceptor is always present, and ask for assistance whenever necessary.

Waynesburg University holds a Professional Liability Occurrence Insurance Policy for each ATS. The ATS's are charged an additional fee for this insurance policy that is billed with tuition. It is also recommended that ATSs purchase personal liability insurance as an additional blanket policy if they so choose.

Clinical Disciplinary Action

Clinical Progression

ATSs will be required to complete 4 semesters of clinical experience. Students must complete the required Clinical experiences, and proficiencies each semester. CIPs will be completed at the completion of the ATS' 3rd semester. Failure to complete any clinical experiences, CIP's, and/or proficiencies will result in failing of the clinical course and the ATS placed on probation. Any ATS on probation will be required to retake the same clinical course the next semester. Failure to complete the requirements for a second time will result in dismissal from the program. Should any ATS fail to complete requirements during their immersive experience will automatically be dismissed from the program.

Probation Suspension and Dismissal

ATSs may be placed on probation, suspended, or dismissed from the MSAT program if they fail to maintain satisfactory progress in the program or disrupt their clinical site experience. Satisfactory progress and the resulting consequences of failing to maintain satisfactory progress are as follows:

Situation/Scenario	Consequence/Action
A student fails to record adequate hours within an academic semester as assigned by the CEC	The student is placed on probation for one academic semester. This may or may not affect academic progression within the program (Depends on level of offense)

A student violates the code of ethics, creates an unprofessional setting/environment, or violates a WU policy	The student may be placed on probation or dismissed from the program. Each case will be reviewed by the MSAT program Faculty.
A student receives a grade below a “C” in a clinical practicum course.	The student is placed on probation and must retake the clinical course the following year.
A student who is on probation fails to improve his/her performance during the designated time frame.	The student will be dismissed from the program.

Probation

Probation is imparted on ATs who fail to meet appropriate clinical or professional standards of the MSAT program. The probationary period serves as a monitoring and remediation period for the ATs as well as a warning to ATs that they must improve their performance to remain in the program. The MSAT program will follow a 1 strike and done policy for each probationary category (Hours and Behaviors). The following helps define probation:

1. **First Offense related to hours:** *The student...*
 - i. Is restricted from any travel with teams.
 - ii. Must meet with their Preceptor and CEC to discuss lack of hours
 - iii. May be restricted from game day participation.
 - iv. May be required to participate in a weekly one on one session with the CEC to help identify and correct behavior or situation
 - v. May be required to repeat a semester/year prior to progressing further in the MSAT program (due to course offerings and reason for being on probation).
 - vi. Will be required to improve deficient areas. A remediation contract will be established by the MSAT Faculty. Contracts will be constructed according to the individual student's needs.
2. **First offense related to behaviors:** *The Student...*
 - i. Is restricted from any travel with teams.
 - ii. Must meet with their Preceptor and CEC to discuss their behavior
 - iii. May be restricted from game day participation.
 - iv. May be required to participate in a weekly one on one session with the CEC to help identify and correct behavior or situation
 - v. May be removed from their clinical experience and/or given a new assignment.
 - vi. May be required to repeat a semester/year prior to progressing further in the MSAT program (due to course offerings and reason for being on probation).
 - vii. Will be required to improve deficient areas. A remediation contract will be established by the MSAT Faculty. Contracts will be constructed according to the individual student's needs.

3. **Additional Offenses for hours or behaviors:** *The student...*

- i. Will be dismissed from the MSAT program for failure to correct problem areas for a second consecutive semester.

Non-academic Misconduct

Any ATS that is disruptive during classroom or clinical education experiences is subject to disciplinary action. Disciplinary action will be discussed between the PD and CEC of the MSAT program. During this meeting, the PD and CEC will discuss the student's behavior and recommend an appropriate action. Disciplinary action may result in probation, suspension, or dismissal from the program. Each case will be independently reviewed.

Academic Misconduct

The MSAT program follows University-wide policies regarding academic misconduct. Each ATS should familiarize himself or herself with the Rules of Conduct in the University Handbook. Academic misconduct is any form of cheating, including using concealed notes during exams, copying or allowing others to copy from an exam, ATSs substituting for one another in exams, submission of another person's work for evaluation, preparing work for another person's submission, unauthorized collaboration on an assignment, submission of the same or substantially similar work for two courses without the permission of the professors.

Plagiarism is a form of academic misconduct that involves taking either direct quotes or slightly altered, paraphrased material from a source without proper citations and thereby failing to credit the original author. Plagiarism includes cutting and pasting sources from the Internet, as well as purchasing papers from other students or specialized websites.

Be forewarned; under no circumstances will academic misconduct be tolerated. Disciplinary action in such cases will be severe and swift, ranging from receiving a failing grade on an exam or paper to dismissal from the MSAT program and/or the University. The MSAT program faculty follows the Academic Integrity Policy set by Waynesburg University (*refer to the current University catalog for more information*).

Re-instatement Policy

A student will only be reinstated into the MSAT program once he or she has met or surpassed the requirements designated as deficient. Any student that feels he/she did not receive fair process may appeal following the Waynesburg University Student Grievance Policy (*refer to the current University catalog for more information*).

ATS Grievance Policy

If a student in the MSAT program has a grievance in a specific required course, policy, or procedure the student may follow the Waynesburg University Student Grievance Policy. The student may also meet with the graduate academic chairperson who will record information from the student and then convene with the Graduate and Professional Studies Grievance Committee including the academic chairperson, PD (or other appointed MSAT faculty member if PD is involved in grievance), and one faculty member not from the MSAT program (appointed by the chairperson) to review the grievance and recommend appropriate action. The student also has direct access to the Academic Dean or Provost to present the grievance (*refer to the current University catalog for more information*).

Appeals Policy

Students have the right to appeal their probation/suspension/dismissal from the MSAT program. Students will submit their appeal to the Graduate and Professional Studies Grievance Committee on appeals to be heard. A decision will be rendered from the committee and a letter will be sent to the student and PD of the MSAT program. (*refer to the current University catalog for more information*).

The Athletic Training Student Association (ATSA)

The ATSA is a student-run, University-funded club comprised of ATs, but open to any student on campus. For additional information on the ATs association membership, please ask any ATSA Officer.

Mission Statement

The Waynesburg University ATSA seeks to enrich ATs the opportunity to understand and promote the Athletic Training Profession. The ATSA provides opportunities for students to achieve balance between academic scholarship and the acquisition of skills necessary for careers in athletic training and health care. The association provides alignment with the Athletic Training Program to help engage in congruency with the ATP mission of developing entry-level professionals that will enable the ATs to pursue successful, productive, and compassionate lives of service.

Purpose Statement

The purpose of the ATSA is to build camaraderie among students with a common interest while placing continued concentration on student development by providing opportunity for various advancement activities such as fundraising, networking, and interdisciplinary collaboration.

Objectives and Goals

1. Invest in ATs development:
 - a. by providing opportunity to participate in yearly conferences (NATA, EATA, PATS, WU)
 - b. by creating fundraising opportunities to help accommodate related expenses.
 - c. by developing and encouraging volunteer opportunities to promote the profession amongst their peers and other healthcare professions.

Iota Tau Alpha (ITA)

Purpose Statement

The Purpose of Iota Tau Alpha Athletic Training Education Honor Society is the promotion and encouragement of scholarly activity in athletic training and the recognition of outstanding achievement among students enrolled in athletic training education programs. Iota Tau Alpha activities shall be designed to stimulate interest, scholarly attainment, and investigation in Athletic Training Education, and to promote the dissemination of information among students of Athletic Training Education.

Inclusion into the ITA society as a member requires specific achievements within MSAT program.

