



*Department of
Physical Education, Sport,
and Human Performance*

**Master of Science in Athletic Training
Student Handbook
2025 - 2026**

Revised May 2025

TABLE OF CONTENTS

Purpose of the Master of Science in Athletic Training Student Handbook	4
Program Directory: Academic Faculty and Staff.....	5
Richard W. Riley College of Education, Sport, and Human Science	6
Department of Physical Education, Sport, and Human Performance	6
MS-ATRN Mission Statement.....	6
MS-ATRN Vision Statement	6
MS-ATRN Program Goals	7
MS-ATRN Program Accreditation.....	7
Admission Requirements	7
3+2 Students	7
Post-baccalaureate Students.....	7
Admission Requirements.....	8
Technical Standards for Admission to the MS-ATRN.....	9
MS-ATRN Academic Program.....	10
Academic Expectations and Guidelines	
Course Sequencing Requirement.....	11
Transfer Credit.....	11
Student Advising	11
Student Rights and Responsibilities	11
Student Academic Progression.....	12
Graduate School Policy on Academic Probation	12
Student Costs	13
Clinical Expectations and Guidelines	
Clinical Education Plan	14
General Clinical Experience Guidelines.....	15
Clinical Experience Assignments.....	16
Emergency Cardiac Care	16
Criminal Background Checks	16
Drug Testing	16
Potential Risks	17
Liability Information / Insurance.....	17
Clinical Rotation Hours / Attendance	17
Clinical Experience Evaluation / Grading.....	18
Professional Relationships / Interactions	19
Professional Appearance.....	20
General Program Expectations and Guidelines	
Professional Memberships	22
Program Communication	22
In-Service Training	22

<u>Retention Policy</u>	23
<u>Athletic Training Ethics and Values</u>	23
<u>Nondiscrimination Policy</u>	23
<u>Sexual Harassment</u>	23
<u>HIPAA Regulations and Patient Confidentiality</u>	24
<u>Communicable and Infectious Disease Policy</u>	25
<u>Immunization Policy</u>	25
<u>Bloodborne Pathogen Policy</u>	26
<u>Minor Patients and Student Aides</u>	29
<u>Non-departmental Social Media and Messaging</u>	29
<u>Academic Integrity</u>	30
<u>Artificial Intelligence</u>	30
<u>Accessibility Accommodations</u>	30
<u>Health and Counseling Services</u>	30
<u>Inclement Weather</u>	31
<u>Performance Expectations</u>	
<u>Program Suspension or Dismissal</u>	32
<u>Appeal and Grievance Procedures</u>	33
<u>Student Organizations</u>	
<u>Athletic Training Club</u>	34
<u>Phi Epsilon Kappa</u>	34
<u>Awards</u>	
<u>Maeberta Bobb Scholarship</u>	35
Appendices	
<u>Appendix A: Academic and Clinical Benchmarks Assessment / Clinical Immersion Readiness</u> <u>Rubric</u>	36
<u>Appendix B: Professional Organization Mission and Vision Statements</u>	41
<u>Appendix C: NATA Code of Ethics and Shared Professional Values</u>	42
<u>Appendix D: BOC Standards of Professional Practice</u>	46

PURPOSE OF THE MASTER OF SCIENCE IN ATHLETIC TRAINING STUDENT HANDBOOK

The purpose of the Master of Science in Athletic Training Student Handbook is to provide information specific to the Master of Science in Athletic Training Program at Winthrop University (MS-ATRN). The handbook provides a brief outline of the academic program, clinical experience responsibilities, and guidelines for professional conduct. Specific administrative guidelines and patient management protocols are not within the scope of this handbook. It is the duty of each athletic training student to know and understand the contents of this document. It is the student's responsibility to seek clarification for items that are not clear.

This handbook is a supplement to the Winthrop University Graduate Catalog that may be accessed through the Winthrop Graduate School website. Students are encouraged to use this handbook as a reference and guide throughout their time as an MS-ATRN student at Winthrop University.

Review this handbook and keep it throughout your tenure in the MS-ATRN. Any updated information will be provided as necessary.

PROGRAM DIRECTORY

Academic Faculty and Staff

Full-time Faculty

Alice J. McLaine, PhD, LAT, ATC
Program Director
PESH Department Chair
216E West Center; 803-323-4686
mclainea@winthrop.edu

Martha Rivera, EdD, LAT, ATC
Coordinator of Clinical Education
216A West Center; 803-323-4740
dettlriveram@winthrop.edu

Anna Boddicker, DAT, LAT, ATC
216J West Center; 803-323-
boddickera@winthrop.edu

Adjunct Faculty

Brett Boddicker, DAT, LAT, ATC
boddickerb@winthrop.edu

Jade Gail, DAT, LAT, ATC
gailj@winthrop.edu

Medical Director

Barrett A. Little, MD
601 S. Sutton Rd., Suite 101
Fort Mill, SC 29715

Preceptors

A list of preceptors active in each semester is provided to students by the Coordinator of Clinical Education.

RICHARD W. RILEY COLLEGE OF EDUCATION, SPORT, AND HUMAN SCIENCES

The Richard W. Riley College of Education, Sport, and Human Sciences (CESHS) provides professional programs grounded in experiential learning and opportunities. With a dedication to ensuring programs prepare graduates for contemporary challenges and opportunities, the programs in education, health, human sciences, and sport stay connected through professional partnerships that inform curricula, experiences, and direction.

CESHS Mission Statement

We are a student-focused, collaborative community fostering a capacity for innovation, inclusion, investment, and intention. We facilitate exploration, discovery, and professional readiness through academic and clinical experiences within community partnerships. Through the contributions of our diverse students, staff, and faculty, we uphold our rich legacy of positively influencing the world.

CESHS Vision Statement

We prepare graduates to become innovative, intentional, and inclusive leaders who invest in their communities.

CESHS Values

Through a culture of innovation, we foster creative exploration.
Through purposeful inclusion, we cultivate collaborative and open communities.
Through strategic investment, we encourage adaptability and facilitate engagement.
Through focused intention, we promote positive change.

DEPARTMENT OF PHYSICAL EDUCATION, SPORT, AND HUMAN PERFORMANCE

The Department of Physical Education, Sport, and Human Performance (PESH) is dedicated to preparing leaders in athletic training, exercise science, physical education teacher education, sport management, and athletic administration at both the undergraduate and graduate levels. The Department meets this mission by preparing professionals who are dedicated to the improvement of health and wellness in the community, state, and nation, as well as the development of sport professionals prepared to meet the demands of the 21st century. All graduates are devoted to excellence in learning, leadership, stewardship, and collaboration.

MS-ATRN MISSION STATEMENT

The mission of the Winthrop University Master of Science in Athletic Training (MS-ATRN) is to utilize evidence-based didactic and clinical education to continue a rich tradition of preparing a diverse population of athletic training professionals. Students will develop appropriate knowledge, skills, and clinical abilities to function as resilient leaders of an interprofessional healthcare team. They will provide ethical, compassionate, evidence-based, patient-centered care to all patients, and will demonstrate commitment to on-going professional engagement and continuing education.

MS-ATRN VISION STATEMENT

The Winthrop University Master of Science in Athletic Training program will be a program of recognized excellence that prepares future athletic trainers to excel as adaptable, compassionate professionals who embrace continuous growth, drive meaningful advancements in healthcare, and enhance the well-being of individuals and communities through skilled and thoughtful care.

MS-ATRN PROGRAM GOALS

- The student will demonstrate the knowledge, skills, and clinical abilities appropriate for entry-level practice as an athletic trainer.
- The student will demonstrate the ability to apply the principles of evidence-based practice (unbiased research, clinical expertise, patient/client values and circumstances) to clinical decision making.
- The student will demonstrate the ability to recognize clients/patients with behavioral health conditions and to intervene and refer these individuals as necessary.
- The student will demonstrate competent written and verbal communication skills.
- The student will demonstrate appropriate professional and ethical conduct in compliance with the National Athletic Trainers' Association (NATA) Code of Ethics and the Board of Certification (BOC) Standards of Professional Practice.
- The student will demonstrate understanding of and compliance with the laws that regulate the practice of athletic training.
- The student will effectively collaborate with other healthcare providers to provide patient centered care.
- The student will demonstrate emerging and developing reflective, evidence-based clinical practice.
- The student will demonstrate understanding of the importance of continuing education and professional involvement.

MS-ATRN PROGRAM ACCREDITATION

The Winthrop University MS-ATRN is accredited by the Commission on Accreditation of Athletic Training Education (CAATE). For review of the CAATE Accreditation Standards, please visit the CAATE website at <https://caate.net>

ADMISSION REQUIREMENTS

Two paths for admission:

- **3+2 Students:** Students who enter Winthrop University as undergraduates will pursue the 3+2 MS-ATRN which earns a Bachelor of Science in Exercise Science and the MS-ATRN at the conclusion of five years of study. Students in this program will select a major in Exercise Science, with an Athletic Training concentration. These students will complete the required prerequisite course work and all application requirements and apply for admission into the MS-ATRN by February 15 of the third year. If admitted into the MS-ATRN, graduate course work for the MS-ATRN begins in the summer following the third year. The final two years require year-round coursework (summer, fall, spring).
- **Post-baccalaureate Students:** Students who have completed a baccalaureate degree may apply directly to the MS-ATRN program. Such applicants must meet all application requirements and apply for admission by February 15. If admitted into the MS-ATRN, coursework will begin in the summer semester of the same year. The MS-ATRN requires year-round coursework (summer, fall, spring). Students completing this program will earn the MS-ATRN.

Admission Requirements for All Prospective Students

- Submit formal application by February 15 (earlier rolling admission may be available).
- Overall undergraduate GPA of 2.8 or greater.
- Complete the following required coursework with a C or better:
 - Human Anatomy or Anatomy & Physiology I with lab
 - Human Physiology or Anatomy & Physiology II with lab
 - General Biology
 - General Physics
 - General Chemistry
 - General Psychology
- Complete the following preferred course work with a C or better (if possible):
 - Human Nutrition
 - Biomechanics
 - Exercise Physiology
- Current certification from the Red Cross or the American Heart Association in CPR and AED.
- Documentation of 75 hours of observation with certified athletic trainers.
- Two recommendations from individuals who can verify applicant's aptitude for graduate study.
- Non-native English speakers must submit a TOEFL score of at least 550 on the paper-based test or at least 79 on the internet-based test, an IELTS score of at least 6 or successful completion of level 112 of the Intensive English for Academic Purposes Program from an English Language School (ELS) center.
- Successful completion of an invited interview with the MS-ATRN Selection Committee.
- Formal applications will be submitted through the Athletic Training Common Application System (ATCAS). For each application cycle, there is a fee paid directly to ATCAS.
- Admission into the MS-ATRN is a competitive process; completion of all application / admission requirements does not guarantee admission into the MS-ATRN.

