

Revised June 2012

**West Chester University**  
Athletic Training Education Program  
POLICY and PROCEDURE MANUAL

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**The provisions of this document are not regarded as an irrevocable contract between the student and the program or University. West Chester University’s athletic training education program reserves the right to change any provisions or requirements at any time. Updates to this manual will be made in late in the spring each year and will posted directly to the program’s web site:**

**<http://www.wcupa.edu/academics/healthsciences/sportsmed/>**

**INTRODUCTION**

Our Athletic Training Education Program accredited by the Commission on Accreditation of Athletic Training Education Programs (CAATE) affords students the opportunity to pursue a combination of classroom, laboratory and clinical educational experiences in athletic training. West Chester University has offered athletic training education programming for students from this and other institutions since 1970. Students of West Chester University who complete the Athletic Training Education Program meet the eligibility requirements to sit for the national certification examination of the Board of Certification, Inc. (BOC). They will also meet the requirements for certification as an athletic trainer by the Commonwealth of Pennsylvania. (It should be understood that completion of the program does not imply automatic certification as an athletic trainer by either the BOC or the Commonwealth of Pennsylvania.)

**HOW TO ADDRESS ATHLETIC TRAINERS and ATHLETIC TRAINING STUDENTS**

Individuals who have successfully completed the BOC certification examination are eligible to use the ATC initials as part of their credentials and should be referred to as “Certified Athletic Trainer”. The use of the correct title, ATC or Certified Athletic Trainer, will help end the confusion created when just the term trainer is used. Additional information about BOC Certification and/or the ATC credential is available at the BOC and NATA web sites: [www.bocatc.org](http://www.bocatc.org); [www.nata.org](http://www.nata.org).

**Certified Athletic Trainers:** Unique health care providers who specialize in the prevention, assessment, treatment and rehabilitation of injuries and illnesses. (<http://www.nata.org/athletic-training/terminology>)

**ATC Terminology:** NATA’s policy is not to use the ATC acronym as a noun. ATC is an acronym that describes a credential, not a person, and it should only be used following the name of a certified individual. Using the ATC acronym as a noun inhibits the Board of Certification’s ability to protect the ATC credential against misuse. In other words, NATA and the BOC cannot protect the copyright on the ATC mark if it becomes known as a common noun. (<http://www.nata.org/athletic-training/terminology>).

**AT Students:** Students enrolled in a CAATE accredited athletic training education program should be referred to as “athletic training students”.

**DEPARTMENT OF SPORTS MEDICINE FACULTY/STAFF CONTACT SHEET**

Dr. Carolyn Jimenez Department Chairperson	<a href="mailto:cjimenez@wcupa.edu">cjimenez@wcupa.edu</a>	(610) 436-3293
Dr. Neil Curtis Coordinator of Athletic Training Education	<a href="mailto:ncurtis@wcupa.edu">ncurtis@wcupa.edu</a>	(610) 436-2969
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Mrs. Wendy Showers Department Secretary	<a href="mailto:wshowers@wcupa.edu">wshowers@wcupa.edu</a>	(610) 436-2119

WCU South Campus athletic training facility –office phone, wall phone(610) 436-2932, 2933  
WCU South Campus athletic training facility – FAX (610) 436-2803

WCU North Campus athletic training facility (610) 430-4415

**DEPARTMENT OF SPORTS MEDICINE ASSESSMENT PLAN****I. DEPARTMENT VISION STATEMENT**

Educational programming within the Department of Sports Medicine is predicated upon the philosophical belief that the physically active of all ages should be able to pursue their activities with vigor and enthusiasm; that such athletic participation has inherent value to the individual participant, to the institution sponsoring the activity and society as a whole; that most injuries suffered by the physically active are preventable; and that these individuals receive quality medical care for their injuries. Given this the department is committed to provide quality educational programming in athletic training, a specialized and recognized allied health profession which concerns itself with the health and safety of the physically active.

**II. DEPARTMENT MISSION STATEMENT**

The department prides itself on aligning with the university and college of health sciences missions by providing high quality classroom education. Furthermore, our students experience clinical instruction within a variety of educational settings, which afford our students the opportunity to apply knowledge and skills in real-life situations, under the supervision of experienced athletic training professionals. The department curriculum provides students with ample opportunities to develop and apply critical thinking and problem solving skills, communicate effectively, respect and understand diversity and to act ethically and professionally to develop skills to become life-long learners. A knowledgeable and diverse faculty serve as both classroom educators and clinical supervisors and thus professional role-models for the students. The faculty is also committed to life-long learning as providers of sports medicine services to the University's intercollegiate athletic program, as well as providing educational opportunities for students from other majors within the University and students from other institutions of higher learning.

**III. STUDENT LEARNER OUTCOMES (i.e. GOALS)**

For assessment purposes the student learner outcomes of the Sports Medicine Department can be simplified into 5 areas-

- 1) **Content Knowledge:** To educate students to be critical thinkers and problem solvers in the content knowledge of athletic training. This content knowledge centers around the 12 content areas of athletic training education which are:
  - a. Acute care of injury and illness
  - b. Orthopedic clinical examination and diagnosis
  - c. Medical conditions and disabilities
  - d. Health care administration
  - e. Pathology of illness and injuries
  - f. Pharmacology
  - g. Psychosocial intervention and referral
  - h. Risk management and injury prevention
  - i. Conditioning and rehabilitative exercise
  - j. Therapeutic modalities
  - k. Professional development and responsibility
  - l. Nutritional aspects of injuries and illnesses
- 2) **Communication:** To help students to acquire effective communication skills as it relates to content knowledge.
  - a. Verbal
  - b. Non-verbal
  - c. Written communication
- 3) **Life Long Learning:** To prepare students for life after graduation by emphasizing the following attributes in students:
  - a. understanding their role in society with respect to service
  - b. encouraging respect for diversity
  - c. instilling an appreciation for the field of athletic training.
- 4) **Informational Literacy.**

To help students acquire skills to become life-long learners To help students acquire an array of knowledge and skills necessary to identify the information needed for a task and then to locate, understand, evaluate, and use that information efficiently and effectively within appropriate ethical and legal limits.
- 5) **Clinical Education:** To help students acquire effective skills as it relates to the clinical education.
  - a. ensuring that psychomotor skills within the educational competencies are completed throughout the students clinical courses
  - b. creating an environment that encourages learning.

West Chester University Athletic Training Education Program  
**WEST CHESTER UNIVERSITY**  
 DEPARTMENT OF SPORTS MEDICINE  
 BACHELOR OF SCIENCE IN ATHLETIC TRAINING  
 GUIDANCE RECORD SHEET

**STUDENTS ENTERING FALL 2011 and later**

Name \_\_\_\_\_

Date Entered Athletic Training Major \_\_\_\_\_

Course	First Semester	Credits
___ WRT 120	Eff. Writing I	3.0
___ PSY 100	Intro to Psych	3.0
___ <b>SMD 100*</b>	<b>Found. Spts. Med</b>	<b>2.0</b>
___ BIO 110	General Biology	3.0
___ _____	SPK 208, Arts, or other Gen. Ed.	<u>3.0</u>
<b>Total Credits</b>		<b>14</b>

Course	Second Semester	Credits
___ WRT 200	Critical Writing & Research	3.0
___ <b>or 220 or 208</b>	Special Topics or Writing for Print Media	
___ <b>BIO 259*</b>	<b>Human Anat/Phys I</b>	<b>4.0</b>
___ <b>SMD 204*</b>	<b>First Aid Health Prof.</b>	<b>3.0</b>
___ <b>SML 204*</b>	<b>First Aid Health Prof./Lab</b>	<b>0.0</b>
___ _____	SPK 208, Arts or other Gen. Ed.	3.0
___ _____	BEH & SOC SCIENCE	<u>3.0</u>
<b>Total Credits</b>		<b>16</b>

