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GENERAL INFORMATION

The athletic training education program (BSU Athletic Training Education Program) at Ball State University blends both clinical and coursework components to develop a well-rounded entry-level certified athletic trainer (ATC). Ball State University has produced many prominent alumni who are currently employed in the high school, sports medicine clinic, college, and professional settings. In addition, many students have also become physical therapists, physician assistants and physicians. The Program strives to continue this tradition.

The Ball State University athletic training education program was one of the first educational programs to receive National Athletic Trainers' Association (NATA) approval as it became an undergraduate minor in 1971. The program has either been approved or accredited since that time. The University has remained strongly committed to maintaining and improving this program as demonstrated by the implementation of the Athletic Training Major in 1987. The major develops the knowledge, skills, and professional attitudes/behaviors necessary for the practice of athletic training. The academic and clinical instructors continually strive to provide the students with the most current evidence-based clinical and teaching practices by attending seminars and conferences, and through conducting original research. See Appendix A for definitions of terms used throughout this handbook.

Mission

The mission of the BSU Athletic Training Education Program is to prepare qualified entry-level athletic trainers for the profession. The program develops knowledge, skills and professional attitudes/behaviors in the following twelve athletic training educational competency/clinical proficiency content areas:

- 1. Risk Management and Injury Prevention
- 2. Pathology of Injuries and Illnesses
- 3. Assessment and Evaluation
- 4. Acute Care of Injury and Illness
- 5. Pharmacology
- 6. Therapeutic Modalities
- 7. Therapeutic Exercise
- 8. General Medical Conditions and Disabilities
- 9. Nutritional Aspects of Injury and Illness
- 10. Psychosocial Intervention and Referral
- 11. Health Care Administration
- 12. Professional Development and Responsibilities

Goals

Listed below are the goals of the Athletic Training Education Program:

- 1. To provide quality evidence based athletic training didactic education.
- 2. To provide quality athletic training clinical education in a variety of settings (e.g., college/university, high school, clinic).
- 3. To provide students with ample opportunities for clinical skill instruction and evaluation.
- 4. To guide students in the development of their core professional attitudes/behaviors.
- 5. To prepare quality entry-level athletic training professionals for employment in a variety of settings (e.g., college/university, high school, clinic).
- 6. To assist students in gaining employment or admittance into graduate school.
- 7. To prepare students to sit for the Board of Certification (BOC) examination.

Guiding Principles:

These guiding principles direct the "ideal" teaching and learning in the BSU Athletic Training Education Program:

1. **Curiosity**

Intellectual curiosity is valued and expected. Instructors and students should strive to embrace the "why" questions and understand the science behind the concepts learned. The program strives for enthusiastic instructors and learners.

2. Communication

Open, honest, and thoughtful communication among students and instructors is essential. This includes thoughtful criticism, constructive feedback, and positive encouragement. In addition, the development of appropriate oral and written communication skills needed for all aspects of patient care is expected across the curriculum.

3 **Integrity**

The BSU Athletic Training Education Program aspires to operate at the highest level of ethical conduct and to promote these values among students and instructors. Medical confidentiality must be strictly adhered to in all aspects of education, research, and patient care. Proper professional conduct in accordance with the *NATA Code of Ethics* is emphasized and expected at all levels of the program. See Appendix B for NATA Code of Ethics.

4. Critical Thinking, Problem Solving, and Decision Making

Instructors and students are committed to developing critical thinking, problem solving, and decision making skills. Problem and case based learning is incorporated at all levels of the BSU Athletic Training Education Program.

5. Theory to Practice

Evidence-based practice and encouraging the link from current research to clinical practice is emphasized in all phases of the athletic training education program. Students are expected to prepare themselves adequately for the classroom to ensure they possess the appropriate level of knowledge to practice clinical skills.

6. **Advocacy**

The BSU Athletic Training Education Program embraces the concept of advocacy. Students should be advocates for their own learning. Instructors should be advocates for student learning and embrace teachable moments. The concept of being an advocate for the athlete/patient should be a principle observed and reinforced to ATSs in all aspects of the clinical program.

Overview of Classroom and Clinical Experiences

A strong emphasis is placed on the knowledge learned in the classroom and laboratory. Students are expected to utilize newly acquired knowledge to practice and enhance their clinical skills. The clinical education experiences are then designed to challenge the ATS to develop and apply clinical skills/proficiencies. Clinical education experiences are designed to expose students to the following areas: equipment intensive sports; activities with a high risk of upper extremity injuries; activities with a high risk of lower extremity injuries; and general medical conditions. Settings for these clinical experiences range from BSU intercollegiate athletics, area high schools and sports medicine clinics, primary care clinics, and the BSU Health Center. Athletic training students may accumulate

over 1000 hours of clinical experience and will complete hundreds of clinical skills/proficiencies (see <u>Appendix C</u> for a listing of educational competencies/proficiencies). The classroom and clinical education experiences are vital in preparing the student for employment in a variety of settings.

Overview of Clinical Proficiencies and Clinical Proficiency Matrix

Upon admittance into the athletic training program, students need to go to Hiatt Printing (during the first week of the semester) and purchase their Clinical Proficiency Manual (under AT 370 or 371). This manual contains all of the clinical proficiencies that a student must complete prior to graduation and should be with the student at all clinical experiences. This clinical proficiency manual and online clinical proficiency matrix (Matrix) will be explained in detail during the first week of classes in AT 370 Lower Extremity Orthopedic Evaluation or AT 371 Upper Extremity Orthopedic Evaluation.

Students in the BSU Athletic Training Education Program must perform hundreds of clinical skills/proficiencies while in the program. The clinical skills are first learned in the classroom and laboratory. For example, ankle taping is taught and evaluated in the AT 340L--Prevention and Care of Musculoskeletal laboratory. Once the student has practiced and successfully completed these skills in the laboratory, they will be instructed to log their completion in the online clinical proficiency matrix during that laboratory course. During the next semester, the student is to perform ankle taping again and have an ACI watch and evaluate their performance. The ACI will score the proficiency and provide written feedback in the students' clinical proficiency manual.

All clinical skills/proficiencies that are taught in one semester are then to be evaluated and approved in a real time or simulated manner during the next semester. An exception to this may be if a student is in a unique situation to perform that clinical skill in real time later that same semester. For example, a student successfully completes their foot and ankle evaluation in AT 370 Lower Extremity Orthopedic Evaluation during October of the fall semester. In November the student is provided with an opportunity to perform an ankle evaluation in real time.

Accreditation of the Athletic Training Education Program

The Commission on the Accreditation of Athletic Training Education (CAATE) accredits educational programs that prepare entry-level athletic training professionals. Accreditation is one step in a process that is meant to ensure a supply of qualified athletic training health care professionals. CAATE accredits programs for the Athletic Trainer. An education program is accredited when it meets the Standards established by the Commission. The Standards therefore constitute the minimum requirements to which an accredited program is held accountable. For additional information about the accreditation of athletic training education programs see www.caate.net.

ACADEMIC INFORMATION

Program content is based on the 3rd edition of the Athletic Training Educational Competencies (transitioning into the 4th edition of the competencies/clinical proficiencies). The BSU Athletic Training Education Program is a 59 hour major in the School of Physical Education, Sport, and Exercise Science. The major consists of 2 hours of prerequisites, 25-26 hours of foundation courses, and 26-30 hours of athletic training core courses.

ATHLETIC TRAINING STUDENT DEFINITIONS

Pre-Athletic Training Student

All freshmen or transfer students who identify athletic training as their major will be considered a preathletic training student. These students complete AT 196—Introduction to Athletic Training (unless waived by the Program Director for certain transfer students) and 50 hours of directed observation hours in the BSU athletic training rooms/venues.

Athletic Training Student

An ATS is one who has been formally admitted into the Athletic Training Education Program. This status requires that the student complete all the courses, clinical proficiencies for the athletic training major and all other retention requirements. Completion of these requirements will allow the student to become eligible to sit for the BOC Examination. It is strongly encouraged and recommended that the ATS be a student member of the National Athletic Trainers' Association at least one year prior to taking the BOC examination.