Regular members shall:

1. be students enrolled in Athletic Training Education at an institution where a chapter of Iota Tau Alpha is located,
2. have completed at least 3 semesters of academic work toward the athletic training degree,
3. have completed at least three term courses in Athletic Training Education (one must be above introductory level) with a minimum cumulative grade point average of 3.5,
4. rank no lower than the highest 35% of their class in cumulative grade point average,
5. be in good standing according to their program retention criteria.

**Only regular members may hold the constitutionally specified chapter offices, vote on chapter membership, and represent the chapter or vote at national conventions.*

APPENDICES

Appendix A: NATA Code of Ethics

Preamble

The National Athletic Trainers' Association Code of Ethics states the principles of ethical behavior that should be followed in the practice of athletic training. It is intended to establish and maintain high standards and professionalism for the athletic training profession. The principles do not cover every situation encountered by the practicing athletic trainer, but are representative of the spirit with which athletic trainers should make decisions. The principles are written generally; the circumstances of a situation will determine the interpretation and application of a given principle and of the Code as a whole. When a conflict exists between the Code and the law, the law prevails.

1. Members Shall Practice with Compassion, Respecting the Rights, Welfare, and Dignity of Others

1.1 Members shall render quality patient care regardless of the patient's race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity.

1.2. Member's duty to the patient is the first concern, and therefore members are obligated to place the welfare and long-term well-being of their patient above other groups and their own self-interest, to provide competent care in all decisions, and advocate for the best medical interest and safety of their patient at all times as delineated by professional statements and best practices.

1.3. Members shall preserve the confidentiality of privileged information and shall not release or otherwise publish in any form, including social media, such information to a third party not involved in the patient's care without a release unless required by law.

2. Members Shall Comply With the Laws and Regulations Governing the Practice of Athletic Training, National Athletic Trainers' Association (NATA) Membership Standards, and the NATA Code of Ethics

2.1. Members shall comply with applicable local, state, federal laws, and any state athletic training practice acts.

2.2. Members shall understand and uphold all NATA Standards and the Code of Ethics.

2.3. Members shall refrain from, and report illegal or unethical practices related to athletic training.

2.4. Members shall cooperate in ethics investigations by the NATA, state professional licensing/regulatory boards, or other professional agencies governing the athletic training profession. Failure to fully cooperate in an ethics investigation is an ethical violation.

2.5. Members must not file, or encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.

2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.

3. Members Shall Maintain and Promote High Standards in Their Provision of Services

3.1. Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity, or services.

3.2. Members shall provide only those services for which they are qualified through education or experience and which are allowed by the applicable state athletic training practice acts and other applicable regulations for athletic trainers.

3.3. Members shall provide services, make referrals, and seek compensation only for those services that are necessary and are in the best interest of the patient as delineated by professional statements and best practices.

3.4. Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge and shall complete such educational requirements necessary to continue to qualify as athletic trainers under the applicable state athletic training practice acts.

3.5. Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.

3.6. Members who are researchers or educators must maintain and promote ethical conduct in research and educational activities.

4. Members Shall Not Engage in Conduct That Could Be Construed as a Conflict of Interest, Reflects Negatively on the Athletic Training Profession, or Jeopardizes a Patient's Health and Well-Being.

4.1. Members should conduct themselves personally and professionally in a manner that does not compromise their professional responsibilities or the practice of athletic training.

4.2. All NATA members, whether current or past, shall not use the NATA logo in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.

4.3. Members shall not place financial gain above the patient's welfare and shall not participate in any arrangement that exploits the patient.

4.4. Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try and influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.

4.5. Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.

Appendix B: Curriculum Sequence

Freshman Fall		14(17)	Freshman Spring		16
ENG 101	English	3	PHY 105	Basic Physics	3
WBE 108	Fiat Lux	1	ENG 102	English	3
MAT 106(if needed)	Beginning Algebra	3	BIO 206	Human Anatomy	4
PSY 105	Intro to Psychology	3	CSC 105	Intro to Computers	3
HSC 105	Intro to Health Science	1	Fine Arts	General Education	3
BIO 121	Principles to Biology I	4			
BIO 105	Medical Terminology	2			
Sophomore Fall		17	Sophomore Spring		14
COM 228	Bus and Pro Speaking	3	BMS 105	Old or New Testament	3
BIO 207	Human Physiology	4	SOC 105	Principles of Sociology	3
CHEM 106	Chemistry	4	ESC 206	Personal & Com Health	2
ESC 205	Nutrition for Fitness & Sport	3	English Lit	Gen Education	3
ESC 207	Advanced Functional Anatomy	3	BIO 216	Kinesiology	3
Junior Fall		15	Junior Spring		14
SLR 105	Service Learning	1	PHL 216	Health Care Ethics	3
HSC 205	Sports Med Concepts	3	ESC 209	Strength and Conditioning	4
PSY 106/107	Soc/Human Dev Psych	3	MAT 215	Statistics	3
BIO 317	Physiology of Exercise	4	PSY 217	Sports Psychology	3
HIS _____	History	3	HSC 136	FA and CPR	1
LSK 105	Life Skills	1			
Apply to the MSAT during the Junior Year 90 credits (93 credits)					

Course ID	Fall Year 1	16	Course ID	Spring Year 1	16
ATP 511	Orthopedic Assessment LE	3	ATP 512	Orthopedic Assessment UE	3
ATP 511L	Orthopedic Assessment LE Lab	2	ATP 512L	Orthopedic Assessment UE Lab	2
ATP 521	Therapeutic Intervention I	3	ATP 522	Therapeutic Intervention II	3
ATP 521L	Therapeutic Intervention I Lab	2	ATP 522L	Therapeutic Intervention II Lab	2
ATP 531	Clinical Experience I	3	ATP 535	General Medical	3
ATP 507	Emergency Care of Athletic Injuries	3	ATP 532	Clinical Experience II	3
Fall Year 2		13	Spring Year 2		11
ATP 525	Current Topics In Athletic Training	2	ATP 599	Research Methods II	3
ATP 536	Nutrition and Pharmacology	3	ATP 545	Organization and Administration	3
ATP 598	Research Methods I	3	ATP 534	Clinical Experience IV	5
ATP 533	Clinical Experience III	5			

Appendix B: Clinical Proficiencies Student Manual

Waynesburg University
Athletic Training Clinical Proficiencies
Student Manual

Name of Athletic Training Student

Graduation Year

Dr. Joseph Shaffer
Program Director

Dr. Andy Palko
Clinical Education Coordinator

Clinical Preceptor for Immersion Experience

INTRODUCTION

Students will complete individual proficiencies throughout the WU MSAT program. The Clinical Integrated Proficiencies (CIP) are designed to incorporate the proficiency skills collectively to effectively manage patient care. The following 9 CIP were developed by CAATE and are utilized by the WU MSAT program to help identify if the students can critically, creatively, and practically think and apply their skills to provide effective patient care. The CIPs are meant to be performed on real patients. However, students may not have the opportunity to experience certain situations during their educational career. Therefore, the following scenarios were produced to all the students to complete the required CIPs for the MSAT program.

To complete, the student must demonstrate satisfactory or proficient level completion of each scenario for each CIP. If the student has the ability to perform a real-life CIP for any of the categories, the preceptor can use that to grade the overall student ability for the associated CIP. However, the preceptor must explain the real-life experience to ensure it qualifies for the category.

If the student does not have the opportunity to complete a real-life CIP, then the student is required to complete the scenario listed. This manual should be brought with the student to their comprehensive final practical exam at the end of the ATP 533 fall semester for final submission.

Prevention & Health Promotion

CIP-1. Administer testing procedures to obtain baseline data regarding a client's/patient's level of general health (including nutritional habits, physical activity status, and body composition). Use this data to design, implement, evaluate, and modify a program specific to the performance and health goals of the patient. This will include instructing the patient in the proper performance of the activities, recognizing the warning signs and symptoms of potential injuries and illnesses that may occur, and explaining the role of exercise in maintaining overall health and the prevention of diseases. Incorporate contemporary behavioral change theory when educating clients/patients and associated individuals to effect health-related change. Refer to other medical and health professionals when appropriate.