TECHNICAL STANDARDS FOR ADMISSION TO THE MS-ATRN

The Winthrop University Athletic Training Program is a rigorous and physically intense program that places specific requirements and demands on the students enrolled in the program. The objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activities. The technical standards set forth by the Athletic Training Program establish the essential competencies considered necessary for students admitted to this program to achieve the knowledge and skills necessary for an entry-level athletic trainer, as well as meet the expectations of the program's accrediting agency, the Commission on Accreditation of Athletic Training Education.

Each candidate is required to demonstrate the capacity to engage in all aspects of the professional Athletic Training Program, including course work and clinical rotations. If a student is unable to meet these technical standards, the student will not be allowed to remain in or graduate from the Athletic Training Program.

Students must demonstrate:

- The 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.
- The ability to perform appropriate physical examinations using accepted techniques and accurately, safely, and efficiently use equipment and materials during the assessment and treatment of patients.
- 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 communicate effectively using the English language at a level consistent with competent professional practice.
- The ability to record the physical examination results and treatment plan clearly and accurately.
- The capacity to maintain composure and continue to function well during periods of high stress.
- The perseverance, diligence, and commitment to complete the Athletic Training Program as outlined and sequenced.
- Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
- Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

Candidates for selection to the Athletic Training program will be required to verify they understand and acknowledge that they believe they can meet the technical standards. Compliance with the program's technical standards does not guarantee a student's eligibility for the BOC exam.

Winthrop University is committed to providing reasonable accommodations for individuals with documented disabilities in a fair and equitable manner. Students who anticipate or experience academic barriers due to a disability are encouraged to contact Winthrop's Office of Accessibility (OA) via phone at 803/323-3290 or via e-mail at accessibility@winthrop.edu for information on how to request reasonable accommodations.

MS-ATRN Academic Program*

Year One

Summer Semester

ATRN505 Essential Skills for Athletic Training	2 credits
ATRN515 Emergency Aspects of Athletic Training	2 credits
ATRN530 Assessment & Management of Athletic Injuries & Conditions I	4 credits
ATRN550 Therapeutic Interventions I	4 credits

Fall Semester

ATRN501 Clinical Experience in Athletic Training I	2 credits
ATRN520 Professional Practice in Athletic Training I: EBP	2 credits
ATRN525 Professional Practice in Athletic Training II: Administration	2 credits
ATRN535 Assessment & Management of Athletic Injuries & Conditions II	4 credits
NUTR520 Sport Nutrition	3 credits

Spring Semester

ATRN601 Clinical Experience in Athletic Training III	2 credits
ATRN620 Professional Practice in Athletic Training III	3 credits
ATRN630 Medical Conditions & Pharmacology	4 credits
ATRN650 Therapeutic Interventions II	4 credits

Year Two

Summer Semester

ATRN602 Clinical Experience in Athletic Training IV	2 credits
ATRN660 Medical Skills, Imaging, & Testing	3 credits
ATRN670 Movement Analysis	3 credits

Fall Semester

ATRN603 Clinical Experience in Athletic Training V	3 credits
ATRN680 BOC Certification Exam Preparation	1 credit
SPFA681 Research in Sport and Fitness	3 credits
SPFA690 Advanced Sport and Exercise Psychology	3 credits

Spring Semester

ATRN604 Clinical Experience in Athletic Training VI	3 credits
ATRN680 BOC Certification Exam Preparation	1 credit
SPFA610 Legal Aspects	3 credits

*Occasional changes in the sequence of classes may occur due to external demands on faculty. Any changes in sequence will be communicated to students by the Program Director or other appropriate program faculty.

ACADEMIC EXPECTATIONS AND GUIDELINES

COURSE SEQUENCING REQUIREMENT

The courses in the curriculum for the MS-ATRN are sequenced such that each course builds upon prior courses in content and knowledge development. Therefore, courses must be taken in sequence in accordance with the curriculum. Exceptions are considered in the case of extenuating circumstances and must receive Program Director approval. Occasional changes in the sequence of classes may occur due to external demands on faculty. Any changes in sequence will be communicated to students by the Program Director or other appropriate program faculty

TRANSFER CREDIT

No transfer credits will be applied toward the MS-ATRN degree program. Regardless of a student's previously earned graduate degree or professional credentials, graduate credits taken outside of the MS-ATRN program will not be applied towards completion of the MS-ATRN degree.

STUDENT ADVISING

Upon matriculation students will be assigned a faculty advisor, typically the Program Director. The role of the faculty advisor is to assist students in progressing through their academic program of study. Students progress through the MS-ATRN in a cohort model, therefore, guidance regarding course registration will typically occur in a group setting. All faculty members are available to meet with students for individual advising and to assist students in addressing academic issues that impact their progress in the program. Students are responsible for contacting their advisor as needed during their course of study at Winthrop.

STUDENTS RIGHTS AND RESPONSIBILITIES

In keeping with the philosophy and purpose of Winthrop University, each student in the MS-ATRN program has the right to a quality education that prepares him or her for practice in the athletic training profession and has the right to be treated fairly and respectfully by members of the athletic training faculty and staff.

MS-ATRN students have the following rights related to their education:

- Time to consult with their faculty adviser and/or course instructor concerning their educational process.
- Comprehensive course syllabi that clearly state learning outcomes upon which respective courses and grades are based. Each course syllabus is viewed as an individual course contract to be fulfilled by the instructor and the student, both having specific responsibilities and obligations.
- Appropriate course quality and teaching competence for achieving the goal of the stated learning outcomes.
- An environment conducive to learning where they are treated with respect and compassion.
- Fair grading based on evaluations relevant to content and purpose of the course and to be informed regarding the quality of their work.
- Classes that start on time and to receive appropriate notification of the absence of an instructor.
- To evaluate both the course and instructor through end-of-semester course evaluations.

MS-ATRN students have the following responsibilities related to their education:

- Attend all classes and clinical experiences.
- Punctual arrival at all classes and clinical experiences.
- Purchase (or rent) all required course materials, textbooks, etc.
- Complete all assignments with appropriate quality and by the designated deadline.
- Participate in all required academic and clinical experiences with appropriate attitude and engagement.
- Take initiative and responsibility for one's own learning with minimal direction.
- Communicate professionally in written and verbal interactions.
- Treat peers, faculty, preceptors, patients, health care providers, and other stakeholders with respect.
- Use technology for classes and clinical experiences in an appropriate and professional manner.

EXPECTED STUDENT PRIORITIES

While a student is enrolled in the MS-ATRN, it is expected that they will prioritize the academic and clinical responsibilities of the program. Family and military responsibilities will be accommodated suitably by program faculty. Appropriate advance notice of such responsibilities is required. Outside employment must be arranged so that it does not conflict with the required academic and clinical responsibilities.

STUDENT ACADEMIC PROGRESSION

Student progression through MS-ATRN coursework is reviewed by faculty at the end of each semester. It is expected that students earn a grade "B" or above in all course work and maintain a cumulative 3.00gpa throughout their time in the program.

If a student earns a grade below "B" in any course, a remediation plan for the content in the course will be developed. If the course is an ATRN course, the faculty member who teaches the course will develop and supervise the remediation plan. If the course is not an ATRN course, one of the ATRN faculty members will develop the remediation plan in consultation with the external faculty member who taught the class and supervise the remediation plan. Completion of a remediation plan should occur within six months of the conclusion of the class or by graduation.

GRADUATE SCHOOL POLICY ON ACADEMIC PROBATION

The first semester a student's cumulative grade-point average falls below a 3.00, he or she is placed on academic probation. Students on academic probation typically may not enroll in more than 9 semester hours per semester. Since the MS-ATRN follows a cohort model, a student on academic probation will be allowed to enroll in the required courses for the semester. A student on academic probation whose semester grade-point average is 3.00 or higher is not dismissed at the close of that semester even though the cumulative grade-point average remains below 3.00. The student may continue enrollment on academic probation. The student is removed from academic probation at the close of a semester in which the cumulative grade-point average meets or exceeds 3.00.

Students on probation in cohort programs requiring more than nine hours a semester and whose semester grade point average is 3.0 or higher are not dismissed at the close of that semester even though the cumulative grade point average remains below 3.0. If a student repeats one or two courses while on academic probation, the new grade replaces the original grade in the calculation of the grade-point average.

STUDENT COSTS

In addition to university tuition and fees ([graduate fees](#)), some athletic training courses have associated fees related to supplies and materials. Below are the courses, fees and purpose of the fees:

Course	Fee	Purpose
ATRN501	\$75.00	Program shirts; orientation materials
ATRN505	\$125.00	Tape scissors & expendable supplies: tape, pre-wrap, etc.
ATRN515	\$50.00	Emergency care expendable supplies; ECC credential
ATRN520	\$30.00	Program expenses
ATRN530	\$90.00	Program expenses: liability insurance, checks, initial drug testing
ATRN550	\$50.00	Student materials and expendable supplies: massage lotion, etc.
ATRN601	\$70.00	Program shirts
ATRN602	\$30.00	Program shirt
ATRN603	\$30.00	ECC credential renewal
ATRN620	\$30.00	Mental health / psycho-social external credentials
ATRN650	\$25.00	Student materials
ATRN660	\$100.00	Expendable supplies

Other costs not included in course fees:

- NATA Membership
- Clothing: Students are given Athletic Training Program shirts each year. Additional Athletic Training Program clothing may be purchased at cost. Students must have cotton twill pants/shorts to wear during their clinical experiences.
- Transportation: There are travel costs that are associated with off-campus clinical rotations which typically include access to a vehicle.
- Housing: If a student selects an out-of-area Clinical Immersion site, additional housing costs may be incurred.
- Meals: Students should not expect meals to be provided by clinical rotation sites. Food costs may be incurred.
- 2-Step TB Test: If required by site, this test will need to be completed prior to beginning a clinical rotation. The 2-step TB test is different from the usual 1-step TB Test (PPD skin test). Should a student receive a positive TB test, the student may incur additional medical costs.
- Follow-up Drug Test: If an initial drug test is not definitive, follow-up testing may be required. Any required follow-up drug test costs will be paid by the student.
- Professional Conference Attendance: Students are required to attend or present at one professional conference during their enrollment in the program. The Athletic Training Club may seek financial support from student allocations to help keep these costs as low as possible.