EXPECTATIONS OF THE ATHLETIC TRAINING EDUCATION PROGRAM

As an ATS, you have been selected into the Program over numerous other students who have the same interest. A student is chosen because of their potential for a successful career in athletic training. Among other qualities, an ATS possesses good intelligence, perseverance, dedication, communication skills and work ethic. However, all the other students in the Program have these same qualities and each student must strive for excellence. The sections below outline some expectations for all ATSs.

Expectations in the classroom

It is expected that the student will:

- Strive for academic excellence in all courses. The theoretical information gained from classes will provide a foundation for all clinical skills. Students must continue improve on all aspects of their education to provide the best care of athletes and patients.
- Successfully complete all clinical laboratory competencies each semester.

Expectations regarding clinical experiences

- Report on time to clinical experiences and be prepared to assume learning responsibilities as an ATS.
- Complete the Emergency Action Plan (<u>Appendix D</u>) with their ACI by the middle of the second week of each clinical assignment.
- Complete OSHA Blood borne Pathogen Training annually.
- Complete TB test annually
- Be inquisitive and pose good questions to peers, clinical instructors and other health care providers.
- Supplement your education at all clinical experiences with additional reading in relevant journals and books.
- Refrain from applying skills during your clinical experiences which have not first been instructed and evaluated by an ACI. (see <u>Appendix E</u> for specific policy regarding therapeutic modalities and therapeutic exercises)
- Take the initiative to learn at all clinical placements.
- Assume a leadership role with peers in the classroom, laboratory and clinical settings.
- Attempt to improve athletic training skills everyday.
- In the event the supervising ACI or CI is not present you are act as a first-aider, only. Students do not replace medical staff. (see Appendix F)
- Engage in an average of 20 hours of clinical experience each week. These experiences/hours are during times when there is a high opportunity for learning. This is only an average and there may be weeks in which more (voluntary) or less than 20 hours are completed, depending on the learning environment. A student is

- only required to complete 20 hours per week. Anything above 20 hours is voluntary.
- Have pride in yourself, the program and the profession of athletic training.
- During the first year in the clinical education program, students will assume assistant roles with approved clinical instructors/BSU sports. During the second year in the clinical education program, it is expected that students will assume more of a lead role (certain exceptions) with a BSU sport under the supervision/instruction of an approved clinical instructor.

Conflicts between Classes/Part-time Employment and Clinical Experiences

- Conflicts diminish the quality and continuity of the clinical experience and is unfair to other students who have avoided such conflicts in their schedules.
- Any student who has a possible class conflict with their clinical assignment must complete the Athletics
 Advising Resource Center advising form and have it signed by the head athletic trainer. Also
 speak to the Program Director before attempting to schedule the particular class.
- Regarding any employment conflicts, the student must first have a meeting with the Program Director and the clinical instructor before scheduling their part-time employment.
- We will continue to be supportive, but we must also stay accountable regarding a quality clinical experience.

Expectations regarding completion of proficiencies and proficiency matrix It is expected that the student will:

- Have the proficiency manual on their person at all clinical experiences.
- Have the approved clinical instructor sign-off/approve clinical proficiencies that are successfully completed in the real time situation
- Plan along with the approved clinical instructor to periodically complete clinical proficiencies during down time at clinical experiences.
- Record/log approved clinical proficiencies in the proficiency matrix in a timely fashion.

CRITERIA FOR RETENTION IN THE ATHLETIC TRAINING EDUCATION PROGRAM

Once admitted into the athletic training education program, the students' academic and clinical progress will be evaluated each semester. The student who continues to demonstrate satisfactory academic and clinical progress in the program will continue to the next semester. If an unsatisfactory report in either the clinical or academic aspects is noted, the student will be placed on probation for one semester to remedy the deficiencies. If these deficiencies are not corrected, the student may be dismissed from the athletic training education program. This decision is made by the Program Director in conjunction with the retention committee (consists of those same faculty/staff on the ATEP selection committee).

Students who withdraw from the athletic training education program will need to re-apply to be re-admitted. On an individual basis, the written application materials to be submitted may be slightly modified (according to the athletic training education program selection committee).

The following guidelines will be used to evaluate each ATS at the end of each semester in order to remain in good standing in the athletic training education program:

- 1. Must satisfy (with or without accommodation) the mental, cognitive, emotional, and physical technical standards involved in completing the competencies and clinical proficiencies in the program. (Appendix G)
- 2. Must maintain a minimum overall Grade Point Average of 2.75 with no semester lower than a 2.5. A student dropping below this mark will be placed on probation for one semester. Failure to meet this standard after one semester on probation may result in dismissal from the athletic training education program.
- 3. Must maintain a minimum grade point average of 2.75 in the Athletic Training Core Curriculum. An ATS

- who received a grade lower that "C" in any athletic training course will be required to retake the course.
- 4. Student clinical performance will be evaluated. In instances of unsatisfactory, clinical performance, the student will be placed on probation for one semester. A student who does not attain an appropriate clinical performance level after one semester may be dismissed from the athletic training education program. These performance evaluations will be based on one or more of the following:
 - a. Mid-term and final clinical performance evaluations completed by the clinical instructors.
 - b. Laboratory approved clinical instructor evaluations/input.
 - c. Approval of clinical proficiencies in a timely manner. Proficiencies approved in a laboratory class should be re-approved during clinical experiences by the conclusion of the following semester (up to one or two proficiencies not completed would be acceptable). This will take into consideration the student's semester in the program and future opportunities to perform clinical proficiencies in real-time. AT 196 students can complete the spine-boarding clinical proficiency during their football clinical experience (or sooner). AT 340 students can complete clinical proficiencies such as helmet fitting and shoulder pad fitting during their football clinical experience, etc. during their football clinical experience (or sooner). AT 370 and AT 371 students are encouraged to complete the clinical proficiencies in real-time; however, these students must complete at least one clinical proficiency from either course per semester.
- 5. Must successfully perform all clinical proficiency skills on the semester-end evaluation. In the event a clinical proficiency is not performed successfully the student must return and demonstrate proficiency prior to the next semester. A student who does not attain an appropriate clinical performance level within one month from the first semester-end evaluation may be placed on probation the athletic training education program. Any student who does not follow-up with semester-end CP exams (either making an appointment with the ACI or showing up to the appointment) will have their grade in a relevant clinical course (e.g., 372, 496, 392/492) lowered by half a grade point.
- 6. Successfully complete annual OSHA Bloodboorne Pathogen Training. Maintain current certification in CPR (professional rescuer) and first aid.
- 7. Any case of academic dishonesty or professional misconduct can result in probation or dismissal.

APPEAL PROCESS

A student has the right to appeal any decision made by the athletic training education program or Selection Committee. The appellant must submit a letter to the director of the Athletic Training Education Program within ten (10) working days of receiving notification of an adverse decision. The letter should contain reasons as to why the decision is being appealed and why it should be reversed. A conference to discuss the appellant's appeal will then be held with the student; Director of the Athletic Training Education Program; Head Athletic Trainer; members of the selection committee (including a student representative); and Chair, or Associate Chair of the School of Physical Education, Sport, and Exercise Science; and President of the Athletic Training Club. After hearing the student' appeal, a final discussion will be rendered and the appellant will be notified.

CLASS SCHEDULING

Course advisement will be handled through the Program Director. Athletic training students will be coded as athletes and will receive priority registration privileges. If there is a class/clinical assignment conflict, it must be resolved/cleared with the Program Director during the course pre-registration period.

Clinical Experience Expectations and Classroom Responsibilities

Students are expected to complete clinical responsibilities as they would in any professional responsibility. They should report on time and dressed appropriately (see <u>Appendix H</u> for the dress code). Academics are a priority of this program and students are expected to practice good time management skills to maintain a strong GPA. This involves balancing academics and clinical experiences. This also includes scheduling clinical experiences during the highest opportunity/volume for learning during approximately 20 hours/week of clinical experiences. In the event a student will not be able to report to their clinical experience because of a legitimate excuse, the student should promptly notify and discuss with their clinical instructor.

EDUCATIONAL REQUIREMENTS

Students in the BSU Athletic Training Education Program must complete the following courses in accordance with the guidelines described previously under academic information.