Course	Third Semester	Credits
___ <b>SMD 361*</b>	<b>Kinesiology</b>	<b>3.0</b>
___ <b>SMD 272*</b>	<b>Ath. Trg. Tech.</b>	<b>3.0</b>
<b>or 261*</b>	<b>Surface Anatomy (3 credits)</b>	
___ <b>BIO 269*</b>	<b>Human Anat/Phys II</b>	<b>4.0</b>
___ _____	SPK 208, Arts, or other Gen. Ed.	3.0
___ MAT 121	Statistics	<u>3.0</u>
<b>Total Credits</b>		<b>16</b>

Course	Fourth Semester	Credits
___ <b>EXS 380</b>	<b>Applied Ex. Physio.</b>	<b>3.0</b>
___ <b>SMD 261*</b>	<b>Surface Anatomy</b>	<b>3.0</b>
<b>or 272*</b>	<b>Ath. Trg. Tech. (3 credits)</b>	
___ <b>SMD 312*</b>	<b>Path/Evl Ath Inj II</b>	<b>3.0</b>
___ CHE 107	Gen Chem Allied Health Sci	4.0
___ CRL 107	Gen. Chem Allied Health lab	1.0
___ NTD 303	Intro to Nutrition	<u>3.0</u>
<b>Total Credits</b>		<b>17</b>

Course	Fifth Semester	Credits
___ SMD 311	Ther. Ex. AT	3.0
___ <b>SMD 313</b>	<b>Path/Evl Ath Inj III</b>	<b>3.0</b>
___ SMD 315	ATH INJ MGMT I	3.0
___ SML 311	Ther Ex. Lab	2.0
___ KIN 475	Mental Training in Sport	<u>3.0</u>
<b>Total Credits</b>		<b>14</b>

Course	Sixth Semester	Credits
___ SMD 310	Ther. Mod AT	3.0
___ <b>SMD 212</b>	<b>Path/Evl Ath Inj I</b>	<b>3.0</b>
___ SMD 316	Ath Inj Mgmt II	3.0
___ SML 310	Ther. Mod AT Lab	1.0
___ _____	Interdisciplinary ("I" course)	<u>3.0</u>
<b>Total Credits</b>		<b>13</b>

Course	Seventh Semester	Credits
___ SMD 414	H.,O.,&A. of AT	3.0
___ SMD 417	Ath Inj Mgmt III	3.0
___ SMD 454	Ther/Prac Cond.	3.0
___ PHY 100	Elements Physical Science	3.0
___ _____	Diverse Communities ("J" course)	<u>3.0</u>
<b>Total Credits</b>		<b>15</b>

Course	Eighth Semester	Credits
___ SMD 418	Ath Inj Mgmt IV	3.0
___ _____	Student Elective	3.0
___ _____	Student Elective	3.0
___ _____	Student Elective	3.0
___ _____	Humanities or other Gen. Ed.	<u>3.0</u>
<b>Total Credits</b>		<b>15</b>

*\*prerequisites for Fifth Semester*

TOTAL CREDITS FOR WHOLE PROGRAM = 120

WEST CHESTER UNIVERSITY  
Department of Sports Medicine  
ADVISING GUIDELINES  
General Education Requirements -

I. Academic Foundations (18)

- A. English Writing Courses (6)  
Satisfied by WRT120 and WRT 200, 208 or 220
- B. Mathematics: (3)  
Satisfied by MAT 121
- C. Communications (3)  
Satisfied by SPK 208
- D. Diverse Communities (3)  
One course with a **J** (Diverse Communities) designation
- E. Interdisciplinary (3) - One course with an **I** (Interdisciplinary) designation.  
An interdisciplinary course may simultaneously meet the interdisciplinary and foreign culture cluster requirements. An interdisciplinary course may not be used to fulfill a general education requirement in the distributive areas and may not simultaneously satisfy the interdisciplinary and diverse communities requirements. - **SMD 210 recommended.**

II. Distributive Requirements (18)

- A. Sciences - 6 credits  
Satisfied by PHY100,CHE/CRL 107, and BIO110 requirements
- B. Behavioral and Social Sciences - 6 credits  
Satisfied by PSY100 requirement plus 1 course from one other area:  
1. ANT, 2. SOC, 3. ECO, 4. GEO, 5. PSC  
Recommended courses: ANT 102, 103; SOC 200, 240; ECO 101, 111, 112; GEO 101, 103; PSC 100, 101, 213
- C. Humanities - 6 credits:  
Satisfied by 2 courses from the following areas:  
Literature or Classics (Recommended LIT 165 CLS 165 260, or 261)  
History –(Recommended 101, 102, 150, 151, or 152)  
Philosophy (Recommended 101 or 180)

III. Arts – (3)

Satisfied by taking 3 credits worth of coursework in art,cinematography,dance,music,photography,or theater

IV.Student Electives (9)

Must be satisfied by courses not required by General Education or your major. The following constitute some suggested classes for the students choice: EXL 380 Ex. Phys Lab, HEA 325 Stress Mgmt , HEA 206 Human Development, PEA 137 Strength Training, CSC 101 Computers, BIO 214 Microbiology, BIO 307 Pathophysiology (no lab), BIO 367 Physiology of Drug Interaction, PSY 375 Abnormal Psych , PSY 210 Developmental Psych , PSY 350 Motivation , PSY 257 Theo. of Personality, EDA 102 Psych of the Phys. Disabled , KIN 465 Mech. Anal. of Motor Skills. Students interested in Medical School, Physical Therapy, or similar graduate programs should take CHE 103-104, and PHY 130-140, and an advanced Biology course.

V. Writing Emphasis Courses (one must be at 300-400 level) **9 credits**. Note for transfer students:Transfer students who enter with 40-70 credits must take 2 writing emphasis courses. Students who transfer with 70 credits must take 1 writing emphasis course.

<u>Course</u>	<u>Title</u>	<u>Semester/Year</u>
1. <b>SMD 414</b>	<b>H, O, &amp; A of Athletic Training</b> (required)	Fall, Senior year
2. [SMD 210	Psychosocial Perspectives of Sport/Recreational Injuries] (recommended)	
3.		

VI. Technology requirement – Each department will determine how to meet this need for its major. Please see advisor for further information.

VII. The student must achieve at least a "C" in each of these courses. The student must have a minimum combined GPA of 2.5 in these courses in order to be recommended for the BOC Certification Exam:

BIO 259, 269, EXS 380, KIN 475, NTD 303  
SMD 204, 212, 261, 272, 310, 311, 312, 313, 315, 316, 361,414,417, 418, 454  
SML 310, 311

**ATEP Progression and Completion Requirements**

Athletic training students must complete the following courses prior to enrolling in the first clinical course (SMD 315):

BIO 259, 269; EXS 380; SMD 100, 204, 261, 272, 312, 361; SML 204,

**Athletic training students must achieve at least a “C” in each of the courses listed above. The student must also have a combined GPA of 2.5 in the courses listed below to be recommended for the Board of Certification (BOC) exam:**

BIO 259, 269; EXS 380; KIN 475; NTD 303

SMD 204, 212, 261, 272, 310, 311, 312, 313, 315, 316, 361, 414, 417, 418, 454

SML 310, 311

**If students do not earn a C or better in EXS 380, SMD 204, 212, 261, 361, 310, 311, 312, 313, 315, 316, SML 310, 311 students must retake the course at the next available offering including summer sessions when applicable. For example: if you earn a C- in a fall course that is only offered in the fall and summer, you must repeat it in the next summer session it is offered. Example 2: if you earn a D in a spring course that is only offered in the spring and summer, you must repeat it in the next summer session it is offered.**

**Athletic Training Education Retention Policy**

The BS in athletic training major uses the West Chester University retention policy that is found in the undergraduate course catalog.