CLINICAL EXPECTATIONS AND GUIDELINES

CLINICAL EDUCATION PLAN

Clinical experience is a key factor in the development of an athletic training student's skills to prepare for independent clinical practice. Research indicates that a significant amount of a student's knowledge is obtained in the clinical setting. For a student to gain the most from clinical experience, they should have complimentary didactic course work prior to or concurrent with the clinical experience. Students are required to enroll in five clinical experience courses while they are enrolled in the MS-ATRN. Clinical experiences must be completed in a setting that is formally affiliated with the MS-ATRN and Winthrop University and with a preceptor who is trained by program faculty. The clinical experiences are designed to allow the student the opportunity to move from classroom theory and laboratory practice to application of skills with actual athletes/patients.

Each athletic training student is assigned to a particular preceptor or small group of preceptors for a specified amount of time to increase the opportunities for the student to work on specific clinical skills and receive consistent feedback and correction. Preceptors are licensed health care professionals that are credentialed by the state in which they practice. Such assignment allows the preceptor(s) to measure the student's skill development over time. While each semester has a particular clinical focus, it is recognized that review of skills and information gained in previous experiences will occur each semester.

The CAATE requires that the educational process for athletic training students includes clinical experiences with a variety of populations: individual and team sports, sports requiring protective equipment, male and female patients, non-sport patient populations, and non-orthopedic conditions. Traditional athletic training experiences are obtained with preceptors at Winthrop University, other collegiate settings, or high school settings. Equipment intensive experience is gained with preceptors working with local high school football programs or at local colleges. Non-orthopedic conditions may be seen in the traditional setting but are emphasized during rotations at medical offices and industrial settings.

The following clinical experience courses are part of the MS-ATRN curriculum:

ATRN501 (2 cr) Clinical Experience in Athletic Training I

This course is the introductory clinical experience for students admitted into the Athletic Training Program and provides opportunities for application of skills in a clinical setting. All experiences are obtained under the direct supervision of a certified athletic trainer. Emphasis will be on assessment, recognition, and management of injuries and conditions in an athletic population. This course may require participation in pre- and/or post-semester responsibilities that follow the competitive season of the sport(s) being covered in the assigned clinical setting. Pre-requisites: Restricted to students enrolled in the MS in ATRN program, or to students enrolled in BS in Exercise Science with ATRN concentration.

ATRN601 (2cr) Clinical Experience in Athletic Training III

This course is an intermediate clinical experience for students admitted into the Athletic Training Program and provides opportunities for application of skills in a clinical setting. All experiences are obtained under the direct supervision of a certified athletic trainer. Emphasis will be on assessment, recognition, and management of injuries and conditions in an athletic population. This course may require participation in pre- and/or post-semester responsibilities that follow the competitive season of the sport(s) being covered in the assigned clinical setting. Prerequisite: Admission into the MS in Athletic Training Program.

ATRN602 (2cr) Clinical Experience in Athletic Training IV

This course provides clinical experience in orthopedic, general medical, and other non-athletic settings for students admitted into the Athletic Training Program. All experiences are obtained under the direct

supervision of physicians and other medical professionals. Prerequisite: Admission in the MS in Athletic Training Program.

ATRN603 (3cr) Clinical Experience in Athletic Training V

This course provides clinical experience with athletes in an equipment intensive sport setting for students admitted into the Athletic Training Program. All experiences are obtained under the direct supervision of a certified athletic trainer. Emphasis will be on assessment, recognition, and management of injuries and conditions in an athletic population participating in an equipment intensive sport. This course may require participation in pre- and/or post-semester responsibilities that follow the competitive season of the sport(s) being covered in the assigned clinical setting. Prerequisite: Admission into the MS in Athletic Training Program. *This course includes a twelve week immersive component.*

ATRN604 (3cr) Clinical Experience in Athletic Training VI

This course is the final clinical experience for students admitted into the Athletic Training Program and provides opportunities for application of skills in clinical settings. All experiences are obtained under the direct supervision of a certified athletic trainer or allied health professional. Emphasis will be on assessment, recognition, and management of injuries and conditions in an athletic population. This course may require participation in pre- and/or post-semester responsibilities that follow the competitive season of the sport(s) being covered in the assigned clinical setting. Prerequisite: Admission into the MS in Athletic Training Program. *This course includes a seven week immersive component.*

GENERAL CLINICAL EXPERIENCE GUIDELINES

Each clinical experience course has specific clinical skills that are evaluated by the preceptor with the Student Learning Objectives Rubric. There are some general expectations of students during clinical experiences.

- Be an engaged athletic training student. Appropriate attendance, punctuality, communication, attire, and active involvement are expected. “Cheerleading” or non-professional behaviors are inappropriate.
- Become an involved member of the athletic training profession. Develop an enthusiastic and professional attitude in dealing with patients, fellow health care providers, and other involved individuals.
- Become a skillful clinician:
 - Develop necessary and appropriate clinical skills.
 - Demonstrate competence in assessment, recognition, and management of injuries and conditions.
 - Demonstrate competence in selection and application of therapeutic interventions and therapeutic exercise / rehabilitation.
 - Demonstrate proficiency in selection and application of prophylactic and therapeutic taping and wrapping skills.
 - Demonstrate effectiveness in communicating with athletes/patients, allied health professionals, and additional stakeholders in the setting.
 - Demonstrate expertise in maintaining appropriate records pertaining to patient care.

CLINICAL EXPERIENCE ASSIGNMENTS

Students are assigned to clinical experience settings and preceptors by the Coordinator of Clinical Education (CCE) in consultation with MS-ATRN faculty. Clinical experience assignment decisions are based on several number of factors including (but not limited to): previous clinical experiences, needed clinical experiences for program completion, previous academic and clinical performance and competence, and any other factor deemed important by the MS-ATRN faculty.

A student may be removed from a clinical setting during the semester at the request of the clinical setting or based on a decision of the MS-ATRN faculty. If a student is removed from their clinical setting, reasonable efforts will be made to find an alternative site in order to complete the requirements of the clinical experience course in which the student is enrolled. If it is not possible to find an alternative site, it is likely that the student will have to complete the clinical experience course in a subsequent semester. Completion of the clinical course at a later time may delay the student's graduation date.

The final clinical experience course, ATRN604, may be completed in a setting that aligns with the student's professional goals. A student must obtain a minimum score of two (competent) on each criterion of the Academic and Clinical Benchmarks Assessment and on the Clinical Immersion Readiness Rubric (Appendix A) to choose a setting. Such settings may be outside of the normally affiliated settings the MS-ATRN and Winthrop University have established. A student should not attempt to establish a relationship with any setting until they have discussed the setting with the CCE and received permission to do so. The MS-ATRN is required to develop an affiliation agreement or memorandum of understanding with any setting in which a student is obtaining clinical experience.

EMERGENCY CARDIAC CARE

All students enrolled in the MS-ATRN are required to have current certification in emergency cardiac care (ECC) prior to engaging in any athletic training and supplemental clinical experiences. Initial ECC certification is obtained during enrollment in ATRN515. Review of ECC skills will be conducted routinely during the program. Re-certification in ECC skills will be conducted in the final semester(s) of the program. Consistent with the athletic training BOC requirements, the following ECC skills are required to be demonstrated as part of training:

- Adult and pediatric CPR
- Airway obstruction
- 2nd rescuer CPR
- AED
- Barrier devices (e.g., pocket mask, bag valve mask)

CRIMINAL BACKGROUND CHECKS

Criminal background checks are required for some clinical settings. The CCE will help each student with the process. Course fees collected cover the cost of the initial criminal background check.

DRUG TESTING

Drug testing is required for some clinical settings. The CCE will help each student with the process. Course fees collected cover the cost of the initial drug screen. If follow-up drug testing is needed, the student may incur additional expense.

POTENTIAL RISKS

During some clinical experiences there may be potential risks for injury due to the environment where athletic trainers practice (benches, sidelines, dugout, etc.). Some risks include but are not limited to:

- Flying objects
- Collisions
- Harmful chemicals
- Blood or bodily fluids
- Infectious disease

LIABILITY INFORMATION / INSURANCE

All athletic training students who are obtaining clinical experience must be properly enrolled in a clinical experience course (ATRN 501, 601,602, 603, 604). Each student enrolled in one of the clinical experience courses is covered under a group liability insurance policy. Course fees collected cover the premium for the group liability insurance policy.

Every athletic trainer has a legal responsibility to the patients with whom they work. There are many opportunities for negligence to occur. Each athletic trainer must be sure their actions are those of a reasonable and prudent person. Each athletic training student is expected to be familiar with the responsibilities and limitations of the role. All interactions between athletic training students and patients must be supervised by a preceptor and/or affiliated allied health professional.

CLINICAL ROTATION HOURS / ATTENDANCE

Each clinical experience has specific attendance expectations that are detailed in the course syllabus. The chart below provides a general overview of expectations:

Course	Semester Hours	Weekly Hours	Other Requirements
ATRN501	200-210	13-17, Avg 15/wk	Minimum 3 days/week in site 12-15 weeks/semester
ATRN601	215	18-20, Avg. 18/wk	Minimum 4 days/week in site 12-15 weeks/semester
ATRN602	As assigned by medical setting	As assigned by medical setting	As assigned by medical setting 10-12 weeks/semester
ATRN603	525 over 17 total weeks 400 in immersive	30-35/wk for 12 wks Remainder: 20/25/wk	Minimum 5 days/week 15-17 weeks/semester
ATRN604	350 over 12 weeks 210 in immersive	30-32/wk for 7 wks Remainder: 20-30/wk	Minimum 4 days/week 12-15 weeks/semester

CLINICAL EXPERIENCE EVALUATION / GRADING

Clinical experience courses receive a letter grade based on student performance. Each clinical experience course has specific clinical skills that are evaluated by the preceptor with the Student Learning Objectives Rubric. Additional factors included in the grade may include, but are not limited to, attendance, preceptor evaluations, patient encounters, SOAP notes, student reflections, student communication with CCE and preceptor, weekly submissions into ATrack, and mandatory meetings. Below is the overall Student Learning Objectives Rubric. It is tailored as appropriate for each course, based on student expectations. The specific course syllabus contains the rubric used for that course.