I.	Prerequisites	2 Hours	
	AT 196	(2)	Introduction to Athletic Training
II.	Required Courses	18 Hour	rs
	ANAT 201	(3)	Fundamentals of Mammalian Anatomy
			or
	EXSCI 292	(3)	Anatomy
	PHYSL 205	(3)	Fundamentals of Human Physiology
	EXSCI 294	(3)	Kinesiology
	AQUA 260	(2)	Emergency Response
	FCSFN 340	(3)	Principles of Human Nutrition
	EXSCI 493	(3)	Physiology of Exercise
	EXSCI 147	(1)	Weight Training

III. Athletic Training Core Courses 39 Hours

AT 340	(4)	Prevention and Care of Musculoskeletal Injuries
AT 370	(3)	Lower Extremity Orthopedic Evaluation in Athletic Training
AT 371	(3)	Upper Extremity Orthopedic Evaluation in Athletic Training
AT 372	(3)	Therapeutic Modalities in Athletic Training
AT 373	(3)	Therapeutic Exercise and Techniques in Athletic Training
AT 392	(3)	Practicum 1 in Athletic Training
AT 398	(1)	Applied Anatomy in Athletic Training
AT 477	(3)	Psychology of Injury Rehabilitation
AT 492	(3)	Practicum 2 in Athletic Training
AT 495	(3)	Medical Aspects of Sport and Physical Activity
AT 496	(1)	Clinical Experience in Athletic Training
AT 497	(2)	Current Concepts in Athletic Training
AT 498	(2)	Organization and Administration of Athletic Training
EXSCI 201	(3)	Introduction to Fitness Assessment
NUR 320	(2)	Pharmacotherapeutics

TOTAL 59 HOURS

IV. Recommended Electives

BIO 111	(4)	Principles of Biology 1
CHEM 101	(5)	General, Organic, and Biochemistry for the Health Sciences
HSC 465	(3)	Alcohol Problems
HSC 467	(3)	Drug Dependence and Abuse
PHYCS 110	(4)	General Physics 1
PSYSC 241	(3)	Elementary Statistics
FCSFN 444	(3)	Nutrition, Weight Control, and Exercise
EXSCI 320	(2)	Fundamentals of Resistance Training
EXSCI 329	(3)	Program Development/Fitness Assessment for Individuals with Disabilities
NUR 101	(2)	Terminology for Healthcare Professionals and Consumers

SUGGESTED TIME TABLE FOR COURSES

FALL EDECHMAN			<u>SPRING</u>		
FRESHMAN Course		Hrs.	Course		Hrs.
AT 196		2	EXSCI 292 or ANAT 201		3
Written communication	Tier 1	3	AQUA 260		2
Mathematics	Tier 1	3	Oral communication	Tier 1	2 3 3 3 3
Physical Wellness	Tier 1	2	History	Tier 1	3
Personal Finance	Tier 1	1	Fine Arts	Tier 1	3
Humanities	Tier 1	3	Natural Sciences	Tier 1	3
ELEC	~	2		~ · ·	
	Sub Total	16		Sub Total	17
<u>SOPHOMORE</u>					
Course		Hrs.	Course		Hrs.
AT 340		4	PHYSL 205		3
AT 370		3	EXSCI 294		3
Social Sciences	Tier 1	3	AT 371		3
Fine Arts/Design	Tier 2	3	EXSCI 147		1
Humanities	Tier 2	3	Natural Sciences	Tier 2	3
			Social Sciences	Tier 2	3
	Sub Total	16		Sub Total	16
JUNIOR					
Course		Hrs.	Course		Hrs.
FCSFN 340		3	AT 392		3
AT 398		1	AT 498		2 3
AT 372		3	AT 373		3
NUR 320		2	AT 477		3
EXSCI 201		3	ELEC		3
ELEC		3			
	Sub Total	15		Sub Total	14
<u>SENIOR</u>					
Course		Hrs.	Course		Hrs.
EXSCI 493		3	AT 492		3
AT 495		3	AT 497		2
AT 496		1	ELEC		11
ELEC		9			
	Sub Total	16		Sub Total	16

(*Note: AT 392 and 492 can be taken in either fall or spring semester)

REQUIREMENTS TO SIT FOR THE BOARD OF CERTIFICATION EXAMINATION

A goal of the BSU Athletic Training Education Program is for all students to sit for the BOC examination. This computer examination is comprised of multiple-choice and simulation questions.

For more information about the exam visit http://www.bocatc.org. For additional information on how to apply to take the exam visit http://www.act.org/actcenters/index.html. The Program Director in conjunction with the ATEP faculty and staff will judge whether it is appropriate for a student to take the exam. Although the Program Director will provide the endorsement for the vast majority of the students to take the exam, there may be cases in which taking the exam and possibly entering athletic training employment is not in the best interest of the student or the profession.

The following requirements must be met to become eligible for the BOC Examination:

- 1. Successful completion of the curriculum in the Ball State University Undergraduate Athletic Training Education Program.
- 2. Successful completion of all clinical proficiencies.
- 3. Successful completion of all semester-end evaluations.
- 4. In good standing in the BSU Athletic Training Education Program (not on probation).

SERVICE REQUIREMENT

The Athletic Training Education Program in the School of Physical Education, Sport, and Exercise Science, requires a service commitment of its students. By giving to the community throughout the athletic training student's professional preparation program, participation and leadership in this area is hoped to trigger a life-long commitment to volunteerism and community involvement. Each student is required to participate in a minimum of 1 community service project per year. For the fall semester, this will entail 6 hours of leaf-raking (proceeds from the customers will be given to the BSU Athletic Training Club). The leaf-raking service project will also entail simultaneously participating in an A-thon fundraiser (proceeds will support the annual athletic training student reception). Any student who does not meet this requirement (including not making all hours, not properly communicating when running late, or regarding missed hours) will have their grade in a relevant clinical course (e.g., 372, 496, 392/492) lowered by half a grade point.

PROGRAM AWARDS, SCHOLARSHIPS AND FINANCIAL AID

A variety of \$250-\$500 awards are available to students in the Athletic Training Education Program. They are presented at the annual spring banquet. See <u>Appendix I</u> for more information.

The National Athletic Trainers' Association offers several scholarships through the district and national offices. The student must have a 3.0 Grade Point Average and must be a student member of the National Athletic Trainers' Association to be eligible for all scholarships. There are approximately 70 scholarships available through the NATA and 3 from the Great Lakes Athletic Trainers' Association. The Mid-American Conference currently has two scholarships available to ATSs. Awards for these scholarships range from \$300 to \$2000. All ATSs who meet the criteria are encouraged to apply.

Ball State University offers students financial aid packages and grants through the Office of Student

Financial Assistance. Prospective students should contact this office for information and assistance from financial aid counselors. Types of financial aid available include: Pell Grants, Supplemental Educational Opportunity Grants, National Direct Student Loans, Guaranteed Student Loans, Veterans Benefits (for returning servicemen and women), and College Work-Study.

CLINICAL EDUCATION INFORMATION

The ATS is encouraged to become an integral part of athlete/patient care in all clinical education settings. Students should become involved in all facets of the health delivery system and become familiar with the complex roles of the athletic trainer. These roles include functioning in a multi disciplinary environment with a variety of health professionals. This role does NOT include transporting athletes to and from appointments with physicians, transporting equipment or coolers needed for clinical experiences, etc. The ATS should gain as much knowledge and experience as possible concerning injuries/conditions, athlete/patients, health care providers and administrative tasks in the different athletic training clinical settings while supervised by an ACI or CI.

Students should refrain from applying skills during their clinical experiences which have not first been instructed and evaluated by an ACI. This is to ensure the safety of the patient and protect the ATS. For example, a student is not to perform an ultrasound treatment on a patient until they have either successfully completed the proficiencies or until they have been evaluated by their ACI on this specific skill (see <u>Appendix E</u> for policy regarding therapeutic modalities/agents and therapeutic exercise techniques).

Students are only expected to complete an average of 20 hours/week of clinical experiences. More hours/week can be completed by the student on a voluntary basis, only. Students will be scheduled for their weekly hours by their clinical instructor. Students will also be required to complete "clinic" hours (part of the 20 hour/week expectation) during the morning (or as assigned) for treatment and rehabilitation of all injured athletes. Any student who does not meet this requirement (including not making all hours, not properly communicating when running late or regarding missed hours) will have their grade in a relevant clinical course (e.g., 372, 496, 392/492) lowered by half a grade point. Lastly, students are required to serve as a host for visiting athletic teams for two BSU Athletic events (two different sports). The policy mentioned above will apply when not fulfilling this requirement.