**Technical Standards for the BS in Athletic Training Major at West Chester University**

The BS in Athletic Training Major at West Chester University prepares students for careers as certified athletic trainers where they will enter into employment settings and render athletic training services to individuals engaged in physical activity. The clinical, classroom and laboratory experiences place specific demands on the students enrolled in the program. The technical standards developed for the BS in Athletic Training Major establish the essential qualities necessary for students to achieve the knowledge, skills and competencies of an entry-level certified athletic trainer and meet the expectations of the agency (Commission on Accreditation of Athletic Training Education {CAATE}) that accredits the program. Students must possess the abilities outlined below to be admitted into the program. Students selected for admission into the BS in Athletic Training Major must verify that they understand and meet these technical standards with or without a reasonable accommodation. A student with a condition who may need a reasonable accommodation to meet the technical standards will be referred to the Office of Services for Students with Disabilities (OSSD) for an evaluation of whether the condition is a disability as defined by applicable laws, and a determination of what accommodations are reasonable. The determination will specifically take into consideration whether the requested accommodations might jeopardize the safety of the patient, and the ability to complete the classroom, laboratory, and clinical coursework required for the Athletic Training Program. The OSSD, with input from the Department of Sports Medicine, will make this determination. Whenever possible, reasonable accommodations will be provided for those individuals with disabilities to enable them to meet these standards and ensure that students are not denied the benefits of, excluded from participation in, or otherwise subjected to discrimination in this program.

Technical Standards of the BS in Athletic Training Major at West Chester University:

(These examples are not inclusive of all expected abilities)

1. Critical thinking ability sufficient for clinical judgment.
2. Interpersonal abilities sufficient to interact with individuals, families and groups from a variety of social, emotional, cultural and intellectual backgrounds.
3. Communication abilities sufficient for interaction with others in verbal and written form.
4. Physical abilities sufficient to maneuver in small or confined spaces and to provide emergency care.
5. Gross and fine motor abilities sufficient to provide safe and effective athletic training care.
6. Tactile dexterity sufficient for physical assessment.
7. Visual ability sufficient for observation and assessment necessary in athletic training care.
8. Auditory ability sufficient to monitor and assess health needs.
9. Ability to maintain composure and function in highly stressful situations such as those associated with critical injury or illness.

**PLEASE sign and date section A or section B below [DO NOT SIGN BOTH]:**

A. I certify that I have read and understand these technical standards and believe that I meet each without accommodation. I understand that if I am unable to meet these standards that I will not be admitted into the BS in Athletic Training Major.

Signature of student	Print name of student	Date
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=====

B. I certify that I have read and understand these technical standards and believe that with certain accommodations that I can meet these standards. I will contact the Office of Services for Students with Disabilities to determine what accommodations may be available. I understand that if I am unable to meet these standards with reasonable accommodation that I will not be admitted into the BS in Athletic Training Major.

Signature of student	Print name of student	Date
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*\*Modified from Core Performance Standards Required for Nursing, Board of Directors of the Southern Council on College Education for Nursing (SCCEN), 1993 [<http://www.sreb.org/programs/Nursing/publications/adareport.asp>] and NATA Education Council [[www.nataec.org](http://www.nataec.org)]*

**Clinical Experience**

One of the strengths of the Athletic Training Education Program is our clinical education component. Students in the program will have the opportunity to take the knowledge, skills and attitudes obtained in the coursework and apply it in a variety of clinical settings. All students will spend at least one semester in the WCU athletic training facilities, working under the direct supervision of our faculty preceptors (formerly referred to as clinical instructors). The WCU Athletic Department currently sponsors 12 varsity sports for women and 11 for men. The Sturzebecker Health Science Center Athletic Training Room is the base of operations for athletic training services. A smaller, but complete, athletic training room is housed in the Hollinger Field House for basketball, volleyball and indoor track.

In addition, WCU students are able to gain valuable clinical experience at any of a variety of local high schools, universities, colleges and professional teams. Each site is staffed by at least one certified athletic trainer who shares our philosophy on clinical education. Our students learn along side each of these professionals as they perform their duties during pre-season camps and through the various athletic seasons. Students assigned to off-campus clinical sites are responsible for their own transportation to and from those sites. Clinical experiences may begin prior to the official start of the semester and occur over a maximum of 16 weeks as part of SMD 315, 316, 417, 418.

**20012-13 Affiliated Clinical Settings:** (not all inclusive)

Archmere Academy	Optimum Physical Therapy
ATI Physical Therapy	Philadelphia Soul
Bayard Rustin High School	Swarthmore College
Downingtown High School West	Upper Merion High School
Glen Mills Schools	Ursinus College
Great Valley High School	Villanova University
Kinetic Physical Therapy	West Chester East High School
Lancaster Catholic High School	West Chester Henderson High School
Millersville University	Widener University
NovaCare Rehabilitation	Williamson Trade School

During the Second Semester of a students' sophomore year a meeting will be held with the sophomore class and the coordinator of athletic training education. At this meeting the following things will be addressed:

- Students must state their intentions by signing a contract agreeing to begin their clinical in the fall of their junior year.
- Students must state their intentions if they wish to continue playing a varsity sport and delaying their clinical for a semester or more.
- The coordinator of athletic training education will inform any students if there is any remediation of courses that need to be finished before beginning of their clinical experience.
- Students will have the opportunity to request a clinical based on interests and/or inability to obtain a car for the first semester. This does not guarantee a specific clinical for the student but may help the coordinator in the decision-making process.
- Athletic Training Student uniform information.
- Students will be given information regarding the following materials that they will be expected to complete before they begin their clinical. The program will provide the Blood Borne Pathogen training and the cost for the Hepatitis B vaccination. **The student is responsible for the other costs.** This includes:
  - CPR for the professional rescuer and first aid certification.
  - Hepatitis B vaccination or sign a vaccination declination.
  - Blood Borne Pathogen training
  - Professional liability insurance coverage
  - State criminal background check\*
  - FBI federal criminal history record\*
  - State child abuse history clearance\*
  - Tuberculin (TB) skin test\*

\*REQUIRED for clinical sites with school age children (e.g. public and private schools)



### **“Strategic Alliance Statement on Athletic Training Student Supervision**

The leadership of the Strategic Alliance, which includes the Commission on Accreditation of Athletic Training Education (CAATE), the National Athletic Trainers’ Association (NATA), and the Board of Certification, Inc. (BOC), has concluded that it is both appropriate and necessary to issue this formal statement to remind institutions, supervisors and students that athletic training students should provide services to patients only when directly supervised by the appropriate personnel. This includes athletic training students who travel with athletic teams.

*According to the 2008 Standards for the Accreditation of Entry-Level Athletic Training Education Programs, “an approved clinical instructor or clinical instructor must be physically present and have the ability to intervene on behalf of the athletic training student to provide on-going and consistent education.”*

The Strategic Alliance has a vested interest in student supervision, an issue that transcends educational programs and impacts the profession of athletic training as a whole. The CAATE is involved from an educational standpoint, the BOC is involved from the regulatory perspective, and the NATA is concerned about issues affecting the athletic training profession.

Athletic training services should be provided only by BOC-certified or otherwise regulated personnel or by students under the direct supervision of such personnel. Athletic training students should only travel with teams when directly supervised at all times by appropriately credentialed athletic trainers. The practice of an unsupervised student providing athletic training services replaces licensed athletic training staff with unregulated personnel. This is illegal in most states, and the practice is contrary to the safety and welfare of patients. Additionally, it is not in the best interests of the profession and therefore cannot be supported by the Strategic Alliance.

The direct supervision of athletic training students is in the best interest of the institutions, supervisors, students, and patients. It is required under the CAATE education standards. As stated above, the Standards stipulate a clinical instructor must be physically present and able to interact with an athletic training student at the site of the clinical experience.

The Strategic Alliance acknowledges that critical thinking and independent clinical decision-making are at the heart of good clinical supervision. Direct supervision does not preclude students’ ability to learn and exercise those key skills. Clinical instructors and supervisors should allow students the appropriate freedom to engage in critical thinking and decision-making in a suitable environment. Above all, supervision by an instructor or supervisor must be adequate to ensure that each patient receives competent and quality care and to ensure compliance with the relevant state practice act. Failure to provide adequate supervision could expose the institution and regulated professionals to liability.