Student Learning Objectives Evaluation Criteria

Proficient	3	The Athletic Training Student critically applies the required knowledge and skills associated with the corresponding clinical experience course.
A proficient clinician identifies goals of the encounter early in the process and is able to critically apply knowledge and skills in an efficient manner. The proficient clinician uses intuition and prior experiences to develop practice patterns and critical thinking, versus traditional rule following.		
Competent	2	The Athletic Training Student has demonstrated the required knowledge and skills associated with the corresponding clinical experience course.
A competent clinician is able to identify situational aspects that are important and those that can be ignored, making understanding and decision-making easier. The clinician practices in an efficient manner and critical thinking is present throughout the encounter. Skill application is appropriate. The competent clinician demonstrates that their understanding and decision-making are contextual and that they take personal responsibility for the outcome of the situation.		
Developing	1	The Athletic Training Student has <i>begun to develop</i> the required knowledge and skills associated with the corresponding clinical experience course.
A developing clinician is in the process of crafting a framework to apply their knowledge and skills. They are starting to identify situational factors and apply the right skills accordingly. Efficiency in practice is somewhat limited, and critical thinking is applied selectively during encounters. The developing clinician shows a partial understanding that their decisions are context-dependent, but they haven't fully embraced personal responsibility for the situation.		
Not Observed Not Applicable	0	The opportunity for the Athletic Training Student to demonstrate the required knowledge and skills associated with the corresponding clinical experience course was <u>not observed or not applicable</u> to the clinical setting.
Unacceptable	-1	The Athletic Training Student <u>has not demonstrated or incorrectly demonstrated</u> the required knowledge and skills associated with the corresponding clinical experience course.
A critically deficient provider has no understanding of the underlying knowledge and skills related to the concept. They are unable to apply skills, do not demonstrate critical thinking, or are unable to perform the necessary steps to evaluate the competency. Further, any provider acting in a way that diminishes, endangers, or dismisses a patient is demonstrating critically deficient practice.		
Missed Opportunity	-2	The opportunity was available, but the Athletic Training Student <u>did not take the initiative</u> to demonstrate the skills.

PROFESSIONAL RELATIONSHIPS / INTERACTIONS

Patients/Athletes:

- Keep rapport, relationship, and conversations at professional level.
- Gain respect through competence.
- Treat every patient with respect although they may not reciprocate.
- Maintain patient confidentiality following HIPAA and FERPA guidelines.
- Encourage any patient to disclose injuries or problems to the appropriate allied health professional.
- Report any concerns/problems with patients/athletes to preceptor and CCE immediately.
- Social and romantic relationships are highly discouraged; if a relationship develops, the student must notify the preceptor and CCE as soon as the relationship develops.
- Social and romantic relationships are prohibited with patients/athletes who are minors.
- Avoids potential conflicts of interest or distractions in clinical environment.
- Do not become involved in a situation in which you are assisting any patient/athlete to break any rules or policies (written or implied).
- Unprofessional relationships with patient/athlete at an assigned site may lead to immediate removal from clinical site.

Preceptors:

Clinical environments may feel somewhat relaxed, the student should not, however, become too relaxed or unprofessional.

- Show an appropriate amount of respect regardless of personal feelings and biases.
- Communicate clearly regarding schedule and responsibilities.
- Do not criticize or openly disagree with preceptor's decision/action, particularly when it concerns care of patient/athlete.
- Approach the preceptor in a respectful manner, away from others, to ask question or voice concern.
- Constructive criticism of the student's performance is part of the professional world, not a personal attack and should be received in that manner.
- If you have a specific problem with a preceptor, discuss it with them first.
- If a problem persists after discussing it with the preceptor, inform the CCE and Program Director immediately.

Physicians and Other Health Care Professionals:

Athletic training students have an opportunity to observe and collaborate with physicians, physical therapists, registered nurses, emergency medical technicians, and other affiliated specialists. Students can learn a great deal just by watching them work and listening to them discuss injuries and conditions.

- Be courteous in your conversation and ask questions at appropriate times.
- Provide current injury reports and pertinent information as requested.
- Remain engaged and demonstrate a willingness to learn at every opportunity.
- Keep in mind the strict confidentiality requirements that govern patient records.
- Follow any directions immediately and efficiently.

Peer Athletic Training Students:

Gaining clinical expertise in facilities which provide care for large numbers of patients takes a coordinated and efficient effort. Each student should remain professional regardless of personal feelings and biases.

- Maintain an appropriate and professional rapport with other students
- While not forbidden, romantic relationships can be difficult to navigate in a cohort setting
- Petty arguments, negative comments, and demeaning actions will not be tolerated.
- More experienced students are expected to instruct and guide less experienced students and observation students. Do not abuse the authority.
- Less experienced students are expected to be open to learning and accept constructive guidance.

Athletic Coaching Staff:

In the “traditional” athletic training setting, this relationship is critical. Effective communication is essential.

- Take your cue for appropriate interaction from the preceptor.
- At no time should an athletic training student criticize or argue with a coach.
- Unless otherwise instructed by the preceptor, injury information on patients should come from the appropriate preceptor.
- If a conflict arises between the athletic training student and a coach, the student must report the problem to a preceptor and the CCE.

Athletic Department Personnel:

Athletic training students may interact with a variety of other athletic department personnel. These individuals work long, hard hours in association with athletic events and a positive, cooperative working relationship with these individuals is valuable.

- Use appropriate salutations, i.e., Mr. Ms., etc.
- Refer any questions about an athlete’s injury/status to the appropriate preceptor.

Media and General Public:

Due to the athletic training student’s familiarity with the medical status of athletes, various individuals may ask questions regarding the playing status of an athlete. Although such questions may be flattering to the student, all questions regarding any athlete must be referred to the preceptor.

PROFESSIONAL APPEARANCE

Appropriate professional appearance is essential in a health care setting. The guidelines listed below should be followed during all clinical experiences. Specialized settings or indoor sport game attire requirements will be discussed with the preceptor in the initial meeting. ***If a student is not properly attired, the preceptor may prohibit their attendance at the clinical setting.***

Identification: Name tag clearly displayed.

Shoes: Footwear must be clean, in good condition and appropriate.

- NO open-toed shoes or sandals are allowed in patient care areas.

Style: Clothing should be clean, free of major wrinkles & defects, & worn properly.

- Winthrop MS-ATRN program clothing is expected to be worn.
- No sweatshirts or shirts with messages, lettering, or logos (except WU/Eagles) while in WU AT facilities.

- Zippers closed, shirts tucked in as appropriate, shirts buttoned up, shoes tied, etc.
- Cotton twill pant or shorts (khaki, navy, black, grey, brown, tan) of appropriate length (minimum 4-inch inseam) and should not fall below waistline when bent over. Belts are typically expected to be worn.
- Rain gear or wind suits are acceptable during inclement weather.
- No jeans or athletic leggings.

Brands: WU has an exclusive contract with ADIDAS

- When assigned to WU athletics, you must wear ADIDAS clothing, a non-competitive brand (Sketchers, Asics, New Balance) or clothing free of logos.

Fragrance: No colognes, perfumes, or scented lotions due to possible patient sensitivity.

Hands: Fingernails must be clean and short to allow for proper hand hygiene, use of manual therapy, and instruments, prevention of glove puncture, and injury to patient; no artificial nails.

Hygiene: Daily hygiene must include personal cleanliness, including use of deodorant.

Hair: Students with long hair must wear hair tied back when participating in patient care.

Facial Hair: Mustaches and beards must be clean and well-trimmed.

Tattoos: May need to be covered at the discretion of the clinical site/preceptor.

Jewelry: Avoid long or dangling earrings.

- No lip or tongue piercings due to CPR.
- In case of religious requirement, certain piercings may be accepted.

A WATCH WITH A SECOND HAND IS REQUIRED TO ENSURE ASSESSMENT OF PATIENT VITALS.

GENERAL PROGRAM EXPECTATIONS AND GUIDELINES

PROFESSIONAL MEMBERSHIPS

Each student will become a member of the NATA and of SCATA in January of their first year in the program and maintain membership through the remainder of their time in the program.

Membership benefits include receiving the *Journal of Athletic Training* quarterly and placement on sports medicine mailing lists. Members of the NATA are charged a lower fee to take the Board of Certification national certification examination.

The NATA offers several scholarships and sponsors an article writing contest for athletic training students. Information can be obtained on the NATA website. All qualified students are encouraged to apply for these opportunities.

Members of the NATA are automatically included as members of the regional organization, the Mid-Atlantic Athletic Trainers' Association (MAATA, District 3). MAATA offers several scholarships for athletic training students. Information can be obtained on the MAATA website. All qualified students are encouraged to apply for these opportunities.

National Athletic Trainers' Association
1620 Valwood Parkway, Suite 115
Carrollton, TX 75006
214-637-6282
nata.org

Mid-Atlantic Athletic Trainers' Association
maata.org

The South Carolina Athletic Trainers' Association (SCATA) is the state association that provides leadership for the profession. SCATA also offers a scholarship for athletic training students. Information can be obtained on the SCATA website. All qualified students are encouraged to apply for this opportunity.

South Carolina Athletic Trainers' Association
scata.org

PROGRAM COMMUNICATION

Each student is expected to check Blackboard and their Winthrop University E-Mail account daily and respond to emails as appropriate or requested. Repeated failure to respond to MS-ATRN faculty in a timely fashion may result in suspension or dismissal from the program.

All email correspondence between MS-ATRN students and professors, preceptors, and other professionals should include an appropriate salutation (e.g., Dear Dr. Rivera), proper sentence structure and grammar, and an appropriate closing.