Another policy to ensure the safety of the patient and protect the ATS is the Infectious Illness Policy (see Appendix J). Students are to refrain from engaging in clinical experiences when they are ill.

CLINICAL EXPERIENCES

Students will engage in variety of clinical experiences/assignments with CI/ACI during their on-campus and off-campus clinical experiences during their tenure in the athletic training education program. Assignments to a CI/ACI are categorized based on exposure to medical conditions, upper extremity injuries, lower extremity injuries, and equipment intensive sports. These assignments will be distributed through individual and team sports, inseason/out-of-season sports, contact and non-contact sports, and men and women's sports. Further, each student will complete a clinical experience with football for at least one semester. Athletic training student clinical assignments will be made by the program director in consultation with the BSU clinical instructors. Student-athletes accepted into the program must complete one BSU sport assignment on a full-time basis each academic year. The majority of the clinical experiences will be completed in the afternoon during 1-6 PM. However, certain sports will practice either earlier or later than this time. Once a student is assigned to an approved clinical instructor/sport, they are to check with the ACI about the practice time for that sport.

During the first two semesters in the BSU Athletic Training Education Program students will engage in clinical experiences on campus. During the third and fourth semesters (second year) in the BSU Athletic Training Education Program students will engage in clinical experiences off campus at semester practicum (2 8-week rotations) in an area high school and in a comprehensive orthopedic/sports medicine primary care setting. During the third year in the athletic training education program, students will assume more clinical responsibilities (under the direct supervision/instruction of an ACI). Students will also complete an 8-week practicum rotation in an area rehabilitation clinic. The second 8-week rotation is selected by the student for placement with a high school, orthopedic, or physician-extender setting, or with a BSU team. Practicum's are primarily supervised by Approved Clinical Instructors (ACI) in those settings and guided by the program director. Students assigned to complete a practicum rotation in an off-campus clinic setting, should anticipate and expect ahead of time to complete immunizations, orientation, etc., for that setting. This information will be amply available ahead of time. Students who have not completed these requirements so that they begin the practicum rotation on time will be withdrawn from the practicum and will be re-assigned to complete it in the summer or another semester.

CLINICAL EXPERIENCE RESPONSIBILITIES

Once admitted into the athletic training education program, a student is assigned to a CI/ACI. Most clinical assignments will have a minimum of 2 athletic training students. Typically, one will be an upper division student and one will be a lower division student. We expect that both students will work closely together. Further, we expect the upper division student to share knowledge and experience and mentor the lower division student.

The purpose of the clinical assignment is to provide the student with opportunities to practice and master clinical skills and with experiences in the comprehensive health care of athletes. Students will assist in tasks concerning injury prevention, evaluation and care of injuries, and design and implement rehabilitation and reconditioning procedures - all under the supervision of the clinical instructor.

The ATS should adhere to the following guidelines when assigned to a CI/ACI:

- 1. Inform athletic training staff of all serious injuries or emergency situations when they occur.
- 2. Consult with the athletic training staff on the evaluation, treatment, care and rehabilitation of significant injuries.
- 3. Assist the CI/ACI in documentation and keeping all injury records current and complete.
- 4. Never get into a confrontation with a coach or administrator about an athlete's status. Inform the athletic training staff about the problem and let them handle the situation.
- 5. You must submit clinical education experience update reports approximately every 3 weeks. Update reports can be found on the "Athletic Training Education Program" Blackboard site (*Students > Clinical Documents > Clinical Experience Update Reports and Related Forms > Select your course*). You should retain a copy of these reports in cases of transaction errors.
- 6. Your update report will be shared with your ACI and lab instructor and promptly discussed with you. If you have confidential information you would like to share with the Program Director regarding your clinical experiences, please access http://www.bsu.edu/web/at/conf.html. Clarification and resolution of any issues or matters will be carefully and discretely addressed.

STUDENT EVALUATION

Clinical instructors will evaluate student's clinical performance at the middle of the semester and at the completion of each semester, including on objectives tied to their clinical course. Further evaluations will be based on the student's academic progress and completion of clinical proficiencies. For seniors in their last semester of the program, the clinical proficiency matrix is to be completely updated by Monday of the last week of regularly scheduled classes so to be audited by Dr. Walker. Any senior student who does not update the matrix by this time

will have their grade lowered by half a grade point in a relevant clinical course. All other students must have the matrix completely updated by Friday of the last week of classes to be audited by Dr. Walker.. Any student who does not update the matrix by this time will have their grade lowered by half a grade point in a relevant clinical course. The corresponding clinical proficiency manual will guide you in documenting your completed clinical proficiencies. This manual should be with you at all times during your clinical education experiences. For seniors in their last semester of the program, this manual is due to Dr. Walker (for her to audit completion of the clinical proficiencies) on Monday of the last week of regularly scheduled classes. Any senior student who does not submit the manual by this time will have their grade lowered by half a grade point in a relevant clinical course. The assigned approved clinical instructor, the student and the program director will meet face to face at the end of each semester to discuss the students' evaluation and advancement in the educational program as outlined in the retention procedures. In addition, the student will self-evaluate each mid-semester as well as evaluate their approved clinical instructor and clinical experience setting at the end of each semester.

Semester-End Clinical Proficiency Evaluations

At the end of each semester, students will complete a clinical proficiency evaluation. The semester-end clinical proficiency evaluations are supportive in nature. The purpose of this evaluation is to determine if students are learning and retaining appropriate skills and knowledge for the student's level in the program. The evaluation will also provide students with additional opportunities to practice the presentation of their skills prior to the BOC Exam. Any student who does not follow-through with their semester-end clinical proficiency exam (either making an appointment with the ACI or showing up for that appointment or submitting confirmation copies of the completed exams during the specified time frame) will have their grade lowered by half a grade in this course. Also, if an appointment is not made or kept or the confirmation copies of the completed exams are not submitted during the announced time frame, the student will be suspended from their clinical experiences until such time the student satisfies these requirements.

Using each student's BSU Clinical Proficiency Manual, one previously completed proficiency will be selected at random within each domain/course for each student. Students are scored according to the scale on each clinical proficiency. Any failed clinical proficiency must be re-taken. Results of the semester-end clinical proficiency exams, along with mid-semester and semester-end evaluations completed by the student's clinical instructor(s), will be used regarding retention decisions regarding the clinical portion in the BSU Athletic Training Education Program. Failure to schedule and complete these exams will result in probation. Semester-end evaluations are optional for those who have passed the BOC examination. Graduating seniors who fail to complete this requirement will not be cleared for graduation, receive their NATA Program completion certificate, or approval regarding the BOC exam.

These evaluations are organized by 3 levels - beginning, intermediate, advanced and assigned by semesters of clinical experience and classes completed in the program.

Beginning (1st and 2nd semester students) {AT 196, 340, 370, 371, EXSCI 147, AQUA 260} Risk Management & Injury Prevention Assessment & Evaluation Acute Care of Injury & Illness

Intermediate (3rd and 4th semester students) {AT 372, 373, 498, NUR 320, FCSFN 340} Pharmacology Therapeutic Modalities

Therapeutic Exercise Nutritional Aspects of Injuries & Illnesses Psycho Social Intervention & Referral

Advanced (5th and 6th semester students) {AT 495} Health Care Administration Professional development & responsibilities General Medical Conditions & Disabilities

BALL STATE ATHLETIC TRAINING BLOODBORNE PATHOGENS POLICY and BIOHAZARDOUS GUIDELINES

Due to risk of potential exposure to blood and other infectious materials, it is the policy of the Athletic Training Staff to give each student enrolled within the BSU Athletic Training Education Program a pocket mask and formal instruction in Universal Precautions, according to the recommendations from the Center for Disease Control. This formal instruction will be provided in the classroom as part of the athletic training educational program, and additionally be provided in a mandatory annual training program by the BSU Athletic Training Education Program. Formal instruction in Universal Precautions includes: Disposal of needles, and other sharp instruments; hand washing; cleaning, disinfecting, and sterilizing; cleaning and decontaminating blood spills, laundry; disposal of infective waste; use of disposable gloves, masks, eyewear, and gowns, and resuscitation equipment.