The Strategic Alliance is evaluating clinical education from several perspectives and is developing additional models and tools. This collective effort will assist athletic training students and classroom and clinical instructors. “ 11.8.11 ([www.caate.net](http://www.caate.net))

### **Supervised Clinical Experience**

A supervised clinical experience is when a program preceptor (formerly referred to as clinical instructor), or another approved health care professional such as a doctor associated with the program, is physically present and can intervene on behalf of the athlete/patient. This means that the preceptor can have both auditory and visual contact with the student. When in a supervised clinical experience, the student can perform any and all skills that are *previously learned*.

### **2012 CAATE Standard IV.N. (www.caate.net)**

“The program must include provision for supervised clinical education with a preceptor (see Section III).

1. There must be regular communication between the program and the preceptor.
2. The number of students assigned to a preceptor in each clinical setting must be of a ratio that is sufficient to ensure effective clinical learning and safe patient care.
3. Students must be directly supervised by a preceptor during the delivery of athletic training services. The preceptor must be physically present and have the ability to intervene.”

### **Attendance Policy for Clinical Experience Courses**

SMD 315, SMD 316, SMD 417, SMD 418:

All students are expected to attend scheduled clinical assignments and act in a professional manner (see clinical evaluation forms section “Professional Evaluation and Personal Attributes and NATA code of ethics). If you have a foreseeable schedule conflict, it is your responsibility to notify your preceptor at least 48 hours prior. Unforeseeable absences will not be counted as excused absences unless the student provides the instructor documentation and verification within one week of the absence. Excused absences include an illness (with proper medical documentation), a family crisis or an approved institutional activity. Failure to meet the attendance requirement will result in grade reduction.

Athletic training students have the right to appeal the aforementioned policy above by reporting to the coordinator of athletic training education.

### **Example:**

**Offense 1:** August 28<sup>th</sup>, 2006- Absent from first three days of clinical experience. No prior notification was supplied.

**Offense 2:** September 23, 2006- Absent from clinical experience. No prior notification was supplied.

**Clinical Education Confidentiality Agreement**

All athletic training students who are assigned observational or clinical rotations through the WCU Bachelor of Science in athletic training are required to sign and abide by this agreement. Any student who refuses to sign OR abide by the agreement listed below will result in immediate termination from their clinical experience. The Board of Certification Standards of Practice for Athletic Training and the NATA's Competencies in Athletic Training and Code of Ethics stipulate several duties owed to the physically active by the athletic trainer. Among other duties, the courts have specified the duty of the athletic trainer to maintain confidentiality of medical records. **The athletic training student is held to the same standard of care.** The following agreement will be a part of the athletic training student's file.

*I understand that all of the information which I become privy to in my capacity as an athletic training student is subject to patient-physician privilege and must be considered confidential.*

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Student Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Coordinator of Athletic Training Education

\_\_\_\_\_  
Date

**Clinical Rotation Orientation Form**

**Site:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**ACI:** \_\_\_\_\_ **ACI:** \_\_\_\_\_  
Name Signature

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

Students enrolled in the Athletic Training Education Program at West Chester University are required to participate in clinical experiences. All Approved Clinical Instructors at all clinical sites are expected to hold an **Orientation Session** to explain and review the information listed below with Athletic Training students assigned to them for clinical rotations.

**Date Completed:**

- \_\_\_\_\_ Verify ATS current level of emergency response and CPR certification.
- \_\_\_\_\_ Review Emergency Action Plan (EAP): emergency phone numbers, location of the EAP and communications to initiate EAP. This should be posted at the site.
- \_\_\_\_\_ Review all OSHA regulations and locations of personal protective devices and biohazard containers at the site.
- \_\_\_\_\_ Review the chain of command followed at the site.
- \_\_\_\_\_ Determine the ways in which it is best for the clinical instructor and the student to make contact in case of illness, postponed or cancelled events, etc. Email addresses, cell phone numbers, home numbers should be exchanged when appropriate.
- \_\_\_\_\_ Dress Code: Students are expected to follow the WCU Dress Code at all clinical sites. Student can utilize the dress code of the affiliated site.
- \_\_\_\_\_ Select a clinical rotation schedule that will maximize student meaningful learning.
- \_\_\_\_\_ Make introductions to the appropriate personnel (athletic director, coaches, players, colleagues).
- \_\_\_\_\_ Review of courses completed and in progress.
- \_\_\_\_\_ In conjunction with the student, identify the student’s learning goals for this rotation.
- \_\_\_\_\_ Discuss the student’s previous clinical experiences as it pertains to the ATS clinical performance and the clinical skills and proficiencies the student was exposed to. Students are encouraged to share the previous semester(s) final evaluations to facilitate this discussion.
- \_\_\_\_\_ Review of evaluation tools used by ATS to assess ACI performance and clinical setting.
- \_\_\_\_\_ Review and discuss “Athletic Training Student Responsibilities”.
- \_\_\_\_\_ **Review and discuss athletic training room policies and procedures.**

### **OSHA and Blood Borne Pathogens Policy**

The Athletic Training Education Program at West Chester University adheres to the practice of “Universal Precautions” as outlined by the Occupational Safety and Health Administration. This policy applies to all students in the program starting their second year in the program prior to clinical observation. Students are to be re-trained on OSHA guidelines once a year and every subsequent year in the athletic training program until graduation. Documentation of participation in universal precautions training will be required for each student prior to the start of their clinical observation and/or clinical rotation and a copy will be kept on file in the program director’s office.

The complete WCU policy is available via a link from your clinical course web page.

### **Transportation of Student Athletes**

The transportation of student athletes by athletic training students is not an expectation and is not permitted during clinical education experiences.

### **Athletic Training Student Uniform Policy**

The athletic trainer is an allied health professional and as part of the WCU Bachelor of Science in athletic training program, one is required to dress appropriately and professionally for all practices and games during their clinical experiences. Athletic training students wearing inappropriate attire will be asked to leave their clinical and may be detrimental to their final grade. The designated uniform for clinical is listed below. There will be an ordering window each Spring semester. Details will be made available at the time the ordering window is announced. The items listed below are the only items to be worn at your clinical assignments unless told otherwise by your preceptor/clinical instructor.

#### ***Mandatory:***

1. Purple Collared Shirt
2. Khaki Shorts
3. Approved Water-Resistant Jacket
4. Approved Water-Resistant Black Pants

#### ***Optional:***

5. Approved Sweatshirt
6. Khaki Pants

#### **Note:**

- The student is responsible for the cost of the uniform items
- The two items listed as optional, but may not be substituted by any other type of sweatshirt, jacket or pants.
- Please consult the coordinator of athletic training education for most up to date item numbers.
- All prices listed are from previous year and are subject to change.

**Ordering Information:** Will be provided each Spring semester.

**Communicable Disease Policy:**

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

If the athletic training student acquires a communicable disease, the student will notify their Preceptor/Approved Clinical Instructor (ACI) and Program Director as soon as possible. A signed release from a medical practitioner may be required with certain illnesses, prior to resuming clinical experiences. The Center for CDC provides these preventative guidelines for the reporting of communicable disease with health care facilities. 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 Athletic Training students are providing direct health care to patients under the supervision of a preceptor, the appropriate precautions must be utilized. Any student who acquires any of the listed communicable disease will be dismissed from the clinical experience at West Chester University or other affiliated sites until a medical practitioner has deemed the student non-contagious.

**Communicable Diseases sited by the CDC:**

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

**Other Communicable Diseases**

- Mononucleosis
- Influenza
- Common Cold

## Emergency Action Plan Overview

### **Introduction**

Emergency situations may arise at anytime during athletic events. Expedient action must be taken in order to provide the best possible care to the athletes of emergency and/or life threatening conditions. The development and implementation of an emergency plan will help ensure that the best care will be provided.

Athletic organizations have a duty to develop an emergency plan that may be implemented immediately when necessary and to provide appropriate standards of health care to all sports participants. As athletic injuries may occur at any time and during any activity, the sports medicine team must be prepared. This preparation involves formulation of an emergency plan, proper coverage of events, maintenance of appropriate emergency equipment and supplies, utilization of appropriate emergency medical personnel, and continuing education in the area of emergency medicine. Hopefully, through careful pre-participation physical screenings, adequate medical coverage, safe practice and training techniques and other safety avenues, some potential emergencies may be averted. However, accidents and injuries are inherent with sports participation, and proper preparation on the part of the sports medicine team will enable each emergency situation to be managed appropriately.