Unless a student specifically requests that communication with a faculty member remain confidential, faculty members will share pertinent information with one another. It is important that faculty work together to provide the best learning and professional development environment for students.

IN-SERVICE TRAINING

All admitted students are required to attend in-service training sessions that occur at the beginning of each semester. The in-service training provides formal explanation and introduction to the procedures that must be followed by students as they obtain academic and clinical experience. In-service training dates and times will be communicated at the end of the prior semester.

RETENTION POLICY

The MS-ATRN follows the academic guidelines established by the Winthrop University School of Graduate, Continuing, and Online Education for graduate studies. To progress through the program, the student must meet all academic standards and successfully complete the Student Learning Objectives for each clinical experience course. Each student is expected to be in good standing in the university community.

If progress is unsatisfactory in classroom or clinical performance, the student may be placed on probation for one semester to remedy any deficiencies. During the probationary semester, a specific plan designed to address the unsatisfactory area(s) will be developed by the student and program faculty. If the deficiencies are not remedied in the time frame allotted, the student will be dismissed from the program. The Program Director shall monitor student progress from one semester to the next and will make all probationary decisions in consultation with program faculty. More details regarding program suspension or dismissal are included on pages 32-33.

ATHLETIC TRAINING ETHICS AND VALUES

The MS-ATRN mission and goals are consistent with the ethics and values of the athletic training profession in that students are encouraged to examine their values, acquire the necessary knowledge, and develop the skills necessary to become effective athletic training practitioners.

The professional responsibility of the athletic trainer is discussed and examined across the curriculum. The NATA Code of Ethics and the BOC Standards of Professional Practice are used as the basis for athletic training values and ethics learning throughout the athletic training curriculum. Students are expected to know and abide by these documents in their conduct as emerging athletic training professionals. These documents are included in **Appendices C and D**.

NONDISCRIMINATION POLICY

The MS-ATRN will be conducted with respect to the multiple dimensions of diversity as delineated in the 2021 NATA Commitment to Diversity, Equity, Inclusion, and Accessibility that includes the following components:

- Cultivating an inclusive and welcoming environment.
- Providing programming, research, and resources to support cultural competency and ensure athletic trainers are equipped with the knowledge and skills to better serve diverse populations.
- Ensuring that the values of diversity, equity, inclusion, and access are embedded in continuing education, conferences, communications, and the work of the association.
- Examining processes, policies, practices, communications, structures, and barriers with an equity lens to promote authentic engagement, access, and inclusion of diverse individuals.
- Increasing transparency and accountability on diversity, equity, inclusion, and access by sharing data and information about our journey and commitments.
- Supporting and intentionally promoting a diverse athletic training profession.

SEXUAL HARASSMENT

It is the policy of Winthrop University that sexual harassment by its employees or students against other employees or students shall not be condoned. The University is committed to maintaining a workplace and a campus environment that are free of such harassment and will enforce federal guidelines as they relate to sexual harassment. Sexual harassment may include explicit sexual propositions, sexual innuendo, suggestive comments, sexually oriented “kidding” or “teasing,” “practical jokes,” jokes about gender-specific traits, foul or obscene language or gestures, display of foul or obscene printed or visual material, and physical contact such as hugging, patting, pinching or brushing against another’s body.

With respect to employment, unwelcome sexual advances, requests for sexual favors, and other offensive physical, verbal, or visual conduct based on sex constitute sexual harassment when: (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment; (2) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with the individual's work performance or creating an intimidating, hostile, or offensive work environment.

A student who believes she or he has been subject to harassment by an employee should immediately contact either the Dean of Students in 246 DiGiorgio Center, ext. 4503 or the Associate Vice President for Human Resources in 303 Tillman, ext. 2273. Every effort will be made to maintain confidentiality about complaints and terms of resolution; however, confidentiality cannot be guaranteed. Additional information may be found at www.winthrop.edu/titleIX.

HIPAA REGULATIONS AND PATIENT CONFIDENTIALITY

Confidentiality is one of the most important issues allied health professionals face. Athletic trainers are bound by medical ethics, as well as by law, to preserve patients' rights of privacy and confidentiality. The Health Insurance Portability and Accountability Act (HIPAA) prohibits the disclosure of protected health information to any third parties, unless the individual who is the subject of the information (or the individual's personal representative) authorizes it in writing, or the rule otherwise permits the disclosure. The Family Educational Rights and Privacy Act (FERPA) prevents the disclosure of personally identifiable information in a student's education record without the consent of a parent or eligible student (aged 18 or older) unless an exception to the law's general consent requirement applies.

Maintaining a patient's confidentiality is imperative to develop a strong clinical relationship. As individuals who provide health care, athletic trainers have access to a patient's confidential information including biographical data, financial information, and medical history. The athletic training student is expected to protect patient confidentiality, privacy, and security and to follow the following guidelines as well as any affiliated clinical site guidelines:

- Only access confidential information for which you have a need to know.
- Respect the confidentiality of any verbal communication or reports printed from any information system containing patient's information and handle, store, and dispose of these reports appropriately at the University and affiliated clinical site.
- Do not in any way divulge, copy, release, loan, alter, or destroy any confidential information except as properly authorized within the scope of your professional activities.
- Carefully protect all confidential information. You will take every precaution so that patients, their families, or other persons do not overhear conversations concerning patient care or have the opportunity to view patient records.
- Comply with all policies and procedures and other rules of the University and affiliated clinical sites relating to confidentiality of information and access codes.
- Recognize that the information accessed through all clinical information systems contains sensitive and confidential patient care, medical history, business, and financial information that should only be disclosed to those authorized to receive it.
- Do not knowingly include or cause to be included in any record or report false, inaccurate, or misleading information.
- Do not transmit any information regarding a patient or pictures of a patient via social media (i.e., Facebook, Instagram, X, Snapchat, etc.) without the patient's specific permission.

COMMUNICABLE AND INFECTIOUS DISEASE POLICY

Communicable disease may pose a serious threat to the well-being of athletic training students and the patients with whom an infected person may come in contact. Communicable disease is one that is transmitted from person to person through direct or indirect means of contact. Direct transmission occurs through coughing, sneezing, droplets, or direct physical contact. Indirect transmission occurs through contact with some type of infectious agent such as an insect, animal, or contaminated waste.

Athletic training students must use universal precautions to limit exposure to blood borne pathogens. Attendance at annual OSHA blood borne pathogen training (or other appropriate training) will be required of all athletic training students.

Examples of communicable diseases may include, but are not limited to, the following:

Chicken Pox	Impetigo	Rubeola
COVID-19	Influenza	SARS
Diphtheria	Lyme Disease	Scabies
Encephalitis	Meningitis (bacterial)	Shingles
Hepatitis A	Mumps	Staph Infection
Hepatitis B	Pediculosis	Strep Infection
Hepatitis C	Ringworm	Tetanus
Herpes Simplex	Rubella	Tuberculosis
HIV/AIDS		

To limit risk with regard to communicable disease, the following steps are required:

- Hand washing and personal hygiene techniques will be followed. Hand washing with soap and water should occur after contact with each patient. If immediate hand washing is not possible, antibacterial hand sanitizer may be used.
- The use of gloves, facemasks, and other personal protective equipment will be used when appropriate. Athletic training students must follow guidelines recommended by the CDC and the clinical setting.
- If an athletic training student becomes ill, that student will be required to seek medical care from their family physician, a nurse at Winthrop University Student Health Service, or another licensed health care provider.
- Preceptors may require that an athletic training student who appears ill, be examined by a licensed health care provider of the student's choosing.
- If it is determined that the athletic training student has contracted a communicable disease, the student must inform their preceptor and the Coordinator of Clinical Education prior to their next scheduled clinical education experience.
- A student who has been diagnosed with a communicable disease is required to follow all guidelines ordered by the health care provider and will not be allowed to participate in their clinical rotation until given clearance by the attending health care provider.

IMMUNIZATION POLICY

Winthrop University requires all students born on or after January 1, 1957 to provide proof of immunity to:

- Measles (Rubeola), German Measles (Rubella), and Mumps (Covered by MMR vaccine).
 - Two valid doses of MMR (or the equivalent) or blood levels showing immunity are required.
- All students must have a Tetanus vaccination within the last ten years.

- The Meningococcal vaccine requirement can be completed by uploading documentation of the vaccine or by reading and signing the Meningitis waiver. The CDC recommends a booster be given if meningitis vaccine was received before age 16.
- All students must complete Tuberculosis Screening (PPD skin test).
- Medical and religious exemptions are allowed by law.

All required immunizations are available at Health Services for a nominal fee applied to the student's account.

In addition to the university's required proof of immunity, the MS-ATRN requires the following vaccinations to safeguard the student and the patients with whom they interact:

- Hepatitis B: Proof of the three-dose immunization or a positive antibody titer.
- Influenza: Annually while enrolled in the program, completed between August 1-October 31.

A student may request and complete a medical or religious exemption for these vaccines.

BLOODBORNE PATHOGEN POLICY

Introduction

In accordance with the Occupational Safety Health Administration (OSHA) Bloodborne Pathogens Standard, 29 CFR 1910.1030, the Winthrop University Athletic Training Program's Bloodborne Pathogen Policy has been developed to protect students from the health hazards associated with exposure to pathogenic organisms present in blood or other bodily fluids. This policy is developed from and is in alignment with Winthrop University's Bloodborne Pathogen Exposure Control Plan.

Definitions

- Blood Borne Pathogen: pathogenic micro-organisms present in human blood that can cause disease in humans. These pathogens include, but are not limited to, Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and Human Immuno-deficiency Virus (HIV).
- Body Fluids: fluids that have been recognized by the Centers for Disease Control and Prevention (CDC) as directly linked to the transmission of HIV and/or HBV and/or to which universal precautions apply: blood, blood products, semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pericardial fluid, amniotic fluid, and concentrated HIV or HBV viruses.
- Contamination: occurs when blood or other potentially infectious materials are present or reasonably anticipated to be present on an item or surface.
- Exposure Incident: a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of one's duties. "Non-intact skin" includes skin with dermatitis, hangnails, cuts, abrasions, chafing, acne, etc.
- Personal Protective Equipment (PPE): specialized clothing or equipment worn by an individual for protection against a hazard. Some examples include protective gloves, eye protection, face shield, gowns, and CPR mask.
- Sharps: any object that can penetrate the skin, including but not limited to, needles, scalpels, wood applicators, and any objects with the potential to become sharps such as glass.
- Universal Precautions: an approach to infection control where all human blood and certain human body fluids (i.e. semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pericardial fluid, amniotic fluid) are treated as if known to be infectious for HIV, HBV, HCV, and other blood borne pathogens.