The University Health Center will provide, at the student's expense, Hepatitis B Vaccinations. The vaccine is given by injection on three separate dates. Usually, the first two are given 1 month apart, and the third dose is administered 5 months after the second. After these three doses, the Hepatitis B vaccine is 85-95% effective in preventing Hepatitis B infection in those whom receive the vaccinations. Those students who are not immunized must sign a Hepatitis B Immunization Waiver (Appendix K) on an annual basis.

BSU BIOHAZARDOUS GUIDELINES

Strictly adhere to the guidelines and procedures for disposing of BIOHAZARDOUS waste materials for each clinical setting. BIOHAZARDOUS waste receptacles and sharp's boxes are located in all the BSU athletic training rooms. Latex gloves are available for use. It is expected that rubber gloves are utilized when evaluating or treating open wounds, which may involve blood or other body fluids.

Disposal Guidelines

Materials contaminated by blood, body fluids, exudate, or other infectious substances are to be disposed in the covered waste receptacles lined with biohazard bags. These waste receptacles are located in each of the athletic training rooms. The following items should be disposed of in the BIOHAZARDOUS waste receptacles: gauze wound dressings, latex gloves or other materials that have been contaminated with body fluids.

Scalpels, blades or other sharp objects contaminated with blood, body fluids, exudates, or other infectious agents should be disposed of in the sharp's box located in each athletic training room. Disposable scalpels are available for use.

Laundry (towels) that have been exposed to blood or body fluids, no matter how minimal, should be placed in a separate laundry bag and taken to the laundry room. Wear latex gloves when carrying this bag. Notify the

laundry room attendant about the contaminated towels and instruct that they should be washed separately in HOT WATER.

Notify the staff athletic trainer immediately when the BIOHAZARDOUS bag or sharp's box are full. Appropriate personnel at the physical plant will be notified to pick-up, transport and disposed these materials.

Information

For further information and clarification, speak to the program director or approved clinical instructors.

APPENDIX A – CLINICAL EDUCATION TERMINOLOGY AND DEFINITIONS

CAATE Clinical Education Terminology

Abbreviations

ACI: Approved Clinical Instructor

CI: Clinical Instructor

CIE: Clinical Instructor Educator **ATS:** Athletic Training Student

Ability to Intervene	The CI or ACI is within the immediate physical vicinity and interact with the ATS on a regular and consistent basis in order to provide direction and correct inappropriate actions. The same as being "physically present."
Academic Catalog/Bulletin	The official publication of the institution that describes the academic programs offered by the institution. This may be published electronically and/or in paper format.
Academic Plan	The plan that encompasses all aspects of the student's academic classroom and clinical experiences.
Adequate	Allows for the delivery of student education that does not negatively impact the quality or quantity of the education. Same as sufficient.
Administrative Support Staff	Professional clerical and administrative personnel provided by the sponsoring institution. Professional clerical personnel may be supplemented, but not replaced, by student assistants.
Affiliate (Affiliated Setting)	Institutions, clinics, or other health settings not under the authority of the sponsoring institution but that are used by the ATEP for clinical experiences.
Affiliation Agreement	A formal, written document signed by administrative personnel, who have the authority to act on behalf of the institution or affiliate, from the sponsoring institution and affiliated site. Same as the memorandum of understanding.
Allied Health Care Personnel	Physician Assistants, physical therapists, registered nurses, doctors of dental surgery, and other health care professionals, recognized by the AMA/AOA as allied health professionals, who are involved in direct patient care and are used in the classroom and clinical education portions of the ATEP. These individuals may or may not hold formal appointments to the instructional faculty. Same as other health care professionals.

Approved Clinical Instructor (ACI)	An appropriately credentialed professional identified and trained by the program CIE to provide instruction and evaluation of the Athletic Training Educational
	Competencies and/or Clinical Proficiencies. The ACI may not be a current student within the ATEP.
ATEP	Athletic Training Education Program.
ATEP Faculty	BOC Certified Athletic Trainers and other faculty who are responsible for classroom or sponsoring institution clinical instruction in the athletic training major.

Athletic Training Facility/Clinic Athletic Training Student (ATS)	The facility designated as the primary site for the preparation, treatment, and rehabilitation of athletes and those involved in physical activity. A student enrolled in the athletic training major or graduate major equivalent.
Athletic Training Student	those involved in physical activity. A student enrolled in the athletic training major or
	A student enrolled in the athletic training major or
	e v
(ATS)	graduate major equivalent.
Clinical Coordinator	The individual a program may designate as having the primary responsibilities for the coordination of the clinical experience activities associated with the ATEP. The clinical coordinator position is currently recommended, but not required by the Standards.
Clinical Education	The application of knowledge and skills, learned in classroom and laboratory settings, to actual practice on patients under the supervision of an ACI/CI.
Clinical Experiences	Those clinical education experiences for the Athletic Training Student that involve patient care and the application of athletic training skills under the supervision of a qualified instructor.
Clinical Instruction Site	The location in which an ACI or CI interacts with the ATS for clinical experiences. If the site is not in geographical proximity to the ATEP, then there must be annual review and documentation that the remote clinical site meets all educational requirements.
Clinical Instructor (CI)	An individual identified to provide supervision of athletic training students during their clinical experience. An ACI may be a CI. The ACI may not be a current student within the ATEP.
Clinical Instructor	The BOC Certified Athletic Trainer recognized by the
Educator (CIE)	institution as the individual responsible for ACI training.
` ,	If more than one individual is recognized as a CIE for an ATEP, then at least one of those individuals must be a BOC Certified Athletic Trainer.
Clinical Plan	The plan that encompasses all aspects of the clinical education and clinical experiences.

Clinical Ratio	The ratio of ACI or CI to the number of athletic training students. The ratio is calculated for all students assigned to the instructor for the length of the experience or academic term. The ratio must not exceed eight students per instructor. If directed observation students are providing direct patient care or require supervision they must be included in this ratio.
Communicable Disease Policy	A policy, developed by the ATEP, consistent with the recommendations developed for other allied health professionals, that delineates the access and delimitations
	of students infected with communicable diseases. Policy guidelines are available through the CDC
Contemporary Instructional Aid	Instructional aids used by faculty and students including, but not limited to, computer software, AED trainers, and Epi-Pen trainers.
Contemporary Information Formats	Information formats used by faculty and students including electronic databases, electronic journals, digital audio/video, and computer software.
Didactic Instruction	See: Formal classroom and laboratory instruction.
Direct Patient Care	The application of professional knowledge and skills in the provision of health care.
Direct Supervision	Supervision of the athletic training student during clinical experience. The ACI and or CI must be physically present and have the ability to intervene on behalf of the athletic training student and the patient.
Directed Observation Athletic Training Student	A student who may be present in an athletic training facility, but not necessarily enrolled in the athletic training major, who is required to observe the practices of a Certified Athletic Trainer. This student may not provide
Distance Education	Classroom and laboratory instruction accomplished with electronic media with the primary instructor at one institution and students at that institution and additional locations. Instruction may be via the internet, telecommunication, video link, or other electronic media. Distance education does not include clinical education or the participation in clinical experiences. Same as remote education.
Equitable	Not exact but can be documented as comparable with other similar situations or resources.