### **Components of the Emergency Plan**

There are three basic components of this plan:

- 1) Emergency personnel
- 2) Emergency Communication
- 3) Emergency Equipment

### **Emergency Plan Personnel**

During intercollegiate athletic team practice and competition, the first person to an emergency situation is typically a member of the sports medicine staff, most commonly an athletic training student (**ATS**) and certified athletic trainer (**ATC**). A team physician will not usually be present at every competition other than football. The type and degree of sports medicine coverage for an athletic event may vary widely, based on factors such as the sport or activity, the setting, and the type of training or competition. The first person in some instances may be a **COACH** or other institutional personnel. Certification in cardiopulmonary resuscitation (CPR), blood borne pathogen training, and emergency plan review is required for all athletics personnel associated with practices, competitions, skills instruction, and strength and conditioning.

The development of an emergency plan cannot be complete without the formation of an emergency team. The emergency team consists of a number of healthcare providers including physicians, certified athletic trainers; athletic training students; emergency medical technicians and at times, coaches. Roles of these individuals within the emergency team may vary depending on factors such as the number of members of the team, the athletic venue itself, or the preference of the certified athletic trainer.

There are four basic roles within the emergency team.

1. Immediate care of the athlete
2. Emergency equipment retrieval
3. Activation of the Emergency Medical System
4. Direction of EMS to scene

The first and most important role is **immediate care** of the athlete. Acute care in an emergency situation should be provided by the most qualified individual on the scene. Individuals with lower credentials should yield to those with more appropriate training. The second role, **equipment retrieval**, may be done by anyone on the emergency team who is familiar with the types and location of the specific equipment needed. Athletic training students are good choices for this role. The third role, **EMS activation**, may be necessary in situations where emergency transportation is not already present at the sporting event. This should be done as soon as the situation is deemed an emergency or a life-threatening event. Activating the EMS system may be done by the certified athletic trainer (or someone they deem appropriate) via radio contact with the athletic training room. Athletic training room personnel will then activate EMS by dialing 3311. If a certified athletic trainer is not available on site or via radio contact, the emergency plan is activated by the coach. (**See Activating EMS by Coaches**). After EMS has been activated, the fourth role in the emergency team should be performed, that of **directing EMS to the scene**. One member of the team should be responsible for meeting emergency medical personnel as they arrive at the site of the contest. Depending on ease of access, this person should have keys to any locked gates or doors that may slow the arrival of medical personnel. An athletic training student, manager, or coach may be appropriate for this role.

### **Activating EMS by the Sports Medicine Staff**

- ATC or athletic training student calls athletic training room via radio:
- Athletic Training room personnel activate WCU public safety by dialing ext. 3311
- WCU public safety activates 911

OR

- ATC activates public safety at 610-436-3311 directly via cell phone if one is available.

OR

ATC activates public safety via closest emergency phone (refer to map of athletic venues)

#### **Activating EMS by Coaches**

- Coaches should use the closest emergency phone located at the venue
- Refer to map of athletic venues.

OR

- Coach activates public safety at 610-436-3311 directly via cell phone if one is available

Providing Information:

- Name, title (ATC, ATS, Coach) address, telephone number of caller
- number of athletes that need assistance
- condition of athlete(s)
- first aid treatment initiated by a first aider
- specific directions as needed to locate the emergency scene (e.g. come to south campus loading dock)
- other information as requested by dispatcher

It is important that the emergency team be capable of adapting to each situation or sport.

Emergency plans for each sport or sport venue is/are included.

#### **Emergency Communication**

Communication is the key to quick delivery of emergency care in athletic trauma situations. Athletic trainers and emergency medical personnel will work together to provide the best possible care to injured athletes. The radio communications system should be checked by ATC's and ATS's prior to each practice or competition to ensure proper working order. The back-up communication plan will be in effect should there be failure of the primary communication system.

- Primary communication by the sports medicine staff is radio contact or cellular phone if available.
- Secondary communication for sports medicine staff and primary communication for coaches is the closest emergency phone or cellular phone if available.

#### **Emergency Equipment**

Necessary emergency equipment will be at the site or quickly accessible. Personnel should be familiar with the function and operation of each type of emergency equipment. Equipment should be in good operating condition, and personnel must be trained in advance to use it properly. Emergency equipment should be checked on a regular basis and use rehearsed by emergency personnel. The emergency equipment available should be appropriate for the level of training for the emergency medical providers.

#### **Transportation**

West Chester University coordinates on site ambulances for competition in football. Ambulances may be coordinated on site for other special events/sports, such as major tournaments or Conference/NCAA regional or championship events. In the emergency evaluation, the ambulance personnel assist the emergency care provider (ATC) in identifying emergencies requiring critical intervention and in determining transport decisions. In an emergency situation, the athlete should be transported by ambulance, where the necessary staff and equipment is available to deliver appropriate care.

#### **Conclusion**

The importance of being properly prepared when athletic emergencies arise cannot be stressed enough. An athlete's survival may hinge on how well trained and prepared athletic healthcare providers are. It is prudent to invest athletic department "ownership" in the emergency plan by involving the athletic administration and sport coaches as well as sports medicine personnel. The emergency plan should be reviewed at least once a year with all athletic personnel, along with CPR and first aid refresher training. Through development and implementation of the emergency plan, West Chester University helps ensure that the athlete will have the best care provided when an emergency situation does arise.

**\*\*When athletic training students are completing on and off-campus clinical rotations, it is imperative that their preceptor goes over with them the specific emergency action plan for that site\*\***



### **WCU Lightning Policy**

According to the NCAA and the NATA, lightning is the most consistent and significant weather hazard that may affect intercollegiate athletics. The existence of blue sky and the absence of rain are not protection from lightning. According to the National Severe Storms Laboratory, lightning can, and does, strike as far as 10 miles away from the rain shaft. It does not have to be raining for lightning to strike. Prevention and education are the keys to lightning safety. Prevention begins long before any intercollegiate athletics event and should follow one of the two detailed plans below.

**Chain of Command:** A chain of command is crucial to the effectiveness of safety when dealing with severe weather. The chain of command will monitor on a daily basis, threatening weather.

**PLAN:** The certified athletic trainer and/or athletic administrator or coach will track the occurrence of lightning/threatening weather through the use of the *on-line or text message weather detection system subscribed to*. If there is lightning/threatening weather in the area (8-10 miles) the certified athletic trainer will inform the coach and/or game officials and the participants and spectators will be instructed to move to a safe structure.

**Safe Structure:** Any building normally occupied or frequently used by people. In the absence of a sturdy frequently inhabited building, any vehicle with a hard metal roof and rolled-up windows. A vehicle is certainly better than remaining outdoors. The hard metal roof dissipates the lightning strike around the vehicle, so if struck, make sure that no one touches the sides of the vehicle.

**Resumption of Activities:** The NCAA and NATA guidelines recommend athletic activities should not begin until 30 minutes after the last thunderstorm warning was issued.

### **MxVision WeatherSentry Online®** (as of August 2012 all PSAC universities subscribe to this service)

#### **COMPUTER LOGIN**

WCU only has one license for this system so if one person is signed in and another signs in after, it will bump the first person out. Minor glitch but don't let that stop you from signing in if you need to check something.

From your browser – type in **weather.dtn.com** (no www.)

Username = wcu

Password = wcu

Once logged in the radar map will pop up. you will notice “pins” on the map, indicating locations I have set up to monitor.

To get the daily or hourly forecast =

Left click on the pin (an x will appear)

Right click on the pin with the x and the forecast will pop up. you can choose hourly or daily.

You can also “change location” to check weather in Lock Haven or anywhere by clicking “change location” and typing in the new area you want to see.