Exposure Determination

The potential of being exposed to bloodborne pathogens exists in the athletic training clinic, practice sites, or competition sites. Individuals at risk include certified athletic trainers and athletic training students treating or caring for any open wound, sore, or if body fluid is present. This also covers athletic training students who are completing a required clinical experience at an off campus affiliated clinical site.

Training

- Bloodborne pathogen training will be conducted annually for all students prior to beginning clinical or directed observation experiences. The training will include at a minimum:
- A discussion of the epidemiology and symptoms of blood borne diseases;
- An explanation of the modes of transmission of blood borne pathogens;
- An explanation of the Blood Borne Pathogen Exposure Control Plan;
- The recognition of tasks that may involve exposure;
- An explanation of the use and limitations of methods to reduce exposure, for example engineering controls, work practices, and PPE's;
- Information on the types, uses, location, removal, handling, decontamination, and disposal of PPE;
- Information on the Hepatitis B vaccination, including efficacy, safety, method of administration, benefits;
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials;
- An explanation of the procedures to follow if an exposure incident occurs, including the method of reporting and medical follow-up;
- Information on the evaluation and follow-up required after an exposure incident.

Vaccinations

The Hepatitis B vaccination series is required before or upon admittance into the MS-ATRN. HCV and HIV have no known vaccine at this point in time.

Universal Precautions

All blood or other potentially infectious materials shall be handled as if contaminated by a bloodborne pathogen. When differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

Personal Protective Equipment

Personal protective equipment includes gloves, CPR masks, gowns, face shields, and eye protection. This equipment will be purchased and maintained by the clinical facility. PPEs shall be used when coming in contact with blood or other body fluids.

- Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin
- Disposable (single use) gloves shall be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.
- Gloves are removed inside out aseptically.
- Gloves should be removed and discarded into a properly marked foot-operated biohazard container lined with a leak-proof color-coded biohazard bag. Any glove used to clean bodily fluids shall never be washed and reused

- Masks, Eye Protection or Face Shields should be used whenever there is potential for splashes, sprays, spatter or droplets of blood or other infectious materials into the eyes, nose, or mouth.
- When contamination occurs, eyewear and face shields are to be cleaned with a 1:10 bleach dilution, then washed, rinsed, and dried.
- CPR Masks or other “breathing barriers” are in the athletic training clinic and in each individual sport kit. Any breathing barrier will only be used once and then discarded.

Hand Washing

All individuals shall wash hands and any other exposed skin with soap and warm running water for a minimum of 20 seconds after removing gloves. If soap and warm running water are not readily available, an antiseptic hand sanitizer shall be used. When an antiseptic hand sanitizer is used, hands shall be washed with soap and warm running water as soon as feasible. Hands should also be washed between all patient contacts.

Collection and Disposal Procedures

Two types of containers are available in the athletic training clinics and medical facilities; red or orange biohazardous waste bags and puncture resistant sharps containers. Biohazardous waste materials are not to be put in regular waste cans. Examples of waste disposed of in biohazard waste bags may include dressings, bandages, sponges, gauze, surgical drapes and gloves. Disposal of sharp instruments such as scalpels, needles or syringes will be in labeled, puncture resistant boxes. Puncture resistant boxes will be sealed and disposed of, as necessary.

Preceptors are responsible for proper disposal of the biohazardous waste containers. Procedures vary with the setting. Most high school athletic training settings utilize the state approved procedure of taking the materials to the school nurse for disposal. Winthrop University Athletic Training Clinics and various medical clinics have a contract with a biohazardous waste disposal company.

Environmental and Working Surfaces

The clinical facilities will be maintained in clean and sanitary condition. Countertops, treatment tables, rehabilitation equipment and other work surfaces will be cleaned using a disinfectant with virucidal, fungicidal, and antibacterial properties or a 1:10 bleach solution. Cleaning will take place in the following situations:

- after completing procedures on an individual patient;
- immediately or as soon as feasible after overt contamination with of blood or other potentially infectious material;
- at the end of the shift if the surface may have become contaminated since the last cleaning.

Laundry

Contaminated laundry should be handled as little as possible and should be handled by someone wearing gloves. Soiled laundry may be washed in hot water (at least be 160° F) and detergent for 25 minutes. Low temperature loads should be washed with suitable low temperature detergents.

Incident Management

- Any athlete who is bleeding during a game, practice, or scrimmage from an open wound, nose or mouth must be removed from the game at the earliest possible time. The athlete will remain out until the wound is dressed or the bleeding subsides.
- A preceptor or qualified athletic training student will attend to the wound or bleeding according to established procedure. Anyone not wearing gloves will not be involved in the care of a bleeding injury. All materials and supplies used in the procedure will be placed in a biohazardous waste bag provided by the preceptor. If a towel is used to wipe up blood from the court or off the athlete’s uniform, it must be disposed of properly. If only a small amount of blood is on the towel it will be

placed in a biohazardous waste bag and laundered. If the towel is saturated with blood, it will be placed in a biohazardous waste bag and disposed of according to policy by the preceptor.

- If the athlete has blood on his or her uniform, the athlete must be removed from the game, practice, or scrimmage at the earliest possible time. If only a small spot of blood is on the uniform, the spot will be treated with a bleach dilution or hydrogen peroxide and the athlete can return to the activity. If a large amount of blood is on the uniform the uniform must be changed before the athlete can return to the activity. If the uniform must be changed, the bloodied uniform will be placed in a biohazardous waste bag and then laundered or disposed of according to policy.

Exposure Incident Procedures

Upon exposure to bloodborne pathogen follow these procedures:

1. Wash exposed skin with soap and water. Flush eye or other mucous membranes with water for 15 minutes. Provide immediate first aid to the area, clean and dress as necessary.
2. Inform clinical site preceptor and complete Bloodborne Pathogen Exposure Incident Form and/or any other necessary documentation for that clinical site. Kept in file.
3. Contact the CCE as soon as possible but no longer than 24 hours after exposure.
 - a. The CCE must contact Winthrop University's appropriate administrator either the same or next business day to report the exposure.
4. Make an immediate appointment with the Student Health Center or your personal physician. Blood should be tested for HBV, HCV, and HIV as soon as it is feasible through your health care provider; within 72 hours of incident is best. Your healthcare provider will then assess the need for any post-exposure treatment, and you should follow up as requested.
 - a. Understand that your health insurance may or may not cover these expenses. However, it is for your benefit to follow through with the recommended procedures.

MINOR PATIENTS AND STUDENT AIDES

During clinical experiences obtained in a high school setting, MS-ATRN students will interact with patients and high school student aides who are minors. At no time should the MS-ATRN student socialize or interact with these minor individuals outside of the established clinical setting. Prohibited interactions include, but are not limited to: individual social interactions, social media, personal email, text, and cell phone.

NON-DEPARTMENTAL SOCIAL MEDIA AND MESSAGING

The following guidelines apply to the use of social media by students in the MS-ATRN whether they are posting on their own site or commenting on other sites:

- If you note your association with Winthrop or the MS-ATRN, your social media activities should be consistent with the standards of professional behavior established by this program.
- Write in the first person. Where your connection to the MS-ATRN is apparent, make it clear that you are speaking for yourself and not on behalf of Winthrop or the MS-ATRN.
- Adhere to all MS-ATRN regulations regarding patient confidentiality, ethical behavior, non-discrimination, etc. in your posts.
- Be professional, appropriate, and respectful in your posts especially regarding fellow students, preceptors, faculty, and affiliated sites.
- Avoid any social medial activities that conflict with your responsibilities within the MS-ATRN.
- Do not initiate or accept friend requests from current patients due to the potential conflict of interest created.

Messaging apps such as GroupMe, WhatsApp, etc. are useful ways to stay connected and communicate, but are not created, monitored, or regulated by the University. Therefore, if you decide to use these tools to communicate, be aware of how your participation may impact others. If you do elect to engage with your peers using these formats, we encourage that communication follow standards of professionalism.

ACADEMIC INTEGRITY

Academic Integrity: Academic integrity is a fundamental tenet of the Winthrop learning community. Academic work depends upon respect for and acknowledgment of the research and ideas of others. Plagiarism is using someone else's thoughts, words, ideas, or lines of argument as your work without appropriate documentation (explicit in-text citation and a listing in Works Cited). Academic misconduct also includes but is not limited to, receiving unauthorized assistance in the creation of work, unauthorized collaboration, copying or cheating on tests, and submitting the same paper/project for two classes without permission. Academic misconduct is fully defined in the Student Conduct Code in Section 4 (2. Academic Misconduct), and students are responsible for being aware of all possible violations. The English Department has prepared "The Correct Use of Borrowed Information" to explain plagiarism and how to cite properly, but students should follow the recommended citation process suggested by your professor.

Faculty may use tools, such as Turnitin and artificial intelligence detection systems, to evaluate work submitted for the course. If faculty members suspect academic misconduct, they will speak with the student about the possible violation. All alleged academic misconduct will be reported to the Dean of Students Office. Students suspected of academic misconduct will follow the conduct process outlined in the [Student Conduct Code](#) and can reference the [Quick Guide to the Academic Misconduct Process](#). Being found responsible for academic misconduct can result in severe penalties, including failing the assignment, a zero on the assignment, failing the course, or being expelled from the university, depending on the severity of the situation and prior conduct history. Additional educational sanctions are also put in place to help prevent future violations.

ARTIFICIAL INTELLIGENCE

The use of artificial intelligence to produce work for coursework is not allowed unless it is otherwise explicitly stated by the instructor. The use of artificial intelligence to create responses for submitted work would be plagiarism as it is still the use of someone else's words as your own. The use of artificial intelligence can also be considered unauthorized assistance if not approved by the professor for use as a research or brainstorming tool.