Expanded Subject Area	Subject matter that should constitute the academic "core" of the curriculum. It must include, but not be limited to the following areas: assessment of injury/illness, exercise physiology, first aid and emergency care, general medical conditions and disabilities, health care administration, human anatomy, human physiology, kinesiology/biomechanics, medial ethics and legal issues, nutrition, pathology of injury/illness, pharmacology, professional development and responsibilities, psychosocial intervention and referral, risk management and injury/illness prevention, strength training and reconditioning, statistics and research design, therapeutic exercise and rehabilitative techniques, therapeutic modalities, weight management and body composition.
Formal Instruction	Teaching of required competencies and proficiencies with instructional emphasis in structured classroom and laboratory environment(s). Same as didactic instruction.
Full-time Faculty	Recognized by the sponsoring institution as a full-time member of the faculty with all responsibilities and voting privileges as other designated full-time faculty and documented in institutional faculty delineations.
Funding Opportunities	Opportunities for which students may participate for reimbursement, but that do not require the students to utilize athletic training skills, to replace qualified staff, and are not required of the academic program.
General Medical Experience	Clinical experience that involves observation and interaction with physicians, nurse practitioners, and/or physician assistants where the majority of the experience involves general medical topics as those defined by the Athletic Training Educational Competencies.
Geographic Proximity	Within a vicinity to allow for annual inspection, review, and documentation of meeting all academic requirements by the ATEP faculty/staff.
Learning Over Time (Mastery of Skills)	The process by which professional knowledge and skills are learned and evaluated. This process involves the initial formal instruction and evaluation of that knowledge and skill, followed by a time of sufficient length to allow for practice and internalization of the information/skill, and then a subsequent re-evaluation of that information/skill in a clinical (actual or simulated) setting.
Major	In documents of the institution (catalogue, web pages, etc.) where majors are listed, athletic training must be listed as a major. The designation as a major must be consistent with institutional and system wide requirements.

Master Plan	The plan of the ATEP that encompasses all aspects of student education and learning in both the clinical and didactic settings.
Medical Director Memorandum of Understanding	The physician (MD or DO) who serves as a resource for the programs director and ATEP faculty regarding the medical content of the curriculum. The Medical Director may also be the team physician; however, there is no requirement for the Medical Director to participate in clinical education. See: Affiliation agreement.
Other Health Care Personnel	See: Allied health care personnel.
Outcome Assessment Instruments	The instruments used for program evaluations that are designed to collect data and feedback in regard to outcomes that relate to the ATEP mission, goals, and objectives of the program. Instruments also must be designed to collect data and feedback in regard to the effectiveness of program instruction relative to the Athletic Training Educational Competencies.
Outcomes	The effect that the ATEP has on the preparation of students as entry-level athletic trainers and the effectiveness of the program to meet its mission, goals, and objectives.
Physical Examination	An examination performed by an appropriate health care provider (MD,DO, PA, NP) to verify that the student is able to meet the physical and mental requirements (i.e., technical standards) with or without reasonable accommodation as defined by the ADA.
Physically Interact	See: Ability to intervene and physically present.
Physically Present	See: Ability to intervene.
Physician	A Medical Doctor (MD) as defined by the American Medical Association or a Doctor of Osteopathic Medicine (DO) as defined by the American Osteopathic Association.
Pre-Professional Student	A student who has not yet been admitted formally into the ATEP. May be required to participate in non-patient activities as described by the term Directed Observation Athletic Training Student.

Professional Development	Continuing education opportunities and professional
	enhancement, typically is offered through the participation
	in symposia, conferences, and in-services that allow for
	the continuation of eligibility for professional credentials.
Program Director	The full-time faculty member of the host institution and a
	BOC Certified Athletic Trainer responsible for the
	administration and implementation of the ATEP.
Remote Education	See Distance education.
Control 187	W-lands a stickle setal of the access delicited
Service Work	Volunteer activities outside of the required clinical
	experiences (e.g., Special Olympics, State Games). If
	athletic training skills are part of this service work, then
	they must be supervised in those activities.
Sponsoring Institution	The college or university that awards the degree associated
	with the ATEP and offers the academic program in
	Athletic Training.
Sufficient	See: Adequate.
	-
Team Physician	The physician (MD or DO) responsible for the provision
	of health care services for the student athlete. S/he may
	also be the medical director; however, this is not required
	by the Standards.
Technical Standards	The physical and mental skills and abilities of a student
	needed to fulfill the academic and clinical requirements of
	the ATEP. The standards promote compliance with the
	Americans with Disabilities Act (ADA) and must be
	reviewed by institutional legal counsel.
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APPENDIX B – NATA CODE OF ETHICS

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.

PRINCIPLE 1:

Members shall respect the rights, welfare and dignity of all.

- 1.1 Members shall not discriminate against any legally protected class.
- 1.2 Members shall be committed to providing competent care.
- 1.3 Members shall preserve the confidentiality of privileged information and shall not release such information to a third party not involved in the patient's care without a release unless required by law.

PRINCIPLE 2:

Members shall comply with the laws and regulations governing the practice of athletic training.

- 2.1 Members shall comply with applicable local, state, and federal laws and institutional guidelines.
- 2.2 Members shall be familiar with and abide by all National Athletic Trainers' Association standards, rules and regulations.
- 2.3 Members shall report illegal or unethical practices related to athletic training to the appropriate person or authority.
- 2.4 Members shall avoid substance abuse and, when necessary, seek rehabilitation for chemical dependency.

PRINCIPLE 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 their practice acts and other pertinent regulation.
- 3.3 Members shall provide services, make referrals, and seek compensation only for those services that are necessary.
- 3.4 Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge.

- 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 should maintain and promote ethical conduct in research and educational activities.

PRINCIPLE 4:

Members shall not engage in conduct that could be construed as a conflict of interest or that reflects negatively on the profession.

- 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 National Athletic Trainers' Association current or past volunteer leaders 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 to influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.

APPENDIX C - COMPETENCIES AND CLINICAL PROFICIENCIES IN ATHLETIC TRAINING

This text can be purchased through www.nataec.org and provides a comprehensive listing of competencies and clinical proficiencies required of the entry-level athletic trainer.

See below for general explanations.

Preface

This document is intended to assist educational program directors, physicians, clinical instructors, allied health practitioners, administrators, additional instructional personnel, and students in identifying the knowledge and skills to be mastered within an entry-level athletic training educational program. The National Athletic Trainers' Association Education Council has identified the athletic training educational competencies and clinical proficiencies for the health care of athletes and others involved in physical activity enumerated in this document as those necessary for effective performance as an entry-level certified athletic trainer. The NATA requires that these Competencies be used for curriculum development and education of the student enrolled in a Commission on Accreditation of Athletic Training Education (CAATE) accredited entry-level athletic training educational program. They also serve as a guide for the development of educational programs and learning experiences leading to eligibility to challenge the BOC, Inc. examination.

ATCs and other instructional personnel at institutions sponsoring athletic training educational programs should use this document as a guide when structuring the clinical education experience for their students. Students preparing for careers in athletic training should find the list of competencies helpful as a self-study guide to evaluate their strengths and areas for improvement.

The Competencies included in this document are categorized according to the twelve content areas that comprise the role of the certified athletic trainer in the health care of athletes and others involved in physical activity. The Competencies identified within each domain are further categorized according to the following method of classifying behavioral objectives.

- (1) Cognitive Domain (knowledge and intellectual skills)
- (2) Psychomotor Domain (manipulative and motor skills)
- (3) Affective Domain (attitudes and values)
- (4) Clinical Proficiencies (decision-making and skill application)

Risk Management and Injury Prevention

This content area is a collection of knowledge, skills, and values that the entry-level certified athletic trainer must possess to identify injury and illness risk factors that may be encountered by athletes and other involved in physical activity and to plan and implement a risk management and prevention program.

Pathology of Injuries and Illnesses

This content area is a collection of knowledge and values that the entry-level certified athletic trainer must possess to understand the physiological responses of human growth and development and the progression of injuries, illnesses, and diseases.

Assessment and Evaluation

This content area is a collection of the knowledge, skills, and values that the entry-level certified athletic trainer must possess to assess the injuries and illnesses of athletes and others involved in physical activity and to determine proper care, referring the client to other health care providers when appropriate.

Acute Care of Injury and Illness

This content area is a collection of the knowledge, skills, and values that the entry-level certified athletic trainer must possess to recognize, assess, and treat the acute injuries and illnesses of athletes and other involved in physical activity and to provide appropriate medical referral.

Pharmacology

This content area is a collection of the knowledge, skills, and values that the entry-level certified athletic trainer must possess in pharmacologic applications, including awareness of the indications, contraindications, precautions, and interactions of medications and of the governing regulations relevant to the treatment of injuries to and illnesses of athletes and other involved in physical activity.

Therapeutic Modalities

This content area is a collection of the knowledge, skills, and values that the entry-level certified athletic trainer must possess to plan, implement, document, and evaluate the efficacy of therapeutic modalities in the treatment of injuries to and illnesses of athletes and others involved in physical activity.