#### **TO FIND OUT LIGHTNING INFORMATION AND ALL CLEAR TIMES**

In the column on the far left side of the page – click DASHBOARD

On the right side of this screen will be Lightning manager

Here you find the number of lightning strikes in the warning areas that have occurred in the past 30 mn

Also – this is where the ALL CLEAR Countdown timer is located. It will tell you how many minutes before anticipated all clear. **(If it detects a new lightning strike – it will jump back to 30 minutes)**

#### **MOBILE SITE FOR YOUR SMARTPHONE**

This is an unlimited application, so there is no limit to the number of people that can be logged in here at the same time. Great for when you are on the field.

From your phone's internet browser – type in mx.dtn.com

Login is the same Username – wcu

Password - wcu

-The mobile site has all the same features as the desktop site but in a different format.

- **To find lightning info and all clear countdown – click on “lightning”**

- You can also access the radar map and forecasts etc.

## **General Medical Rotation Information**

The general medical rotation is designed to provide the athletic training student with a clinical experience in identification, assessment and management of common, non-orthopaedic conditions that may be seen in a physically active population. Emphasis is placed on pharmacology; diseases and conditions of the skin; ear, nose and throat; respiratory system; cardiovascular system; endocrine system; gastrointestinal system; genitourinary system; gynecological and neurological systems. The student will also be exposed to viral syndromes, sexually transmitted diseases, systemic diseases and eating disorders.

The athletic training student will gain exposure to general medical conditions in an eight hour rotation. The student will be given the opportunity to integrate competencies learned in SMD 212 into this clinical rotation (see attached syllabus).

## **Expectations and Requirements**

Each student is required to write two case studies in the H& P format upon completion of the rotation. The student will also complete a reflection log about the experience detailing the number and types of patients that they interacted with and the illnesses that they encountered. In addition the supervising physician will complete an evaluation form of the student's knowledge, professional appearance and interaction with the patients.

Case Study Format:

- Chief Complaint
- History of Present Illness
- Prior Medical History
- Social History
- Past Surgical History
- Family History
- Review Of Systems
- Meds/Allergies
- Physical Examination
- Differential Diagnosis
  - Rationale
  - Treatment

## **Skill Sets**

Students should be able to complete the following skills in their clinical rotation:

- Vitals Assessment: Heart Rate (HR), Blood Pressure (including orthostatic BP), Resting Respiration (RR), temperature
- ENT & Respiratory Illness: otoscope, lymph node palpation, lung auscultation, peak flow meter
- Cardiovascular: heart auscultation
- Abdominal (AB), Gastrointestinal (GI), & Genitourinary: bowel auscultation, urinalysis, abdominal palpation & percussion

Use the following web sites as study tools: <http://medinfo.ufl.edu/other/opeta/index.html>  
[http://www.martindalecenter.com/MedicalClinical\\_Exams.html](http://www.martindalecenter.com/MedicalClinical_Exams.html)

## **PROFESSIONAL MEMBERSHIPS**

### **National Athletic Trainers' Association (NATA) ([www.nata.org](http://www.nata.org))**

Students are encouraged to become members of the NATA. The fee entitles the student member to gain access to the Journal of Athletic Training, (which is the professional journal of the organization) NATA News as well as considerable savings on the fee required to sit for the certification examination and for registration fees for the NATA annual symposia. You must be an NATA member to apply for any of the NATA student scholarships as well. Applications are available online at [www.nata.org](http://www.nata.org)

### **Eastern Athletic Trainers' Association (EATA) ([www.goeata.org](http://www.goeata.org))**

### **Pennsylvania Athletic Trainers Association (PATS) ([www.gopats.org](http://www.gopats.org))**

Students who become members of the NATA automatically are members on the EATA and PATS (if your mailing address is in Pennsylvania). As a member of these organizations you are eligible to apply for student scholarships and received reduced registration fees.

## **SCHOLARSHIP INFORMATION**

### **National Athletic Trainers' Association (NATA)**

The NATA scholarship committee awards scholarships annually in three categories. Applications can be downloaded from the NATA website. You must be a NATA member and intend on pursuing athletic training as a career. The national office must receive the application, no later than February 1<sup>st</sup>. The sophomore year must be completed and the overall GPA requirement is 3.0.

### **Eastern Athletic Trainers' Association (EATA)**

The EATA awards annual scholarships in the amounts of \$1500 to junior and senior athletic training students who are pursuing an undergraduate degree in athletic training. See [www.goeata.org](http://www.goeata.org) for more information.

### **Pennsylvania Athletic Trainers' Association (PATS)**

PATS awards annual scholarships in the amounts of \$2000.00 to athletic training students. See [www.gopats.org](http://www.gopats.org) for more information. Note: You must be a PATS member to be eligible for the PATS Scholarship.

### **Sturzebecker Scholarship**

Annual scholarships are awarded to students attending West Chester University in the College of Health Sciences, and to recognize individuals associated with West Chester University for distinguished achievement in their chosen professions, extraordinary accomplishments with humanitarian accomplishments and magnificent service to West Chester University and to induct them into the West Chester University Hall of Fame.

### **Swope Foundation Scholarship**

Annual scholarship awarded to undergraduate students in the amount of \$2000.00. Award criteria based upon GPA, essay, and letters of recommendation. Information regarding this scholarship can be obtained from the dean's office.

### **Pat Croce Scholarship**

Annual scholarship awarded to a BS IN ATHLETIC TRAINING freshman. Award criteria based upon GPA, resume and essay.

### **Doug Weiss Scholarship**

Annual scholarship awarded to a BS IN ATHLETIC TRAINING junior. Award criteria based upon GPA and quality of essay. For more information ask the Coordinator of Athletic Training Education.

### **Phil Donley Outstanding Senior Award**

Annual scholarship awarded to a BS IN ATHLETIC TRAINING senior. Award criteria: cumulative GPA above 3.0, demonstrated competence and significant contributions to club, department, college and/or university. Selected by the Department of Sports Medicine faculty.

**Graduation Application Timeline**

Students apply on line for graduation. Simply logon to your MyWCU account and click the link "Apply for Graduation."

<b>Graduation</b>	<b>Available to Apply Online</b>	<b>Deadline to Apply</b>
Dec-12	July 1, 2011	June 30, 2012
May-13	January 1, 2012	December 30, 2012
Aug-13	January 1, 2012	December 30, 2012
Dec-13	July 1, 2012	June 30, 2013
May-14	January 1, 2013	December 30, 2013
Aug-14	January 1, 2013	December 30, 2013
Dec-14	July 1, 2013	June 30, 2014
May-15	January 1, 2014	December 30, 2014
Aug-15	January 1, 2014	December 30, 2014
Dec-15	July 1, 2014	June 30, 2015

**Appendix A.**

**NATA CODE OF ETHICS**

**PREAMBLE**

The Code of Ethics of the National Athletic Trainers' Association has been written to make the membership aware of the principles of ethical behavior that should be followed in the practice of athletic training. The primary goal of the Code is the assurance of high quality health care. The Code presents standards of behavior that all members should strive to achieve.

The principles cannot be expected to cover all specific situations that may be encountered by the practicing athletic trainer, but should be considered representative of the spirit with which athletic trainers should make decisions. The principles are written generally and the circumstance of a situation will determine the interpretation and application of a given principle and the Code as a whole. Wherever, there conflict between the Code and legality, the laws prevail. The guidelines set forth in this Code are subject to continual review and revision as the athletic training profession develops and changes.

**PRINCIPLE 1:**

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

- 1.1 Members shall neither practice no condone discrimination on the basis of race, creed, national origin, sex, age, handicap, disease entity, social status, financial status, or religious affiliation.
- 1.2 Members shall be committed to providing competent care consistent with both the requirements and the limitations of the profession.
- 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 unless the person consents to such release is permitted or 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 the applicable local, state, and federal laws and institutional guidelines.
- 2.2 Members shall be familiar with and adhere to all National Athletic Trainers' Association guidelines and ethical standards.
- 2.3 Members are encourages to report illegal and unethical practice pertaining to athletic training to the appropriate person or authority.
- 2.4 Members shall avoid substance abuse when necessary, seek rehabilitation for chemical dependency.