Prevention Assessment – Perform a physical examination to include a history, general medical, orthopedic, nutritional, and sleep assessment. From this assessment, discuss with the patient your findings and recommendations. Identify strategies to improve outcomes and provide a discussion about warning signs and possible referral, if needed.

Does the student perform an appropriate assessment of the patient?

Does the student identify criteria that could increase risk of injury or illness?

Does the student effectively discuss issues and concerns to the patient in a way to help create solutions and positive outcomes?

Does the student recommend effective strategies to correct abnormal findings of the patient?

Overall Impression of the student's ability/confidence with CIP 1 scenario?

Proficient

Satisfactory

Needs Improvement

Comments:

Preceptor Signature: _____ Date: _____

Student Signature: _____ Date: _____

PD/CEC Signature: _____ Date: _____

CIP-2. Select, apply, evaluate, and modify appropriate standard protective equipment, taping, wrapping, bracing, padding, and other custom devices for the client/patient in order to prevent and/or minimize the risk of injury to the head, torso, spine, and extremities for safe participation in sport or other physical activity.

Wrapping – An athlete mildly strains his right hip flexor during a game. As the athletic trainer, you decide that he needs his leg wrapped in an elastic bandage to make him more comfortable prior to returning to play. You have 2 minutes to perform and complete this task.

Is the athlete positioned in standing with involved leg slightly flexed and internally rotated?

Was a double 6 inch wrap selected?

Was the elastic wrap started at the upper portion of the inner thigh and brought around to the posterior aspect of the thigh?

Was the wrap anchored onto the opposite iliac crest?

Does the wrap prevent excessive hip extension?

Passing score = 4 or more questions answered yes Total points _____

Taping – An athlete is recovering from Achilles tendonitis of the right lower leg. As the athletic trainer, you decide it is best to tape this athlete for protection as he is now able to return to play.

You have 2 minutes to perform and complete this skill.

Is the patient positioned in prone with the ankle in slight plantar flexion over the edge of the table?

Did the athletic trainer verbalize or use tape adherent to the lower leg?

Did the athletic trainer use underwrap? (not necessary)

Has the athletic trainer applied anchor strips one-third of the way up the calf and around the forefoot?

Has the athletic trainer applied a 3-inch elastic strip from forefoot to the anchor strip on the calf?

Has the athletic trainer applied a second 3-inch elastic strip on top of the first, splitting it down the middle lengthwise and wrapping the 2 pieces anteriorly around the leg?

Did the athletic trainer close the tape job with elastic strips around the calf and the ball of the foot?

Does the tape job adequately prevent excessive dorsi-flexion of the foot?

Passing score = 6 or more questions answered yes Total points _____

Protective Equipment – As the athletic trainer, it is your responsibility to fit your athlete with their football helmet. Please verbalize the steps you would take to fit your athlete with their helmet.

You have 1 minute to perform and complete the skill.

Did the athletic trainer verbalize he or she would wet the player's hair to simulate playing conditions and ensure a proper fit?

Did the athletic trainer apply the helmet from the back to the front and check to make sure the helmet fits snugly with no gaps between the pads and the head or face.

Did the athletic trainer check to see if the helmet covers the base of the skull?

With the chinstrap in place, did the athletic trainer pull down on the facemask to make sure the helmet did not move?

Did the athletic trainer push down on the helmet to make sure there is no movement?

Did the athletic trainer attempt to rock the helmet back and forth to check for any movement?

Did the athletic trainer attempt to rotate the helmet to check for any movement?

Did the athletic trainer check to see if the front edge of the helmet is no less than 2 finger widths above the eyebrows?

Did the athletic trainer check to see if the jaw pads fit snugly against the face?

Did the athletic trainer check to see if the facemask was 3 finger widths from the nose?

Did the athletic trainer check to see that the ear holes were aligned?

Did the athletic trainer check to make sure the chinstrap was properly adjusted?

Passing score = 11 or more questions answered yes Total points _____

Protective Equipment – An athlete has injured his ankle during a game. Upon evaluation, you deem it necessary for the athlete to be placed on crutches. You have 2 minutes to perform and complete the skill.

Are the tips of the crutches approximately 6 inches from the lateral aspect of the shoe and approximately 2 inches in front of the toe during fitting?
 Are the crutch handles in position so the elbows are bent to approximately 30 degrees?
 Are the tops of the crutches approximately 2 finger widths from the top of the axilla?
 Did the athletic trainer review a tripod gait in which both crutches are moved forward approximately 12 inches and the athlete swings through the stationary crutches with the affected foot elevated?

Passing score = 3 or more questions answered yes Total points_____

Overall Impression of the student's ability/confidence with CIP 2 scenarios?

Proficient Satisfactory Needs Improvement

Comments:

Preceptor Signature: _____ Date: _____

Student Signature:_____ Date: _____

PD/CEC Signature: _____ Date: _____

CIP-3. Develop, implement, and monitor prevention strategies for at-risk individuals (eg, persons with asthma or diabetes, persons with a previous history of heat illness, persons with sickle cell trait) and large groups to allow safe physical activity in a variety of conditions. This includes obtaining and interpreting data related to potentially hazardous environmental conditions, monitoring body functions (eg, blood glucose, peak expiratory flow, hydration status), and making the appropriate recommendations for individual safety and activity status.

Environmental – You need to determine if it is safe to practice outside today based on the temperature and relative humidity safe practice guidelines. You have 2 minutes to perform and complete this skill.

Did the athletic trainer use the sling cyclometer or digital device?
 Did the athletic trainer interpret the results of the device accurately?
 Did the athletic trainer make appropriate recommendations based on NATA position statement?
 Passing score = 3 or more questions answered yes Total points_____

General Medical Condition –Using a glucometer, evaluate your diabetic patient's blood sugar to determine if care is needed. If needed, provide the necessary treatment? You have 2 minutes to perform and complete skill.

Did the athletic trainer provide the glucometer to the athlete?
 Did the athletic trainer document the glucometer reading?
 Did the athletic trainer interpret the glucometer reading appropriately?
 Did the athletic trainer provide the appropriate treatment based on glucometer reading and athlete's symptoms?

Passing score = 4 questions answered yes

Total points_____

Environmental Care – Set up your site to manage patients who you determine may be suffering from exertional heat illness. Perform and record appropriate core body temperature and hydration testing. You have 2 minutes to perform and complete skill.

Did the athletic trainer use a rectal thermometer?

If temperature was above 104 degrees Fahrenheit, did the athletic trainer submerge athlete in a cold bath of water below 55 degrees Fahrenheit?

Did the athletic trainer activate EMS?

Did the athletic trainer monitor patient's vitals and temperature until they reached the safe zone of below 102 degrees Fahrenheit?

Did the athletic trainer use an appropriate form of hydration testing (urine color, dip stick, etc)?

Did the athletic trainer use positive reinforcement to help the patient feel better?

Passing score = 5 or more questions answered yes

Total points_____

Overall Impression of the student's ability/confidence with CIP 3 scenarios?