ACCESSIBILITY ACCOMMODATIONS

It is the practice of the MS-ATRN to accommodate students with disabilities pursuant to federal and state law. Students who have a condition which may adversely impact their ability to access academics and/or campus life, and who require accommodations to complete their course work, may contact the Office of Accessibility at 803-323-3290 or accessibility@winthrop.edu. Once students have received their notice of accommodation from the Office of Accessibility, they should inform their course instructors as early as possible in the semester in order for reasonable accommodations to be enacted. Additional information may be found at [the Office of Accessibility](#). Each student admitted into the MS-ATRN will complete the Technical Standards for Admission document.

HEALTH AND COUNSELING SERVICES

Health and counseling services are available to all graduate students enrolled in nine or more credits per semester. Services are rendered in full compliance with privacy and confidentiality laws. Services are located at Center for Student Wellness Joynes Hall, 3rd Floor. Health services and Counseling may be accessed by phone at 803-323-2206.

INCLEMENT WEATHER

In the event of inclement weather, MS-ATRN faculty will make every effort to run classes in accordance with the official University posting which may be found on the University's Emergency Information web site at www.winthrop.edu/emergency. Postings will also be sent to Winthrop e-mail accounts by university officials. Notices are also posted on the campus alert line at 803-323-2222 and through local media outlets. Students may also register for WU Alerts for critical emergency updates for voice or phone texts (information on how to register may be found on the University Emergency Information website). Plans for specific clinical settings should be established with the preceptor during initial meetings.

PERFORMANCE EXPECTATIONS

PROGRAM SUSPENSION OR DISMISSAL

Admission to the MS-ATRN does not guarantee continuance as an athletic training student. A student may be suspended or dismissed from the MS-ATRN when their academic and/or professional performance does not meet established standards. Some of the reasons for which suspension or dismissal may be considered include, but are not limited to, the following:

1. Failure to maintain the required grade point average for the program.
2. Inadequate communication skills suitable for the practice of athletic training.
3. Inadequate writing skills suitable for the practice of athletic training.
4. Lying, cheating, or plagiarizing in course work or clinical experience work.
5. Consistent inadequate performance of assigned clinical experience activities.
6. Excessive tardiness or absenteeism.
7. Consistent failure to meet deadline dates on assignments, projects, and clinical experience reporting.

Evidence of poor 'professional fit' for athletic training involves lack of adherence to professional athletic training values and/or the NATA Code of Ethics and BOC Standards of Professional Practice. Examples include, but are not limited to, the following:

1. Personal values that consistently interfere with upholding the values of the athletic training profession.
2. Disrespect toward faculty, preceptors, patients, and professional staff and colleagues.
3. Lack of cultural competence and appreciation for social diversity with respect to race, ethnicity, gender, sexual orientation, socioeconomic class, age, disability, and religion.
4. Sexual/romantic involvement with patients.
5. Inappropriate interactions with underage patients or athletic training student aides.
6. Confidentiality / HIPAA violations.
7. Unresolved personal issues that impair performance or safety in the classroom or in clinical settings.
8. Substance misuse or abuse.
9. Criminal conviction (students are expected to inform the Program Director of any criminal convictions or pending litigation).

Conferences may be held with a student as needed to address and resolve academic and professional performance deficits. Initial concerns are addressed, whenever appropriate, at the student-instructor level. Continuing or egregious concerns are then addressed at the Program Director level. If deemed appropriate, specific performance contracts may be established to allow a student to rectify deficiencies.

If academic and professional competence problems remain unresolved, or are severe in nature, the student may, upon recommendation of the Program Director and approval by the PESH Department Chair, be terminated from the program. In the instance that the Program Director and PESH Department Chair are the same individual, approval by the CESH Director of Graduate Education will be necessary.

APPEAL AND GRIEVANCE PROCEDURES

In cases in which a student believes that their rights have been disallowed or violated, they may pursue the following steps.

1. Request a meeting with the appropriate faculty member to discuss the issue and to seek resolution.
2. If the student believes that the resolution at the first level was in error, or if the student believes addressing the issue individually with the faculty member would pose a risk, the student may appeal the matter in writing to the Program Director for resolution. The Program Director may request a meeting with the people involved. At the student's request, a faculty member or clinical preceptor who is not a member of the MS-ATRN faculty may also participate in the meeting. The Program Director will then formulate a written disposition for the student. Note: If the Program Director is the person against whom the grievance is being brought, the student may proceed directly to the next level.
3. If the student believes the resolution at the Program Director level was in error, the student may appeal the matter in writing to the PESH Department Chair who will then review the case and formulate a written disposition to the student. In the instance that the Program Director and PESH Department Chair are the same individual, appeal should be made to the CESHHS Director of Graduate Education. Note: If the PESH Department Chair is the person against whom the grievance is being brought, the student may proceed directly to the next level.
4. If the student believes the resolution at the PESH Department Chair level was in error, the student may appeal the matter in writing to the Office of the Dean of CESHHS. Decisions at this level shall be considered final.

STUDENT ORGANIZATIONS

Athletic Training Club

The Athletic Training Club is an optional organization for MS-ATRN students and undergraduate students in the Athletic Training Concentration of the BS in Exercise Science. The purpose of the club is to provide an avenue for students interested in athletic training to gather in casual environments to explore the profession and to fund raise to support professional development activities.

Phi Epsilon Kappa

Phi Epsilon Kappa (PEK) is a national honorary organization for undergraduate and graduate students in programs within the PESH Department. The mission of PEK is to promote scholarly excellence and professional development, foster leadership, provide networking opportunities, and camaraderie among students and professionals in these fields. Members have the opportunity to be part of a supportive community that values academic achievement, personal growth, and a commitment to advancing the health and wellness professions. Criteria for membership include: a minimum GPA of 3.5 and/or an outstanding contribution to the PESH Department at Winthrop, and a faculty nomination.

Some benefits of membership include access to exclusive scholarship opportunities, leadership and service experience, networking with peers and professionals in the field, opportunities to attend conferences and professional workshops, social events, and chapter meetings focused on career development.

There is a one-time membership fee of \$100. This fee provides: National dues (valid for 2 years), Winthrop University chapter dues, a PEK t-shirt, and an end-of-the-year celebration.

AWARDS

The PESH Department and the MS-ATRN Program recognizes student excellence through a variety of scholarships and awards, including the following:

Maeberta Bobb Award

This award recognizes a student for outstanding performance in both academic and clinical experiences. Student(s) in the Master of Science in Athletic Training are eligible for this award at the **end of their first year in the program.**

Award recipient selection and number of recipients will be determined by the PESH Department Chair in consultation with the program faculty.

APPENDIX A

Academic and Clinical Benchmarks Assessment / Clinical Immersion Readiness Rubric

Academic Benchmarks

1. Knowledge Base

- **Core Concepts**
 - Demonstrate **proficiency** in foundational topics such as healing processes, introductory modalities (heat/cold, ultrasound, E-stim, manual therapy), and evaluation procedures including special tests.
 - Demonstrates **proficiency** in all foundational concepts; applies knowledge flawlessly.
 - Demonstrate **competency** in advanced topics such as pharmacological agents (indications of use, methods of action, characteristics of drugs in the physically active population), general medical conditions, mental health literacy, cultural competency, and more complex modalities (diathermy, traction, compression, joint mobilizations).
 - Competency definition: demonstrates solid understanding with minor gaps; applies knowledge effectively.
- **Semester GPA Requirement – Didactic Courses:**
 - Maintain a minimum GPA (e.g., 3.0 or above) in didactic athletic training courses.
- **Application:**
 - Successfully apply theoretical knowledge to case studies and scenario-based learning exercises.
 - ATRN 620 Clinical Scenarios
 - ATRN 650 Binder Project
 - ATRN 630 Presentation

2. Skill Proficiency

- Competently pass practical exams on key clinical skills.
 - Standardized patient encounters evaluation.
 - General medical course evaluations.
- Proficiently perform clinical reasoning in simulated patient scenarios
 - Standardized patient encounters treatment planning

Academic Benchmarks Rubric

Criteria	Proficient (3)	Competent (2)	Developing (1)	Unacceptable(0)
Core Knowledge: Adv. Therapeutic Interventions	N/A	Exams average: >85%	Exams average: 75-84%	Exams average: <74%
Core Knowledge: Pharmacology	N/A	Exams average: >80% Chart Final: >90%	Exams average: 70-79% Chart Final: 70-89%	Exams average: <69% Chart Final: <69%
Semester GPA Requirement	3.7-4.0	3.3-3.69	3.0-3.29	<3.0
Application: ATRN 620 Role Playing Scenarios	N/A	Final score: 18-20 points	Final score: 16-17 points	Final score: <15 points
Application: ATRN 650 Binder Project	N/A	Final score: 18-20 points	Final score: 16-17 points	Final score: <15 points
Application: ATRN 630 Presentation	N/A	Final score: 90%	Final score: 70-89%	Final score: <69%
Skill Proficiency: Standardized Pt Evaluation	Average Score: >3.0	Average score: 2.0-2.9	Average score: 1.0-1.9	Average score: <0.99
Skill Proficiency: Standardized Pt Treatment Plan	N/A	Final score: 26-30 points	Final score: 23-25 points	Final score: <22 points
Skill Proficiency: General Medical Evaluations	N/A	Average score: >85%	Average score: 70-84%	Average score: <69%

Academic Benchmarks Total: 22

Clinical Benchmarks

1. Technical Skills

- Demonstrate **proficiency** by end of spring semester in:
 - Assessment, Recognition, and Management of Lower Extremity Injuries & Conditions
 - Selection and Application of Prophylactic & Therapeutic Taping and Wrapping Skills
- Demonstrate **competency** by end of spring semester in:
 - Assessment, Recognition, and Management of Upper Extremity Injuries & Conditions
 - Assessment, Recognition, and Management of Spine, Low Back, and Hip Injuries & Conditions
 - Selection and Application of Therapeutic Interventions
 - Medical Documentation

2. Communication Skills & Professional Attributes

- Almost always to always demonstrates the **ethical** behaviors expected by the WU MS-ATRN program, including Caring & Compassion, Integrity, Respect, Accountability, and Competence.
- Almost always to always demonstrates **professionalism**, including in appearance, verbal and written communication, and interactions with faculty and clinical preceptors.