**PRINCIPLE 3:**

**Members shall accept responsibility for the exercise of sound judgment.**

- 3.1 Members shall not misrepresent in any manner, either directly or indirectly, their skills, training, professional credential, identity or services.
- 3.2 Members shall provide only those services for which they are qualified via education and/or experience and by pertinent legal regulatory process.
- 3.3 Members shall provide services, make referrals, and seek compensation only for those services which are necessary.

**PRINCIPLE 4:**

**Members shall maintain and promote high standards in the provision of services.**

- 4.1 Members shall recognize the need for continuing education and participate in various types of educational activities that enhance their skills and knowledge.

- 4.2 Members who have the responsibility for employing and evaluating the performance of other staff members shall fulfill such responsibility in a fair, considerate, and equitable manner on the basis of clearly enunciated criteria.
- 4.3 Members, who have the responsibility for evaluating the performance of employees, supervisees, or students, are encouraged to share evaluations with them and allow them the opportunity to respond to those evaluations.
- 4.4 Members shall educate those whom they supervise in the practice of athletic training with regard to the Code of Ethics and encourage their adherence to it.
- 4.5 Whenever possible, members are encouraged to participate and support others in the conduct and communication of research and educational activities that may contribute knowledge for improved patient care, patient or student education, and the growth of athletic training as a profession.
- 4.6 When members are researchers or educators, they are responsible for maintaining and promoting ethical conduct in research and educational activities.

**PRINCIPLE 5:**

**Members shall not engage in any form of conduct that constitutes a conflict of interest or that adversely reflects on the profession.**

- 5.1 The private conduct of the member is a personal matter to the same degree as is any other person's excepts when such conduct compromises the fulfillment of professional responsibilities.
- 5.2 Members of the National Athletic Trainers' Association and others serving on the Association's committees or acting as consultants shall not use, directly or by implication, the Association's name or logo or their affiliation with the Association in the endorsement of products or services.
- 5.3 Members shall not place financial gain above the welfare of the patient being treated and shall not participate in any arrangement that exploits the patient.
- 5.4 Members may seek remuneration for their services that is commensurate with their services and in compliance with applicable law.

**Appendix B. Foundational Behaviors of Professional Practice**

From the: **ATHLETIC TRAINING EDUCATION COMPETENCIES**, 5<sup>th</sup> Edition  
(for complete document see <http://www.nata.org/education/competencies>)

**“Foundational Behaviors of Professional Practice**

These basic behaviors permeate professional practice and should be incorporated into instruction and assessed throughout the educational program.

**Primacy of the Patient**

- ◆ Recognize sources of conflict of interest that can impact the client's/patient's health.
- ◆ Know and apply the commonly accepted standards for patient confidentiality.
- ◆ Provide the best healthcare available for the client/patient.
- ◆ Advocate for the needs of the client/patient.

**Team Approach to Practice**

- ◆ Recognize the unique skills and abilities of other healthcare professionals.
- ◆ Understand the scope of practice of other healthcare professionals.
- ◆ Execute duties within the identified scope of practice for athletic trainers.
- ◆ Include the patient (and family, where appropriate) in the decision-making process.

- ♦ Work with others in effecting positive patient outcomes.

#### **Legal Practice**

- ♦ Practice athletic training in a legally competent manner.
- ♦ Identify and conform to the laws that govern athletic training.
- ♦ Understand the consequences of violating the laws that govern athletic training.

#### **Ethical Practice**

- ♦ Comply with the NATA's *Code of Ethics* and the BOC's *Standards of Professional Practice*.
- ♦ Understand the consequences of violating the NATA's *Code of Ethics* and BOC's *Standards of Professional Practice*.
- ♦ Comply with other codes of ethics, as applicable.

#### **Advancing Knowledge**

- ♦ Critically examine the body of knowledge in athletic training and related fields.
- ♦ Use evidence-based practice as a foundation for the delivery of care.
- ♦ Appreciate the connection between continuing education and the improvement of athletic training practice.
- ♦ Promote the value of research and scholarship in athletic training.
- ♦ Disseminate new knowledge in athletic training to fellow athletic trainers, clients/patients, other healthcare professionals, and others as necessary.

#### **Cultural Competence**

- ♦ Demonstrate awareness of the impact that clients'/patients' cultural differences have on their attitudes and behaviors toward healthcare.
- ♦ Demonstrate knowledge, attitudes, behaviors, and skills necessary to achieve optimal health outcomes for diverse patient populations.
- ♦ Work respectfully and effectively with diverse populations and in a diverse work environment.

#### **Professionalism**

- ♦ Advocate for the profession.
- ♦ Demonstrate honesty and integrity.
- ♦ Exhibit compassion and empathy.
- ♦ Demonstrate effective interpersonal communication skills.”

### **Appendix C. BOC Standards of Professional Practice and Code of Professional Responsibility**

©Board of Certification, Inc.

Implemented January 1, 2006

#### **BOC Standards of Professional Practice**

##### **Introduction**

The mission of the Board of Certification Inc. (BOC) is to provide exceptional credentialing programs for healthcare professionals. The BOC has been responsible for the certification of Athletic Trainers since 1969. Upon its inception, the BOC was a division of the professional membership organization the National Athletic Trainers' Association. However, in 1989, the BOC became an independent non-profit corporation. Accordingly, the BOC provides a certification program for the entry-level Athletic Trainer

that confers the ATC® credential and establishes requirements for maintaining status as a Certified Athletic Trainer (to be referred to as “Athletic Trainer” from this point forward). A nine member Board of Directors governs the BOC. There are six Athletic Trainer Directors, one Physician Director, one Public Director and one Corporate/Educational Director. The BOC is the only accredited certification program for Athletic Trainers in the United States. Every five years, the BOC must undergo review and re-accreditation by the National Commission for Certifying Agencies (NCCA). The NCCA is the accreditation body of the National Organization for Competency Assurance.

The *BOC Standards of Professional Practice* consists of two sections:

I. Practice Standards

II. Code of Professional Responsibility

## **I. Practice Standards**

### **Preamble**

The Practice Standards (Standards) establish essential practice expectations for all Athletic Trainers. Compliance with the Standards is mandatory.

The Standards are intended to:

- assist the public in understanding what to expect from an Athletic Trainer
- assist the Athletic Trainer in evaluating the quality of patient care
- assist the Athletic Trainer in understanding the duties and obligations imposed by virtue of holding the ATC® credential

The Standards are NOT intended to:

- prescribe services
- provide step-by-step procedures
- ensure specific patient outcomes

The BOC does not express an opinion on the competence or warrant job performance of credential holders; however, every Athletic Trainer and applicant must agree to comply with the Standards at all times.

### **Standard 1: Direction**

The Athletic Trainer renders service or treatment under the direction of a physician.

### **Standard 2: Prevention**

The Athletic Trainer understands and uses preventive measures to ensure the highest quality of care for every patient.

### **Standard 3: Immediate Care**

The Athletic Trainer provides standard immediate care procedures used in emergency situations, independent of setting.

### **Standard 4: Clinical Evaluation and Diagnosis**

Prior to treatment, the Athletic Trainer assesses the patient’s level of function. The patient’s input is considered an integral part of the initial assessment. The Athletic Trainer follows standardized clinical practice in the area of diagnostic reasoning and medical decision making.

### **Standard 5: Treatment, Rehabilitation and Reconditioning**



In development of a treatment program, the Athletic Trainer determines appropriate treatment, rehabilitation and/or reconditioning strategies. Treatment program objectives include long and short-term goals and an appraisal of those which the patient can realistically be expected to achieve from the program. Assessment measures to determine effectiveness of the program are incorporated into the program.

#### **Standard 6: Program Discontinuation**

The Athletic Trainer, with collaboration of the physician, recommends discontinuation of the athletic training service when the patient has received optimal benefit of the program. The Athletic Trainer, at the time of discontinuation, notes the final assessment of the patient's status.

#### **Standard 7: Organization and Administration**

All services are documented in writing by the Athletic Trainer and are part of the patient's permanent records. The Athletic Trainer accepts responsibility for recording details of the patient's health status.