Proficient

Satisfactory

Needs Improvement

Comments:

Preceptor Signature: _____ Date: _____

Student Signature: _____ Date: _____

PD/CEC Signature: _____ Date: _____

Clinical Assessment & Diagnosis / Acute Care / Therapeutic Intervention

CIP-4. Perform a comprehensive clinical examination of a patient with an upper extremity, lower extremity, head, neck, thorax, and/or spine injury or condition. This exam should incorporate clinical reasoning in the selection of assessment procedures and interpretation of findings in order to formulate a differential diagnosis and/or diagnosis, determine underlying impairments, and identify activity limitations and participation restrictions. Based on the assessment data and consideration of the patient's goals, provide the appropriate initial care and establish overall treatment goals. Create and implement a therapeutic intervention that targets these treatment goals to include, as appropriate, therapeutic modalities, medications (with physician involvement as necessary), and rehabilitative techniques and procedures. Integrate and interpret various forms of standardized documentation including both patient-oriented and clinician-oriented outcomes measures to recommend activity level, make return to play decisions, and maximize patient outcomes and progress in the treatment plan.

On-field evaluation – You are covering a women's soccer game when you notice a girl on the opposing team slide tackle your goalie. The goalie is rolling around crying and in pain while grabbing her lower left leg. You have 2 minutes to perform and complete this skill.

Did the athletic trainer ensure the scene was safe?

Did the athletic trainer calm the goalie?

Did the athletic trainer ask appropriate history questions to determine where the injury was located?

Did the athletic trainer identify the deformity?

Did the athletic trainer immobilize injured body part?

Did the athletic trainer treat for shock symptoms?

Did the athletic trainer activate EMS?

Passing score = 3 or more questions answered yes

Total points_____

Modalities – An athlete has a grade 2 Lateral ankle sprain with moderate swelling and loss of function. Use appropriate modality(ies) to help with the healing process. You have 2 minutes to perform and complete the skill.

Did the athletic trainer explain pre-application procedures?

Did the athletic trainer use appropriate parameters for the modality?

Did the athletic trainer use an appropriate modality(ies)?

Did the athletic trainer provide post-application details to the patient?

Did the athletic trainer clean up his/her station?

Passing score = 3 or more questions answered yes

Total points_____

Evaluation – An athlete reports to the athletic training clinic after sustaining a shoulder injury during practice. Based on your history and palpation, you as the athletic trainer suspect an AC joint separation injury could be the issue. Perform two appropriate tests for the AC joint. You have 2 minutes to perform and complete this skill.

Does the athletic trainer position the patient in appropriate positions for both tests?

Does the athletic trainer use appropriate hand placements for performing the tests?

Does the athletic trainer provide appropriate instructions to the patient prior to testing?

Does the athletic trainer perform both tests accurately?

Does the athletic trainer identify what the appropriate positive signs are for the tests?

Passing score = 4 or more questions answered yes

Total points_____

Rehabilitation – A baseball pitcher complains he is having diffuse left elbow pain after prolonged periods of throwing. While evaluating his elbow, the athletic trainer notices that the patient is not able to actively fully extend his left elbow because of a tight bicep muscle. Demonstrate how to stretch the bicep using a PNF stretching technique. You have 2 minutes to perform and complete this skill.

Is the patient positioned in a seated or supine position?

Has the athletic trainer asked the patient to actively move the elbow into maximal extension and hold this position?

Did the athletic trainer resist elbow flexion for 6 to 10 seconds?

Did the athletic trainer ask the patient to relax while the forearm is moved into the new range of extension and held for 10 to 15 seconds?

Passing score = 3 or more questions answered yes Total points _____

RTP decision – An athlete has been participating in a rehabilitation program for a hamstring strain. Prior to allowing the player to return to play, the athletic trainer should test the strength of the hamstrings to be sure they are of equal strength to the uninjured side and are pain free to resistance. Demonstrate a manual muscle test for the hamstrings. You have 2 minutes to perform and complete this skill.

Is the patient positioned prone?

Did the athletic trainer have the patient first move the limb actively from full knee extension to full knee flexion?

Has the athletic trainer stabilized the posterior thigh with one hand?

Has the athletic trainer placed his or her hand on the posterior aspect of the distal lower leg?

Was the proper force applied to resist knee flexion?

Did the athletic trainer position the lower leg in internal rotation to resist the medial hamstrings?

Did the athletic trainer position the lower leg in external rotation to resist the lateral hamstrings?

Passing score = 6 or more questions answered yes Total points _____

Overall Impression of the student's ability/confidence with CIP 4 scenarios?

Proficient

Satisfactory

Needs Improvement

Comments:

Preceptor Signature: _____ Date: _____

Student Signature: _____ Date: _____

PD/CEC Signature: _____ Date: _____

CIP-5. Perform a comprehensive clinical examination of a patient with a common illness/condition that includes appropriate clinical reasoning in the selection of assessment procedures and interpretation of history and physical examination findings in order to formulate a differential diagnosis and/or diagnosis. Based on the history, physical examination, and patient goals, implement the appropriate treatment strategy to include medications (with physician involvement as necessary). Determine whether patient referral is needed, and identify potential restrictions in

activities and participation. Formulate and communicate the appropriate return to activity protocol.

Evaluation – You need to complete a cranial nerve assessment on an athlete. You have 2 minutes to perform and complete this skill.

Did the athletic trainer ask the patient to smell something with his eyes closed?

Did the athletic trainer ask the patient if he can see the athletic trainer's fingers in his periphery?

Did the athletic trainer ask the patient to track his or her finger up and down and side to side?

Did the athletic trainer check the sensation of the face?

Did the athletic trainer ask the patient to frown and/or smile?

Did the athletic trainer check the patient's hearing?

Did the athletic trainer ask the patient to swallow?

Did the athletic trainer ask the patient to say "ah"?

Did the athletic trainer ask the patient to shrug his shoulders?

Did the athletic trainer ask the patient to stick his tongue out?

Passing score = 9 or more questions answered yes Total points _____

Evaluation – An athlete complains of feeling slow and depleted of energy. They believe they have low blood sugar. Perform an evaluation to determine if the patient has diabetes/low blood sugar. Provide appropriate treatment and rationale for RTP decision and what would allow this athlete to return safely.

Did the athletic trainer perform an appropriate history?

Did the athletic trainer ask about family history?

Did the athletic trainer perform appropriate testing to determine level of blood sugar?

Did the athletic trainer interpret the results accurately?

Did the athletic trainer seek referral to confirm possible diagnosis of diabetes?

Did the athletic trainer provide appropriate treatment for the blood sugar testing?

Did the athletic trainer provide acceptable recommendations for return to play guidelines?

Passing score = 6 or more questions answered yes Total points _____

Concussion Assessment – You watch your athlete collapse after receiving a helmet-to-helmet hit to the head. The athlete walks off the field but is visibly stumbling. Perform a SCAT 5 exam for this athlete and report your findings. You have 5 minutes to perform and complete this skill.

Does the athletic trainer use the SCAT 5 document?

Is the athletic trainer able to complete all tasks of the SCAT 5 document?

Did the athletic trainer record the appropriate data the patient demonstrated?

Did the athletic trainer make the appropriate diagnosis based on the SCAT 5?

Did the athletic trainer make the appropriate RTP decision and/or referral?

Passing score = 5 questions answered yes Total points _____

CIP-6. Clinically evaluate and manage a patient with an emergency injury or condition to include the assessment of vital signs and level of consciousness, activation of emergency action plan, secondary assessment, diagnosis, and provision of the appropriate emergency care (eg, CPR, AED, supplemental oxygen, airway adjunct, splinting, spinal stabilization, control of bleeding).

Emergency Care – You notice an athlete has a large abrasion on her lateral side of her right thigh. You have 2 minutes to perform and complete the necessary skill to care for this injury.

Did the athletic trainer put on protective gloves?

Has the athletic trainer cleansed the wound with an appropriate cleansing agent?

Has the athletic trainer applied an antiseptic to the wound?

If medication is applied, has the athletic trainer placed the ointment or cream on the pad or dressing, not on the wound directly?

Has the athletic trainer secured the dressing in place with a wrap or tape?

Did the athletic trainer properly remove gloves and place in an appropriate container?