Therapeutic Exercise

This content area is a collection of the knowledge, skills, and values that the entry-level certified athletic trainer must possess to plan, implement, document, and evaluate the efficacy of therapeutic exercise programs for the rehabilitation and reconditioning of the injuries and illnesses of athletes and others involved in physical activity.

General Medical Conditions and Disabilities

This content area is a collection of the knowledge, skills, and values that the entry-level certified athletic trainer must possess to recognize, treat, and refer, when appropriate, the general medical conditions and disabilities of athletes and others involved in physical activity.

Nutritional Aspects of Injuries and Illnesses

This content area is a collection of the knowledge, skills, and values that the entry-level certified athletic trainer must possess to understand and recognize the nutritional aspects of athletics and physical activity and to refer, when appropriate.

Psychosocial Intervention and Referral

This content area is a collection of the knowledge, skills, and values that the entry-level certified athletic trainer must possess to recognize, intervene, and refer when appropriate, the sociocultural, mental, emotional, and physical behaviors of athletes and others involved in physical activity.

Health Care Administration

This content area is a collection of the knowledge, skills, and values that the entry-level certified athletic trainer must possess to develop, administer, and manage a health care facility and associated venues that provide health care to athletes and others involved in physical activity.

Professional Development and Responsibilities

This content area is a collection of the knowledge, skills, and values that the entry-level certified athletic trainer must possess to understand professional responsibilities, avenues of professional development, and national and state regulatory agencies and standards in order to promote athletic training as a professional discipline and to educate athletes, students of athletic training, the general public, the physically active, and associated individuals.

APPENDIX D – EMERGENCY ACTION PLAN

Emergency Action Plan Orientation Checklist

	Review this checklist with your clinical instru	ctor/supervising ATC and return to the Program Director	
Venu	ue location(s):		
the in		dent (ATS) and the Clinical Instructor (CI) acknowledge that reviewed and the ATS is familiar with the location of associated with the venue(s).	
1.	The ATS has reviewed the Emergency Act questions regarding the plan.	on Plan for this venue(s) and has had the opportunity to ask	
2.	The ATS has been instructed in the use of p with this venue(s)	phones, radios, or other communication devices associated	
3.	The ATS has been instructed on appropriat	e emergency phone numbers associated with this venue(s)	
4.	The ATS has been instructed on the chain ovenue(s)	of responsibility associated with the personnel working at this	
5.	The ATS has been given the opportunity to revue and become familiar with the first aid and emergency equipment associated with this venue(s)		
6.	The ATS has been shown the location of the AED (if any), and is familiar with the personnel certified in its use.		
7.	The ATS has been advised of appropriate procedures (and location of supplies—e.g., face mask, gloves) regarding the cleaning-up of blood and body fluids, safety considerations regarding their handling, and the procedures for reporting any exposures to such fluids.		
Athl	etic Training Student	Date:	
Clini	cal Instructor	Date	

APPENDIX E – THERAPEUTIC MODALITIES/AGENTS AND THERAPEUTIC EXERCISE/TECHNIQUES POLICY

Ball State University Athletic Training Education Program Policy Regarding Use of Therapeutic Modalities/Agents and Therapeutic Exercise/Techniques

The purpose of this policy is to safeguard the health of the athlete/patient. Further, this policy is intended to ensure that ATSs are competent in applying therapeutic modalities/agents and exercise/techniques prior to using them with athletes/patients.

- 1. Athletic training students wishing to apply therapeutic modalities/agents or exercise/techniques prior to formal completion of relevant courses must complete a 5 10 minute oral/practical clinical competency exam with an Approved Clinical Instructor (ACI) regarding the application of infrared agents (e.g., hot packs, whirlpools), common nerve and muscle stimulating currents, ultrasound, common strengthening/stretching exercise, and common therapeutic techniques (e.g., massage). No modality/agent or therapeutic exercise/technique may be applied by an ATS prior to successful completion of a competency exam.
- 2. Clinical competency will be demonstrated by the following:
 - a. The ATS will be knowledgeable about the basic physiological effects, indications, contraindications and safety/precautions associated with the common therapeutic modality/agents and therapeutic exercise/techniques.
 - b. The student will properly apply common therapeutic modalities/agents and therapeutic exercise/techniques.
- 3. This policy will primarily apply to ATSs who have not yet completed AT 372--Therapeutic Modalities in Athletic Training or AT 373—Therapeutic Exercise and Techniques in Athletic Training. Students in these classes will later demonstrate clinical proficiency as part of the course/lab requirements. Any ATS, who has completed a competency exam, the Therapeutic Modalities in Athletic Training course, or Therapeutic Exercise and Techniques in Athletic Training but begins to inappropriately apply a therapeutic modality/agent or therapeutic exercise/technique, may be requested to again complete a clinical competency exam.
- 4. The student will arrange to complete a clinical competency exam with an ACI.
- 5. Record of completion of a clinical competency exam will be noted in the student's clinical proficiency manual.
- 6. Athletic training students may not initiate the use of a therapeutic modality or therapeutic exercise/technique as part of an athlete's/patient's treatment plan. Athletic training students who have successfully completed the clinical competency exam will be permitted to apply the therapeutic modality or exercise/technique only after it has been initiated by a clinical instructor and only under direct supervision.
- 7. Failure to comply with this policy will be considered as professional misconduct and grounds for probation in the Athletic Training Education Program.

APPENDIX F – CLINICAL EDUCATION SUPERVISION POLICY

Ball State University Athletic Training Education Program Clinical Education Supervision Policy

Clinical Experience Supervision

Direct supervision of athletic training students must take place during all clinical experiences under the direction of an Approved Clinical Instructor (ACI) or Clinical Instructor (CI). The ACI/CI, who plans, directs, advises, and evaluates the students' athletic training clinical experience must consistently and physically interact with the athletic training student at the site of the clinical experience. The ACI/CI must be physically present to intervene on behalf of the patient and to provide consistent education. Communication via a Walkie-Talkie or cellular telephone does not constitute appropriate supervision. An unsupervised student is not considered to be completing clinical experience. It is recommended that an unsupervised student should restrict their duties to that of a First Aider.

Clinical Education Supervision

Clinical education applies to the instruction and evaluation of the clinical proficiencies by an ACI. Constant visual and auditory interaction between the student and the ACI must be maintained. The ACI shall be physically present for proficiency instruction and evaluation.

APPENDIX G - TECHNICAL STANDARDS POLICY

BALL STATE UNIVERSITY Athletic Training Education Program

Technical Standards Policy for Admission and Retention Consideration

I. Overview

The Athletic Training Educational Program at Ball State University is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The technical standards set forth by the Athletic Training Educational 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 Allied Health Education Programs [CAAHEP]).

II. Admission/Retention Requirements

The following abilities and expectations must be satisfied by all students admitted to the Athletic Training Educational Program. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not be retained in the program. Compliance with the program's technical standards does not guarantee students eligibility for the BOC athletic trainer certification exam.

Candidates for retention in the Athletic Training Educational Program must demonstrate:

- 1. 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.
- 2. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients.
- 3. 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.
- 4. The ability to record the physical examination results and a treatment plan clearly and accurately.
- 5. The capacity to maintain composure and continue to function well during periods of high stress.
- 6. The perseverance, diligence and commitment to complete the BSU Athletic Training Education Program as outlined and sequenced.
- 7. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
- 8. Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

Student compliance with these standards will be assessed through the midterm and final clinical performance evaluations completed by the student's clinical instructors. Along with the clinical performance assessments in the areas of knowledge, general skills and duties, administration tasks, general quality, the technical standards will be evaluated as follows:

Rate the following from 1 to 5

1 = Unacceptable 2 = Improvement needed 3 = Satisfactory 4 = Good 5 = Outstanding

- a. Mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve.
- b. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations.
- c. Ability to communicate effectively and sensitively with patients and colleagues.
- d. Ability to record the physical examination results and a treatment plan clearly and accurately.
- e. Capacity to maintain composure and continue to function well during periods of high stress.
- f. Perseverance, diligence and commitment to complete the athletic training educational program.
- g. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
- h. Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

III. Student and Health Care Provider Verification

Candidates for selection to the athletic training educational program will be required to verify they understand these technical standards. If a student or the program later identifies actual or potential mental, psychological, or physical difficulties in meeting the standards established for the program, the student, with assistance from the office of disabled Student Development, will consult health care providers who are capable of determining the implications of such difficulties on completing the program. The program's selection committee, in conjunction with the Office of Disabled Student Development, will use this information to determine if the student can meet the technical standards with reasonable accommodation; this review will take into account whether accommodation would jeopardize clinician/patient safety, or the educational process of the student or the institution, including all course work, clinical experiences and internships deemed essential to graduation. At time of admission to Ball State, students must possess a history of immunizations for measles, mumps, rubella, tetanus, and diphtheria. Immunization for hepatitis B is recommended.