## **II. Code of Professional Responsibility**

### **Preamble**

The Code of Professional Responsibility (Code) mandates that BOC credential holders and applicants act in a professionally responsible manner in all athletic training services and activities. The BOC requires all Athletic Trainers and applicants to comply with the Code. The BOC may discipline, revoke or take other action with regard to the application or certification of an individual that does not adhere to the Code. The *Professional Practice and Discipline Guidelines and Procedures* may be accessed via the BOC website, [www.bocadc.org](http://www.bocadc.org).

### **Code 1: Patient Responsibility**

The Athletic Trainer or applicant:

- 1.1 Renders quality patient care regardless of the patient's race, religion, age, sex, nationality, disability, social/economic status or any other characteristic protected by law
- 1.2 Protects the patient from harm, acts always in the patient's best interests and is an advocate for the patient's welfare
- 1.3 Takes appropriate action to protect patients from Athletic Trainers, other healthcare providers or athletic training students who are incompetent, impaired or engaged in illegal or unethical practice
- 1.4 Maintains the confidentiality of patient information in accordance with applicable law
- 1.5 Communicates clearly and truthfully with patients and other persons involved in the patient's program, including, but not limited to, appropriate discussion of assessment results, program plans and progress
- 1.6 Respects and safeguards his or her relationship of trust and confidence with the patient and does not exploit his or her relationship with the patient for personal or financial gain
- 1.7 Exercises reasonable care, skill and judgment in all professional work

### **Code 2: Competency**

The Athletic Trainer or applicant:

- 2.1 Engages in lifelong, professional and continuing educational activities
- 2.2 Participates in continuous quality improvement activities
- 2.3 Complies with the most current BOC recertification policies and requirements

### **Code 3: Professional Responsibility**

The Athletic Trainer or applicant:

- 3.1 Practices in accordance with the most current BOC Practice Standards
- 3.2 Knows and complies with applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training

- 3.3 Collaborates and cooperates with other healthcare providers involved in a patient's care
- 3.4 Respects the expertise and responsibility of all healthcare providers involved in a patient's care
- 3.5 Reports any suspected or known violation of a rule, requirement, regulation or law by him/herself and/or by another Athletic Trainer that is related to the practice of athletic training, public health, patient care or education
- 3.6 Reports any criminal convictions (with the exception of misdemeanor traffic offenses or traffic ordinance violations that do not involve the use of alcohol or drugs) and/or professional suspension, discipline or sanction received by him/herself or by another Athletic Trainer that is related to athletic training, public health, patient care or education
- 3.7 Complies with all BOC exam eligibility requirements and ensures that any information provided to the BOC in connection with any certification application is accurate and truthful
- 3.8 Does not, without proper authority, possess, use, copy, access, distribute or discuss certification exams, score reports, answer sheets, certificates, certificant or applicant files, documents or other materials
- 3.9 Is candid, responsible and truthful in making any statement to the BOC, and in making any statement in connection with athletic training to the public
- 3.10 Complies with all confidentiality and disclosure requirements of the BOC
- 3.11 Does not take any action that leads, or may lead, to the conviction, plea of guilty or plea of nolo contendere (no contest) to any felony or to a misdemeanor related to public health, patient care, athletics or education; this includes, but is not limited to: rape; sexual abuse of a child or patient; actual or threatened use of a weapon of violence; the prohibited sale or distribution of controlled substance, or its possession with the intent to distribute; or the use of the position of an Athletic Trainer to improperly influence the outcome or score of an athletic contest or event or in connection with any gambling activity
- 3.12 Cooperates with BOC investigations into alleged illegal or unethical activities; this includes but is not limited to, providing factual and non-misleading information and responding to requests for information in a timely fashion
- 3.13 Does not endorse or advertise products or services with the use of, or by reference to, the BOC name without proper authorization

#### **Code 4: Research**

The Athletic Trainer or applicant who engages in research:

- 4.1 Conducts research according to accepted ethical research and reporting standards established by public law, institutional procedures and/or the health professions
- 4.2 Protects the rights and well being of research subjects
- 4.3 Conducts research activities with the goal of improving practice, education and public policy relative to the health needs of diverse populations, the health workforce, the organization and administration of health systems and healthcare delivery

#### **Code 5: Social Responsibility**

The Athletic Trainer or applicant:

- 5.1 Uses professional skills and knowledge to positively impact the community

#### **Code 6: Business Practices**

The Athletic Trainer or applicant:

- 6.1 Refrains from deceptive or fraudulent business practices
- 6.2 Maintains adequate and customary professional liability insurance ©Board of Certification, Inc.

## **Appendix D. BOC CERTIFICATION EXAMINATION**

**From “BOC Exam Candidate Handbook” (January 2012)**

<http://www.bocatc.org/images/stories/candidates/candidatehandbook2012.pdf>

**All senior athletic training students should read the entire BOC Exam Candidate Handbook prior to registering for the exam.**

The Board of Certification, Inc. (BOC) has been responsible for certification of Athletic Trainers since 1969. Upon inception, the BOC was an entity of the professional membership organization the National Athletic Trainers’ Association (NATA). However, in 1989, the BOC became an independent non-profit corporation. The mission of the BOC is “to provide exceptional credentialing programs for healthcare professionals to assure protection of the public.” Accordingly, the BOC provides a certification program for the entry-level Athletic Trainer and establishes requirements for maintaining status as a Certified Athletic Trainer. Currently, more than 39,000 individuals hold the ATC® credential.

In order to attain certification, an individual must graduate from an athletic training education program accredited by the Commission on Accreditation of Athletic Training Education (CAATE) with a Bachelor’s or Master’s degree and pass the BOC certification exam.

### **BOC Exam Security and Confidentiality**

#### **I. Ethical Behavior**

Soliciting questions from candidates who have previously taken the exam is unethical for several reasons:

A. Candidates are expected to pass the exam based on their own merit without assistance. The members of the public who entrust the ATC® credential with their health and well-being expect that the credential holder is a trustworthy and competent individual.

B. The purpose of the BOC exam is to protect the public by ensuring that candidates for certification have achieved entry-level competence. By asking previous exam takers to share questions, a candidate undermines the very purpose of the exam.

C. By soliciting questions from previous exam candidates who have accepted the security agreements, an individual is encouraging candidates to commit illegal acts.

#### **II. Security Violations**

In some instances, fellow students may be a good resource for learning about questions on previous exams. This is not the case when preparing for the BOC exam. It is illegal and unethical to recall (memorize) and share questions that are on the BOC exam. During exam day registration, candidates are required to attest online to their intent to keep the contents of the exam confidential. As such, candidates may not solicit questions or discuss items that were on previous exams with other BOC candidates or individuals who hold the ATC® credential. Recalling questions from the exam and sharing them with anyone else violates the confidentiality agreement and Federal Copyright Laws. The BOC will prosecute violations of this agreement. Violation of the confidentiality agreement is also a violation of *BOC Standards of Professional Practice*, which can result in suspension or revocation of certification from those who have earned it or suspension or denial of eligibility for future exams for candidates found to have violated their confidentiality agreement.

For more information on the BOC exam please visit: [www.bocatc.org](http://www.bocatc.org)

West Chester University  
Department of Sports Medicine  
Athletic Training Education Program

Acceptance of Policy and Procedure Manual

I, \_\_\_\_\_ (print name) have read and understand the policies, procedures and information included in this policy and procedure manual. I understand that I must abide by all of the requirements, academically and clinically, as well as policies and procedures for the Athletic Training Education Program at West Chester University.

By signing my name below I confirm that I have a received and read a copy of the manual thoroughly and have been given an opportunity to ask any questions that I have regarding the Policy and Procedure Manual.

\_\_\_\_\_ Date \_\_\_\_\_  
Athletic Training Student Signature

**The provisions of this document are not regarded as an irrevocable contract between the student and the program or University. West Chester University's athletic training education program reserves the right to change any provisions or requirements at any time. Updates to this manual will be made in late in the spring each year and will posted directly to the program's web site: <http://www.wcupa.edu/academics/healthsciences/sportsmed/>**