Passing score = 5 or more questions answered yes Total points_____

EAP – You are summoned to the weight room where you notice there is an athlete lying face down on the floor not moving. You have 5 minutes to perform the appropriate EAP for this scenario and complete the necessary skill to care for this athlete.

Did the athletic trainer survey the scene?

Did the athletic trainer check for responsiveness?

Did the athletic trainer activate EMS?

Did the athletic trainer use appropriate technique to check for signs of life?

If log roll was warranted, did the athletic trainer use appropriate technique to void cervical damage?

Did the athletic trainer clear the airway and give appropriate technique for CPR?

Was an AED retrieved?

Did the athletic trainer use appropriate action to spine board athlete for transportation?

Passing score = 7 or more questions answered yes Total points_____

General medical Conditions – You, as the athletic trainer, have an athlete that comes to you because she cannot catch her breath. You decide to get her HR, BP, and check her heart sounds. You have 5 minutes to perform and complete skill.

HR

Did the athletic trainer position the athlete in a comfortable relaxed position?

Did the athletic trainer measure heart rate from either the radial, brachial, or carotid pulse?

Did the athletic trainer measure for 10, 15, 30, or 60 seconds?

Did the athletic trainer document accurate findings?

BP

Did the athletic trainer position the athlete in a comfortable relaxed position?

Did the athletic trainer position the cuff on the left arm above the elbow with the stethoscope positioned over the antecubital fossa?

Did the athletic trainer increase the pressure of the cuff between 180 and 220?

Did the athletic trainer document findings and were they accurate as measured by preceptor?

Stethoscope

Did the athletic trainer position the stethoscope bell in the appropriate location to identify heart beat sound?

Did the athletic trainer document findings from all 4 locations?

Did the athletic trainer make appropriate treatment based on findings?

Passing score = 12 questions answered yes Total points_____

Emergency Care – During the fourth quarter of a basketball game, an athlete collapses. The athlete that collapses has the sickle cell trait. You have 2 minutes to perform and complete the appropriate EAP for this athlete.

Did the athletic trainer check vital signs?

Did the athletic trainer activate EMS?

If oxygen is available, did the athletic trainer administer high-flow oxygen?

Did the athletic trainer try to cool the athlete?

Did the athletic trainer apply the AED?

Did the athletic trainer report findings to EMS and doctors?

Passing score = 6 or more questions answered yes Total points_____

Overall Impression of the student's ability/confidence with CIP 6 scenarios?

Proficient

Satisfactory

Needs Improvement

Comments:

Preceptor Signature: _____ Date: _____

Student Signature: _____ Date: _____

PD/CEC Signature: _____ Date: _____

Psychosocial Strategies and Referral

CIP-7. Select and integrate appropriate psychosocial techniques into a patient's treatment or rehabilitation program to enhance rehabilitation adherence, return to play, and overall outcomes. This includes, but is not limited to, verbal motivation, goal setting, imagery, pain management, self-talk, and/or relaxation.

Psychosocial Intervention – An athlete has been participating in a rehabilitation program for shin splints for the past two weeks. He is now becoming frustrated because he is not able to return to running. Document 5 goals that you would use to help refocus this patient. You have 2 minutes to perform and complete this skill.

Did the athletic trainer ask appropriate questions to the patient to find out what he wants?

Did the athletic trainer document 5 goals?

Did the athletic trainer discuss the goals to the patient?

Did the athletic trainer use positive reinforcement to help the patient feel better?

Passing score = 3 or more questions answered yes Total points_____

Overall Impression of the student's ability/confidence with CIP 7 scenarios?

Proficient

Satisfactory

Needs Improvement

Comments:

Preceptor Signature: _____ Date: _____

Student Signature: _____ Date: _____

PD/CEC Signature: _____ Date: _____

CIP-8. Demonstrate the ability to recognize and refer at-risk individuals and individuals with psychosocial disorders and/or mental health emergencies. As a member of the management team, develop an appropriate management plan (including recommendations for patient safety and activity status) that establishes a professional helping relationship with the patient, ensures interactive support and education, and encourages the athletic trainer's role of informed patient advocate in a manner consistent with current practice guidelines.

Psychosocial Disorder and intervention – As the athletic trainer for the women's cross country team, you are approached by several girls from the team to talk about concerns they have with their teammate who is experiencing poor performance due to pain in her right leg, sudden weight loss, and fatigue. You also know, from her physical, that she has irregular periods and recently was diagnosed with a stress fracture in her right leg. She has been diagnosed with the Female Athlete Triad. You have 10 minutes to discuss strategies to talk with this patient and then develop an appropriate intervention technique that would be effective for this patient. Interventions can include – goal setting, mental imagery, pain management, breathing, relaxation techniques, counseling

Did the athletic trainer discuss possible referral options for this student to seek help?

Did the athletic trainer describe an appropriate conversation style to have a discussion with the patient?

Did the athletic trainer use an appropriate intervention program for the patient?

Did the athletic trainer demonstrate an effective understanding of the intervention being considered?

Did the athletic trainer demonstrate appropriate language used for the intervention in conversation with the patient?

Passing score = 6 questions answered yes Total points_____

Overall Impression of the student's ability/confidence with CIP 8 scenarios?

Proficient

Satisfactory

Needs Improvement

Comments:

Preceptor Signature: _____ Date: _____

Student Signature:_____ Date: _____

PD/CEC Signature: _____ Date: _____

Healthcare Administration

CIP-9. Utilize documentation strategies to effectively communicate with patients, physicians, insurers, colleagues, administrators, and parents or family members while using appropriate terminology and complying with statutes that regulate privacy of medical records. This includes using a comprehensive patient-file management system (including diagnostic and procedural codes) for appropriate chart documentation, risk management, outcomes, and billing.

Following an evaluation of the patient, perform the necessary communication strategies to ensure all who are associated with the patient understand the patient's injury.

Did the athletic trainer document the patient's evaluation accurately using the ATS software program?

Did the athletic trainer review the diagnosis and treatment plan with their preceptor?

Did the athletic trainer review the communication needed to discuss with the coaching staff?

Did the athletic trainer discuss the diagnosis and treatment options with the patient?

Did the athletic trainer discuss the patient appropriately with the coaching staff?

Passing score = 5 questions answered yes Total points _____

Overall Impression of the student's ability/confidence with CIP 9 scenarios?

Proficient

Satisfactory

Needs Improvement

Comments:

Preceptor Signature: _____ Date: _____

Student Signature: _____ Date: _____

PD/CEC Signature: _____ Date: _____



**WAYNESBURG UNIVERSITY
ATHLETIC TRAINING
SCORING CRITERIA FOR ADMISSION**



Students applying for admission into the Master of Science in Athletic Training Program will be scored in the areas listed below. Applicants with the highest scores will be accepted into the program, **based on the number of available openings in the program**. Applicants will be ranked according to the total points accumulated. Those students who do not meet the minimum requirements will be denied acceptance but will be encouraged to re-apply the following year.