IV. Certification

	ne time of formal application to the proferstanding.	essional program, the student will re	ead and sign a statement of
they prog	tify that I have read and understand the must be satisfied in this educational param based on a disability, I will melopment for review of that request."	program. If I need an adaptation or	r accommodation for this
Signature of Applicant		Date	
Printed Name of Applicant		BSU ID Number	
,	e: The student must inform the Program bility to meet the technical standards)	n Director of any changes in health	status which may impact
Phys 1. 2.	That applicant can meet the general is to reach heights ranging from the examining a patient) of the technical I have reviewed the applicant's imm	head of someone sitting down to standards, with or without accomm	the floor (for purposes o modations:
Physician's Signature		Date	

APPENDIX H – DRESS CODE POLICY

Ball State University Athletic Training Dress Code Guidelines

- 1. Ball State University Athletic Training shirt or one of Ball State athletic team shirts
- 2. Hats only allowed at outdoor practices, not in the Athletic Training Room
- 3. No jeans, jean shorts, or sweat pants allowed at any time
- 4. No clothes with **ANOTHER** school's name on them
- 5. No body piercing jewelry
- 6. No facial hair
- 7. Tennis shoes must be worn
- 8. Athletic Training Staff Polo must be worn during morning hours
- 9. Shirts must be tucked in at all times!

APPENDIX I - ATHLETIC TRAINING STUDENT AWARDS

A variety of \$250-\$500 awards are available to students in the Athletic Training Education Program. They are presented at the annual spring banquet. Below is listed the title, monetary amount, and selection criteria for each award.

James C. Dickerson Outstanding Senior Award

Out standing graduating senior who epitomizes the strong potential to represent Ball State University and the field of athletic training with pride and excellence throughout his/her career. This student will continue to be an ambassador of Ball State University and the profession of athletic training. A monetary award of \$250 is given.

*Staff voting

Rex L. Sharp Professional Dedication Award

Epitomizes the student that continually displays and implements those efforts necessary to be a professional in the field of athletic training. The award is given for dedication, knowledge, leadership, and commitment toward a career as a certified athletic trainer. A monetary award of \$250 is given.

*Staff voting

Richard L. Hoover Cardinal Athletic Training Student Award

Award based on an application process which includes a written essay, academic achievement, and clinical skills which best exemplify the Ball State University Athletic Training Education Program. A monetary award of \$250 is given.

*Application - staff voting

Professional Promise Award

Award given to the ATS who has shown the most progress towards professionalism during his/her time in the program including issues such as skills, academics, dedication, and professionalism.

*Staff voting

Sayers "Bud" Miller Inspirational Award

Award to the ATS who goes above and beyond what is asked of him/her and who volunteer's him/herself to causes inside and outside of the athletic training profession. This award is given to the ATS who displays enthusiasm, charisma, and instills the love of the profession of athletic training in his/herself and those around him/her.

*Staff voting

Most Valuable Athletic Training Student Award

Award given by fellow ATSs to the person who has provided outstanding leadership in the BSU Athletic Training Education Program and has handled the daily riggers of an ATS with poise, integrity, and professionalism.

*Student voting

Rookie Athletic Training Student Award

Award given to the person who has best exemplified the role of a Ball State ATS during their first year in the athletic training education program. This person demonstrates the potential to become an exceptional athletic training professional.

*Staff voting

Andy Weidner Memorial Award

Awarded to the student who exemplifies the two traits Andy is best remembered for: humor and work ethic. This person demonstrates academic excellence, discipline, integrity, and self-direction while maintaining a healthy perspective about laughter, family, and friends.

- *Full-time staff selection
- *\$500 monetary award
- *Open to graduate assistants

Matthew B. Roush, M.D. Memorial Scholarship

Dedicated to the memory of Dr. Roush, this scholarship is given to a Ball State University senior student or graduate assistant who is pursuing a career in sports medicine. It recognizes a person who will be dedicated to life long learning and becoming an exceptional educator. The student should epitomize those cornerstone qualities exhibited by Dr. Roush. These include kindness, compassion, and selflessness. It honors the exceptional person who makes up the health care professional. This memorial scholarship helps us all to remember the man who had a big smile and an even bigger handshake.

APPENDIX J – INFECTIOUS ILLNESS POLICY

Ball State University Athletic Training Education Program Infectious Disease Policy

Athletic training students have a small but real health risk during their clinical experiences. They frequently come into contact with patients/athletes who are ill with potentially infectious diseases, and they often are required to tape or bandage wounds that present the potential for contact with blood borne pathogens. In addition, athletic training students who are ill with an infectious disease may present a health risk to patients/athletes. The Ball State University Athletic Training Education Program (ATEP) aspires to prevent disease exposure to staff, athletic training students, and patients/athletes.

Athletic training students must use universal precautions to limit the exposure to blood borne pathogens. OSHA blood borne pathogen training (or other acceptable training) for medical workers will be conducted annually for athletic training students in the fall. Institutional and program infection control policies will also be reviewed at this time.

Hepatitis B vaccinations will be made available through the student health service at a reasonable cost to the athletic training students.

Athletic training students must realize that ill health care workers present some risk to the patients/athletes they treat and with whom they come in contact. To limit this risk, the following steps will be followed:

1. If an athletic training student is ill, the student will be examined by a physician (or other licensed health care provider) of his/her choice. The physician will determine the appropriate treatment and the amount of time the student will be absent (if applicable) from clinical experiences.

The Center for Disease Control (CDC) provides specific guidelines for reporting communicable and infectious diseases (see table 3 from the CDC web page http://www.cdc.gov/ncidod/dhqp/pdf/guidelines/InfectControl98.pdf). These guidelines are designed to provide for the uniform reporting of diseases of public health importance within the community, in order that appropriate control measures may be instituted to interrupt the transmission of disease, and will be followed by the BSU Athletic Training Education Program.

- 2. If it is determined that the athletic training student may have a potentially infectious disease, he/she will be asked to relate that information to their clinical instructor and the ATEP Program Director before their next scheduled clinical experience time.
- 3. The ATEP Program Director, in consultation with the ATEP Medical Director, will determine if the athletic training student requires further physician (or other related licensed health care provider) consultation/examination before he/she returns to their clinical experiences. The physician may schedule an examination, bar the athletic training student from reporting to their clinical setting, or permit the athletic training student to report back to their clinical setting.
- 4. Staff clinical supervisors may require that an athletic training student who appears ill, be examined by either a physician (or other licensed health care provider) of the athletic training students choosing.

5. A physician (or licensed health care provider) must examine athletic training students who miss any clinical experience time due to infectious illness before they are allowed to resume their clinical experiences.

APPENDIX K – HEPATITIS B IMMUNIZATION WAIVER

BALL STATE UNIVERSITY ATHLETIC TRAINING HEPATITIS B IMMUNIZATION WAIVER

I understand that due to my clinical exposure to blood and other potentially infectious materials, I may be at risk for acquiring Hepatitis B Virus infection. It has been mandated that as apart of the formal athletic training curriculum I will receive formal instruction on Universal precautions and it is further recommended that I be vaccinated with Hepatitis B vaccine, at my expense, via a private physician or at the Ball State University Health Center. I understand that the Hepatitis B vaccine may not be 100% effective on the prevention of acquiring the virus.

	I have received the Hepatitis B vacc risk may still exist to acquire Hepati	ination in a 3-shot series, and understand that a potential itis B.	
	I understand that by declining to receive the vaccination, I am at continued risk of acquiring Hepatitis B.		
Signature		Date	
— Pri	nted Name		