- 1. Overall GPA: 3.0** **Score: 1 to 3 points**
 - A student with a GPA above a 3.5 will be awarded an additional point for a maximum of 3 points.
 - A student with a GPA between the 3.25 and 3.49 will be awarded 2 points
 - A student with a GPA between the 3.00 and 3.24 will be awarded 1 point
 - A student with a GPA below the mandatory 2.7 will not be considered for admission.
- 2. Pre-requisite Course Grades: C minimum (Mandatory)** **Score: 1 to 3 points**
 - 3 points will be added to the score for each course with an A-, or A average earned.
 - 2 points will be added to the score for each course with a B-, B, or B+ average earned.
 - 1 point will be added to the score for each course with a C or C+ average earned.
 - A student with less than a C average grade earned in any pre-requisite course will not be considered for admission.
- 3. Hours: 50 minimum (Mandatory)** **Score: 1 to 3 points**
 - 3 points will be added to the score if student obtains 150 or more hours of directly supervised observation.
 - 2 points will be added to the score if student obtains between 100 to 150 hours of directly supervised observation.
 - 1 point will be added to the score if student obtains between 50 to 99 hours of directly supervised observation.
 - A student with less than 50 hours will not be considered for admission.
- 4. Letters of Recommendation: Minimum 2** **Score: 0 to 2 points**
 - The scoring of the recommendation will rate the candidate using the following scale:
 - The two evaluations will be averaged
 - 0-29 = Do not recommend (0 Points)
 - 30-39 = Recommend (1 Point)
 - 40-50 = Recommend strongly (2 Points)
- 5. Essay: Maximum 2 page** **Score: 0 to 2 points**
 - Essay will be graded using a rubric looking at the substance of response and quality of writing.
 - 2 points will be awarded for essays that are considered as above standard
 - 1 point will be awarded for essays that are considered as standard
 - 0 points will be awarded for essays that do not meet this standard
 - A student that does not submit an essay will not be considered for admission
- 6. Interview: (As needed)** **Score: 1 to 3 points**

The interview will be scored on your ability to answer questions appropriately. The student will be graded on a Likert scale of 1 to 3 with 1 being a poor response, 2 being an acceptable response,

and 3 being an excellent response. The scores will be averaged together to composite an overall total point value between 1 and 3 points.

- A student who does not show up for their assigned interview session will not be considered for admission.

7. Total Point Range: 11-31 required for consideration of acceptance

- Below 11 total points- will not be accepted into the MSAT program
- 11 to 18 total points – Meets minimal standard (May require interview)
- 19 to 26 total points – Satisfactory consideration for acceptance
- 27 to 34 total points – High consideration for acceptance

Name: _____

Date: _____

Athletic Training Application – Essay Rubric

Information Criteria	Below Standard	Standard	Above Standard
Substance	The student provides an essay that shows little to no signs of scholarly work in that there is no flow to the paper and the thought process is sporadic.	The student provides an essay that flows smoothly but may have a few weak transitions	The student provides a scholarly essay that includes proper formatting with an introduction, body, and conclusion/summary.
Reasoning	The student articulates his/her point of view poorly as it is hard to interpret why or how the student will achieve professional success	The student articulates his/her point of view well, providing minimal evidence to support his or her point of view on achieving professional success or providing evidence to support point of view but is not fluent with their thought process	The student articulates his/her point of view very well, providing specific examples of evidence to support their point of view on achieving professional success
Grammar/Spelling/Punctuation	More than 3 errors noted and/or the errors cause a disruption in the ability to understand his or her point of view.	Between 1 and 3 errors noted but does not affect the ability to understand his or her point of view	No errors noted.
Overall perception of essay (Circle One)	Below Standard	Standard	Above Standard

Additional Feedback:

Appendix D: Clinical Observation Form

Waynesburg University Professional Master's of Athletic Training
Observation Requirements (Minimum of 50 hours)

**Use additional sheets if needed*

Please provide the following information:

Name of Observation Site:	
Date of Observation:	
ATC Professional Observed:	
Credentials:	
License #:	
Employer:	
Phone Number:	
Email:	
Total Hours observed:	

Please check the box that corresponds with this location's setting:

- ☐ Secondary
- ☐ Collegiate
- ☐ Professional
- ☐ Rehabilitation Clinic
- ☐ Hospital
- ☐ Physician office
- ☐ Other: _____

Please check the box that corresponds with the patient setting (check all that apply):

- ☐ Orthopedic
- ☐ Neurological
- ☐ Cardiovascular
- ☐ Integumentary
- ☐ Geriatrics
- ☐ Pediatrics
- ☐ Athletics
- ☐ Other: _____

Overseeing ATC Signature: _____
Date: _____

Student Signature: _____
Date: _____



**WAYNESBURG UNIVERSITY
ATHLETIC TRAINING
TECHNICAL STANDARDS**



SECTION 5:

The Athletic Training Program at Waynesburg University is a rigorous and intense program that places specific requirements and demands on the student 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 activities. 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 into 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:

- a. the mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm.
- b. sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examination using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients.
- c. the 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 practice.
- d. the ability to record the physical examination results and a treatment plan clearly and accurately.
- e. the capacity to maintain composure and continue to function well during periods of high stress.
- f. the perseverance, diligence and commitment to complete the Athletic Training Program as outlined and sequenced.
- g. flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
- h. affective skills an appropriate demeanor and rapport that relate to professional education and quality patient care.

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 certain accommodations, they can meet the standards.

The Human Resource Office will evaluate a student who states he/she could meet the program's technical standards with accommodation and confirm that the stated condition qualifies as a disability under applicable laws.

If a student stated he/she can meet the technical standards with accommodation, then the University will determine whether it agrees that the student can meet the technical standards with reasonable accommodation; this includes a review of whether the accommodations requested are reasonable, taking into account whether accommodation would jeopardize clinician/patient safety of the educational process of the student or the institution, including all coursework, clinical experiences and internships deemed essential to graduation.

READ AND SIGN THE APPROPRIATE (ONLY ONE) LINE BELOW

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 be admitted into the program.

Signature of Applicant

Date

Program Director

Date

Alternative statement for student requesting accommodations.

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 the standards with certain accommodations. I will contact the Human Resource Office 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.

Signature of Applicant

Date

Program Director

Date

Appendix F: Exposure Control Plan

Bloodborne Pathogens Exposure Control Plan

In accordance with the Occupational Safety Health Administration (OSHA) Bloodborne Pathogens Standard, 29 CFR 1910.1030, the following Exposure Control Plan has been developed:

Exposure Determination

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment (i.e., employees are considered to be exposed even if they wear personal protective equipment). This exposure determination affects all full-time Certified Athletic Trainers on staff, graduate assistants, and athletic training students at Waynesburg University working directly with student-athletes.

The job classifications and associated tasks for these categories are as follows:

- Athletic Training Staff members will be expected to provide emergency treatment for life-threatening emergencies, including administering mouth-to-mouth resuscitation and controlling bleeding occurring due to participation in athletics. Also, the staff member may be involved in assisting team physicians with suturing, draining blisters, applying band-aids, or shaving calluses.
- Athletic training students under the supervision of a PRECEPTOR may often be required to perform the same tasks as staff members when the situation requires.

Implementation Schedule and Methodology

OSHA also requires that this plan include a schedule and method of implementation for the various requirements of the standard. The following complies with this requirement:

Compliance Methods

Universal Precautions will be observed at this facility in order to prevent contact with blood, blood products, or other potentially infectious materials. All blood, blood product, or other potentially infectious material will be considered infectious regardless of the perceived status of the source or source individual.

Engineering and work practice controls will be used to eliminate or minimize exposure to employees in the Athletic Training facility. Where occupational exposure remains after institution of these controls, personal protective equipment shall be used (**All staff, graduate assistants, and athletic training students will use personal protective equipment in dealing with any potentially infectious material**). In the Athletic Training facility, sharps containers,

waste disposable bags, and clearly marked biohazardous waste containers will be used as engineering controls.

The above controls will be examined and maintained on a regular basis, with attention given to the contents of the engineering controls to insure removal once the containers reach 1/2 to 3/4 of capacity. An individual appointed by the Head Certified Athletic Trainer shall review the effectiveness of the controls on a semiannual basis.

Hand washing facilities are also available to the employees who incur exposure to blood or other potentially infectious materials. OSHA requires that these facilities be readily accessible after incurring exposure. At this facility, there are two hand-washing facilities located in the Athletic Training facility, in each athletic locker room, in each coach's locker room, and in each of the public restrooms. There are no available facilities at game/practice sites except for the football stadium. As an alternative, a 10% bleach and water solution and isopropyl alcohol are stored in each Certified Athletic Trainer's kit on the site. If this alternate method is used, the hands are to be washed with soap and running water as soon as feasible following any exposure.

After proper removal and disposal of personal protective gloves or other personal protective equipment, employees shall wash their hands and any other potential contaminated skin area immediately or soon as feasible with soap and water.

If employees incur exposure to their skin or mucous membranes, then those areas shall be washed or flushed with water as appropriated or as soon as feasible following contact.

Needles

Contaminated needles and other contaminated sharps objects will not be bent, recapped, removed, sheared, or purposely broken. Following usage needles or other contaminated sharps objects will be disposed of in a clearly marked biohazardous, sharps container. OSHA allows for one exception to the rule governing the disposal of needles, if the procedure requires that the contaminated needles be recapped or removed and no alternative is feasible, and the action is required by the medical procedure. If such action is required, then the recapping or removal of the needle must be done by the use of a mechanical device or a one handed technique. At this facility recapping or removal is only permitted while assisting one of the Team Physicians in a procedure necessitating this act.

Containers for Reusable Sharp

Contaminated sharps that are not reusable are to be placed immediately, or as soon as possible after use, into appropriated sharps containers. At this facility, the sharps containers are puncture resistant, labeled with a biohazard label, and are leak proof. The sharps container is located near the sink in the taping area. An individual appointed by the Head Certified Athletic Trainer has

the responsibility for disposal of the sharps container when it becomes $\frac{3}{4}$ full. The container need only be checked as necessitated by its use.

Work Area Restrictions

In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages are not to be kept or placed on treatment tables, taping decks, or countertops when blood or other potentially infectious materials are likely to be present.

All procedures will be conducted in a manner that will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials.

Specimens

Specimens of blood or other potentially infectious materials, such as urine, will be placed in a container that prevents leakage during the collection, handling, processing, storage, and transport of the specimens.

The container used for this purpose will be labeled or color-coded in accordance with the requirements of the OSHA standards. It should be noted that this standard provides for an exemption for specimens from the labeling/color-coding requirements of the standard, provided the facility uses Universal Precautions in the handling of all specimens and the containers are recognizable as container specimens. This exemption applies only while the specimens remain in the facility.

If outside contamination of the primary container occurs, the primary container shall be placed within a secondary container that prevents leakage during the handling, processing, storage, transport, and/or shipping of the specimen.

Contaminated Equipment

Equipment that has become contaminated with blood or other potentially infectious materials shall be examined before servicing or shipping and shall be decontaminated as necessary unless the decontamination of the equipment is not feasible.

Personal Protective Equipment

All personal protective equipment used at the facility will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach employees' clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time that the protective equipment will be used.

The protective equipment necessary for the Athletic Training facility primarily consists of latex or vinyl examination gloves and one way pocket masks. The gloves will be stored in the taping area on the wall near the sink, and in all athletic training kits. The pocket masks are stored in the emergency crash kits. This equipment is available at all times and at no cost to the staff, graduate assistants, or athletic training students.

All personal protective equipment will be cleaned, laundered, and disposed of by the employer at no cost to the employees. The employer at no cost to employees will make all repairs and replacements.

All garments that are penetrated by blood shall be removed immediately or as soon as feasible. All personal protective equipment will be removed before leaving the work area.

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes.

Gloves will be used for the following procedures:

- Applying bandages
- Applying wound closures
- Draining blisters
- Shaving calluses
- Cleaning open wounds
- Handling urine specimens
- Cleaning evaluation tables if soiled with potentially infected materials
- Cleaning spills of potentially infected materials
- Evaluating oral/dental injuries or conditions
- Applying direct pressure to open wounds
- Handling/changing wound dressings

Disposable gloves used at the facility are not to be washed or decontaminated for reuse. They are to be replaced as soon as practical when they become contaminated or as soon as feasible when or if they are torn, punctured, or when their ability to function as a barrier is compromised. Utility gloves may be decontaminated for reuse provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibits other signs of deterioration or when their ability to function as a barrier is compromised.

The facility will be cleaned and decontaminated daily when student-athletes use the athletic training facility. Decontamination will also take place after any blood or other potentially infectious material has been exposed in the Athletic Training facility. Decontamination will be accomplished by using a 10% bleach and water solution or Biocide available in the cabinet under each sink counter and in all Certified Athletic Trainers' kits.

Any broken glassware that may be contaminated will not be picked up directly with the hands. Cardboard sheets should be used to corner and lift any broken pieces. All broken glass or material should be placed in a sharps container for disposal.

Regulated Waste Disposal

All contaminated sharps shall be discarded as soon as feasible in sharps containers located in the facility. Sharps containers are located in the areas listed above.

Regulated waste other than sharps shall be placed in appropriate containers with Red colored waste bags. Such containers are located in the Athletic Training facility taping room, and at all athletic facilities.

Laundry Procedures

Laundry contaminated with blood or other potentially infectious materials will be handled as little as possible. Such laundry will be placed in appropriately marked bags where it is used. This laundry will not be sorted or rinsed in the area of use. It will then be removed by the individual responsible for laundry using personal protective equipment, and washed separately in bleach.

All employees who handle contaminated laundry will use personal protective equipment to prevent contact with blood or other potentially infectious materials.

HIV/HBV Exposure

Post-Exposure Evaluation and Follow-Up

When an employee incurs an exposure incident, it should be reported to the Head Athletic Trainer. All employees who incur an exposure will be offered post" exposure evaluation and follow-up in accordance with the OSHA standard. This follow-up will include the following:

- Written documentation of the route of exposure and the circumstances related to the incident as soon as feasible following the exposure. This is to be returned to the Head Certified Athletic Trainer
- If possible, the identification of the source individual and, if possible, the status of the source individual. The blood of the source individual will be tested after consent is obtained for HIV/HBV infection.
- Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infection of the source individual.
- The employee will be offered the option of having their blood collected for testing of the employee's HIV/HBV serological status. The blood sample will be preserved for up to 90 days to allow the employee to decide if the blood should be tested for HIV serological

status. However, if the employee decides before that time that testing will or will not be conducted then the appropriate action can be taken and the blood sample discarded.

- The employee will be offered post-exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service.
- The employee will be referred to appropriate counseling centers concerning precautions to take during the period after the exposure incident. The employee will also be given information on what potential illness to be alert for and to report any related experiences to appropriate personnel.
- The Head Certified Athletic Trainer will be designated to assure that the policy outlined above is effectively carried out as well as to maintain records related to this policy.

Interaction with Health Care Professionals

A written opinion shall be obtained from the health care professional that evaluates employees of this facility. Written opinions will be obtained in the following instances:

- When the employee is sent to obtain the Hepatitis B vaccine.
- Whenever the employee is sent to a health care professional following an exposure incident, health care professionals shall be instructed to limit their opinions to:
 - Whether the Hepatitis B vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident.
 - That the employee has been informed of the results of the evaluation.
 - That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials. (Note: The written opinion to the employer is not to reference any personal medical information).

Training

Training for all employees will be conducted before initial assignment to tasks where occupational exposure may occur. Training for employees will include an explanation of the following:

- The OSHA Standard for Bloodborne Pathogens
- Epidemiology and symptomatology of bloodborne disease
- Modes of transmission of bloodborne pathogens
- The exposure plan (i.e., points of the plan, lines of responsibility, how the plan will be implemented, etc.)
- Procedures that might cause exposure to blood or other potentially infectious material at this facility.
- Control methods to be used at the facility to control exposure to blood or other potentially infectious materials.
- Personal protective equipment available at this facility
- Who should be contacted concerning exposure to blood or other potentially infectious materials?

- Post-exposure evaluation and follow-up.
- Signs and labels used at the facility.
- Hepatitis B vaccine program at the facility.

Record Keeping

An employee appointed by the Head Certified Athletic Trainer will maintain all records required by the OSHA standard. The athletic training staff will be responsible for conducting the training to the graduate assistants and athletic training students during preseason orientation. All employees will receive annual refresher training within one year of the employee's previous training. The OSHA Standard for Bloodborne Pathogens and the outline for the training material will be kept in the office of the Head Certified Athletic Trainer and in the policies manual at the Athletic Training facility Desk by the main entrance.

Biohazardous Waste Disposal

Procedure for handling/storing/disposing of hazardous waste in the Athletic Training facility and related athletic courts/fields in response to Pennsylvania statute on infectious and chemotherapeutic waste, Act No. 93, effective July 13, 1988, updated and renumbered December 23, 2000 and the Municipal Waste Management Regulations governing such waste.

Designation of Infectious Waste in the Athletic Training facility:

Waste containing human blood, body fluids or secretions.

- Contaminated dressings and swabs.
- Used tongue blades.
- Used disposable rubber gloves.
- Contaminated sharps.
- Used needles and syringes
- Used razor blades
- Contaminated scalpels

Segregation of Infectious Waste:

Segregate waste contaminated with human blood, body fluids, or secretions at point of origin. Immediately after use, dispose of the contaminated dressings, swabs, tongue blades, and gloves by disposing them in the metal step-up container lined with red bag that is imprinted with the hazard symbol. Rubber gloves are to be used during all procedures involving infectious wastes. Place rubber gloves along with waste in metal step-up container. When red bag in step-up container becomes full, it should be taped shut and placed in large red plastic bag inside biohazard waste freezer.

- When on the field, place all contaminated materials in small red bag with the biohazard symbol, and transport to the clinic for storage in the freezer.
- Immediately place used syringes with needles attached, used razor blades, and contaminated

scalpels in the puncture resistant Sharps container. Do not recap needles.

Packaging and Storing of Infectious Waste:

- Select appropriate materials for each type of waste.
 - Puncture resistant for sharps.
 - Bags for solid/semi solid waste.
- Packaging should maintain its integrity during storage and transport.
- Cardboard boxes with hazardous waste symbol and impervious tear resistant red plastic bags of at least 3-mil thickness will be supplied by the Hazardous Waste Disposal Company retained by Waynesburg University.

To assemble cardboard box:

- Open box and tape bottom by bringing together both flaps and place one length of packing tape down the center, place another length crisscross over first length.
- Set the box upright. Place one of the 3-mil thickness red bags supplied by the company inside the cardboard box folding the top of bag over the sides of the box.

Filling the cardboard box:

- When Sharp container is filled, place it directly in the prepared cardboard box.
- When the red bag in the freezer is filled with infectious waste, secure the bag by twisting the top of the bag and taping it with packing tape. Fold the top over and tape again.
- Place this bag in the prepared cardboard box just prior to scheduled pick-up date.
- When the cardboard box is filled, secure the 3-mil thickness red bag same as the other red bags. Twist the top and tape, fold over and tape again.

Sealing the cardboard box:

- Close the flaps and seal the top of the box the same as the bottom, one length down the center, another length across.
- Leave the box on top or next to the freezer until the Hazardous Waste Disposal Company comes to pick it up.

Treatment of Infectious Waste:

- Refer to Waynesburg University Athletic Training Clinical Policies and Procedures

Appendix G: Communicable Disease Policy

The Center for Disease Control (CDC) outlines specific policies for minimizing exposure of communicable diseases within health care facility and between health care providers and patients. The Waynesburg University ATP is educating health care providers and we choose to use the following provisions to manage communicable diseases that may arise in out on campus athletic training room and in off-campus affiliated sites.

GUIDELINES: (CDC Personnel Health Guideline, 1998)

- A Well-defined policy must be in place, concerning contact of personnel with patients when personnel have potentially transmissible conditions.
- The policy should include:
 - Personnel responsibility in using the health service and reporting illness
 - Work restrictions
 - Clearance for work after an illness that required work restriction.
- Identify the person with authority to relieve personnel of duties.
- Develop work-exclusion policies that encourage personnel to report their illnesses or exposures and that do not penalize them with loss of wages, benefits, or job status.
- Educate and encourage personnel who have signs and symptoms of a transmissible infectious disease to report their condition promptly to their supervisor and occupational health.
- Provide appropriate education for personnel on the importance of good hygienic practices, especially hand washing and covering the nose and mouth when coughing and sneezing.

POLICY:

If an ATS becomes ill, he/she must report to the Student Health Center on campus or to another medical practitioner for evaluation. Upon evaluation the medical practitioner will determine the appropriate intervention needed and the amount of time the ATS shall remain out of contact with others to prevent transmission.

If the ATS acquires a communicable disease, the ATS will notify their Preceptor as soon as possible. The Preceptor will then notify the Clinical Coordinator of the ATS's condition including the amount of time the ATS will be absent from the clinical experience.

The ATS will not be permitted to return to the clinical experience until he/she has been re-evaluated by a medical practitioner. A signed release from a medical practitioner must be filled with the Preceptor and Clinical Coordinator in order for the ATS to return to the Waynesburg University Athletic Training Room or an affiliated clinical site.

The Center for CDC provides these preventative guidelines for the reporting of communicable disease with health care facility. These regulations are designed to provide for the uniform awareness, prevention, and reporting of diseases in order that appropriate control measures may be instituted to interrupt the transmission of disease. Since ATSs are providing direct health care to patients under the supervision of a Preceptor, the appropriate precautions must be utilized. Any ATS who acquires any of the listed communicable disease will be dismissed from the clinical experience at Waynesburg University or other affiliated sites until a medical practitioner has deemed the ATS non-contagious.

Communicable Diseases cited by the CDC

- Bloodborne pathogens
- Conjunctivitis
- Cytomegalovirus
- Diphtheria
- Gastrointestinal infections, acute
- Hepatitis A
- Herpes simplex
- Measles
- Meningococcal disease
- Mumps
- Parovirus
- Pertussis
- Poliomyelitis
- Rabies
- Rubella
- Scabies and pediculosis
- Staphylococcus aureus infection and carriage
- Streptococcus infection
- Tuberculosis

Appendix H: Clinical Expectations Form

Waynesburg University Athletic Training Education Program Preceptor and AT Student Clinical Education Expectations/Orientation

Student's Name: _____

Clinical Setting/Assignment: _____

Term of the Rotation: _____

Preceptor's Name: _____

As specified in the Athletic Training Education Program Student Handbook, all AT students enrolled in the program are expected to abide by the NATA Code of Ethics and the Standards of Professional Practice Expectations. Additionally, students are expected to know, verify that they have read, and agree to comply with the policies and procedures specified in the Handbook. It is also expected that students agree to abide by setting specific policies, as delineated in the clinical sites policy and procedures manuals.

At the beginning of each clinical assignment, students must meet with their assigned Preceptor to discuss and orient themselves with any setting specific policies as well as Preceptor expectations to help them increase their confidence in applying their clinical skills. Expectations specified by Preceptors must comply with the policies and procedures outlined in the ATEP Student Handbook. Additionally, each orientation should include the following information:

1. Review of EAP and location of document(s)
2. Review of all equipment and facilities
3. Review of SOP
4. Introduction to all staff and coaches
5. Review student and preceptor expectations
6. Review current skills/technical standards
7. Review Blood-borne pathogen policy (OSHA)
8. Review HIPAA policy and documentation system

Please take a moment to identify any additional specific expectations that will ensure an appropriate learning environment and a successful clinical rotation below and on the next page.

Appendix I: BOC Standards of Professional Practice Version 3.1

https://www.bocatc.org/system/document_versions/versions/154/original/boc-standards-of-professional-practice-2018-20180619.pdf?1529433022