3. Clinical Hours and Engagement

- Completes the minimum number of clinical hours (215) in diverse settings (e.g., high school, collegiate, or outpatient).
- Almost always to always demonstrates active initiative, dependability, enthusiastic attitude, punctuality, and adaptability in the clinical setting.

4. Evaluation and Feedback

- Obtain a satisfactory mid-rotation and final evaluation from preceptors, including professionalism and clinical skill application ratings.

5. Semester GPA Requirement – Clinical Course:

- Maintain a minimum GPA (e.g., 3.0 or above) in clinical experience athletic training course.

Clinical Benchmarks Rubric

Criteria	Proficient (3)	Competent (2)	Developing (1)	Unacceptable (0)
Technical Skills: L. Ex Evaluations	Average score: 2.5-3.0	Average score: 2.0-2.49	Average score: 1.0-1.9	Average score: < 0.99
Technical Skills: Taping & Wrapping	Average score: 2.5-3.0	Average score: 2.0-2.49	Average score: 1.0-1.9	Average score: < 0.99
Technical Skills: U. Ex Evaluations	N/A	Average score: > 2.0	Average score: 1.0-1.9	Average score: < 0.99
Technical Skills: Spine Evaluations	N/A	Average score: > 2.0	Average score: 1.0-1.9	Average score: < 0.99
Technical Skills: Therapeutic Interventions	N/A	Average score: > 2.0	Average score: 1.0-1.9	Average score: < 0.99
Communication: Ethical Behavior	N/A	Average score: > 2.0	Average score: 1.0-1.9	Average score: < 0.99
Professionalism	N/A	Average score: > 2.0	Average score: 1.0-1.9	Average score: < 0.99
Clinical Hours / Engagement	N/A	Cumulative Hours: > 215 Average score: > 2.0	Cumulative Hours: 200-215 Average score: 1.0-1.9	Cumulative Hours: <199 Average score: < 0.99
Preceptor Evaluations	N/A	Average score: > 2.0	Average score: 1.0-1.9	Average score: < 0.99
Clinical Experience GPA	Semester GPA: >3.7	Semester GPA: 3.3-3.69	Semester GPA: 3.0-3.29	Semester GPA: <3.0

Clinical Benchmarks Total: 25

Immersion Rotation Readiness Requirements

1. Self-Reflection and Goal Setting

- Submit a reflection essay on their clinical experiences, identifying strengths, weaknesses, and areas of interest.

2. Preceptor Endorsements

- Receive a score of 2 or above from two clinical preceptors affiliated with Winthrop University MS-ATRN program based on demonstrated readiness for immersion.

3. Cover Letters/Resumes

- Cover letters will be written to the clinical immersion of their choice.
- Updated professional resumes.

Immersion Readiness Rubric

Criteria	Proficient (3)	Competent (2)	Developing (1)	Unacceptable (0)
ATRN601 Self-Reflection & Goal Setting	N/A	Final score: >90%	Final score: 70-89%	Final score: <69%
Preceptor Endorsements	N/A	Average score: >2.0	Average score: 1.0-1.9	Average score: <0.99
Cover Letter / Resume	Average score: >3	Average score: 2.0-2.9	Average score: 1.0-1.9	Average score: <0.99

Immersion Readiness Benchmarks Total: 7

APPENDIX B

Professional Organization Mission and Vision Statements

National Athletic Trainers' Association Description

The National Athletic Trainers' Association (NATA) is the professional membership association for certified athletic trainers and others who support the athletic training profession. Founded in 1950, NATA has grown to a community of members that cover the globe. The majority of certified athletic trainers choose to be members of NATA to support their profession and to receive a broad array of membership benefits. By joining forces as a group, NATA members can accomplish more for the athletic training profession than they can individually. In addition, the NATA national office has full-time staff members who work to support NATA's mission.

National Athletic Trainers' Association Mission Statement

The mission of the National Athletic Trainers' Association is to represent, engage and foster the continued growth and development of the athletic training profession and athletic trainers as unique health care providers.

National Athletic Trainers' Association Vision Statement

Athletic trainers will be globally recognized as vital practitioners in the delivery and advancement of health care. Through passionate provision of unique services, athletic trainers will be an integral part of the inter-professional health care team.

Mid-Atlantic Athletic Trainers' Association Mission Statement

To enhance the quality of health care for athletes and those engaged in physical activity, and to advance the profession of athletic training through education and research in the prevention, evaluation, management, and rehabilitation of injuries.

South Carolina Athletic Trainers' Association Mission Statement

Supporting SCATA membership by the Advancement, Enhancement, and Improvement of the Athletic Training Profession in all phases and settings.

South Carolina Athletic Trainers' Association Vision Statement

SCATA will optimize the role of Athletic Trainers as licensed healthcare providers in South Carolina.

APPENDIX C



CODE OF ETHICS

Including Shared Professional Values

Revised May 2022

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.

The National Athletic Trainers' Association respects and values diversity amongst its members and patients served. Our members work respectfully and effectively with diverse patient populations in varied healthcare environments. The NATA prohibits discrimination based on race, ethnicity, color, national origin, citizenship status, religion (creed), sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, military status, family/parental status, income and socioeconomic status, political beliefs, or reprisal or retaliation for prior civil rights activity, or other unlawful basis, in any program or activity conducted or funded by the NATA (VATA, 2020).

Important Professional Values (PV) shared by the NATA membership include: 1) Caring & Compassion, 2) Integrity, 3) Respect, 4) Competence, and 5) Accountability. These shared PV underpin the NATA Code of Ethics, motivate honorable interpersonal behaviors, and conduct in member's interactions with all persons.

The Appendix to the Code of Ethics reveals a definition and sample behaviors for each shared PV.

PRINCIPLE 1. IN THE ROLE OF AN ATHLETIC TRAINER, MEMBERS SHALL PRACTICE WITH COMPASSION, RESPECTING THE RIGHTS, WELL-BEING, AND DIGNITY OF OTHERS.

(PRINCIPLE 1 is associated with the PV of Respect, Caring & Compassion, and Competence.)

- 1.1 Members shall act in a respectful and appropriate manner to all persons regardless of race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity and expression.

- 1.2 Member's duty to the patient is the first concern, and therefore members are obligated to place the well-being and long-term well-being of their patient above other stakeholders to provide competent care in all decisions, and advocate for the best medical interest and safety of their patient as delineated by professional statements and best practices.
- 1.3 Members shall preserve the confidentiality of privileged information and shall not release or otherwise publish in any form, including social media, such information to a third party not involved in the patient's care without a release unless required by law.

PRINCIPLE 2. MEMBERS SHALL COMPLY WITH THE LAWS AND REGULATIONS GOVERNING THE PRACTICE OF ATHLETIC TRAINING, NATIONAL ATHLETIC TRAINERS' ASSOCIATION (NATA) MEMBERSHIP STANDARDS, AND THE NATA CODE OF ETHICS.

(PRINCIPLE 2 is associated with the PV of Accountability.)

- 2.1. Members shall comply with applicable local, state, federal laws, and any state athletic training practice acts.
- 2.2. Members shall understand and uphold all NATA Standards and the Code of Ethics.
- 2.3. Members shall refrain from, and report illegal or unethical practices related to athletic training.
- 2.4. Members shall cooperate in ethics investigations by the NATA, state professional licensing/regulatory boards, or other professional agencies governing the athletic training profession. Failure to fully cooperate in an ethics investigation is an ethical violation.
- 2.5. Members must not file, or encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.
- 2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.

PRINCIPLE 3. MEMBERS SHALL MAINTAIN AND PROMOTE HIGH STANDARDS IN THEIR PROVISION OF SERVICES.

(PRINCIPLE 3 is associated with the PV of Caring & Compassion, Accountability.)

- 3.1. Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity, or services.
- 3.2. Members shall provide only those services for which they are qualified through education or experience and which are allowed by the applicable state athletic training practice acts and other applicable regulations for athletic trainers.
- 3.3. Members shall provide services, make referrals, and seek compensation only for those services that are necessary and are in the best interest of the patient as delineated by professional statements and best practices.
- 3.4. Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge and shall complete such educational requirements necessary to continue to qualify as athletic trainers under the applicable state athletic training practice acts.
- 3.5. Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.
- 3.6. Members who are researchers or educators must maintain and promote ethical conduct in research and educational activities.

PRINCIPLE 4. MEMBERS SHALL NOT ENGAGE IN CONDUCT THAT COULD BE CONSTRUED AS A CONFLICT OF INTEREST, REFLECTS NEGATIVELY ON THE ATHLETIC TRAINING PROFESSION, OR JEOPARDIZES A PATIENT'S HEALTH AND WELL-BEING

(PRINCIPLE 4 is associated with the PV of Respect.)

- 4.1. Members should conduct themselves personally and professionally in a manner that reflects the shared professional values, that does not compromise their professional responsibilities or the practice of athletic training.
- 4.2. All NATA members, whether current or past, shall not use the NATA logo or AT 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 well-being and shall not participate in any arrangement that exploits the patient.
- 4.4. Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try and influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.
- 4.5. Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.

Appendix to Code of Ethics

Athletic Training's Shared Professional Values

Established from research conducted by the NATA Professional Responsibility in Athletic Training Committee in 2020, the following are the five shared professional values of athletic training.

Caring & Compassion is an intense concern and desire to help improve the welfare of another.

Sample behaviors include:

- 1) Listening for understanding and a readiness to help.
- 2) Focusing on achieving the greatest well-being and the highest potential for others.
- 3) Spending the time needed to provide quality care.

Integrity is a commitment that is internally motivated by an unyielding desire to do what is honest and right.

Sample behaviors include:

- 1) Providing truthful, accurate and relevant information.
- 2) Abiding by the rules, regulations, laws and standards of the profession.
- 3) Using applicable professional standards and established policies and procedures when taking action or making decisions.

Respect is the act of imparting genuine and unconditional appreciation and value for all persons.

Sample behaviors include:

- 1) Engaging in active listening when communicating with others.
- 2) Acknowledging and expressing concern for others and their well-being.
- 3) Acting in light of the belief that the person has value.

Competence is the ability to perform a task effectively with desirable outcomes.

Sample behaviors include:

- 1) Thinking critically, demonstrating ethical sensitivity, committing to evidence-based practice, delivering quality skills and effective collaboration.
- 2) Making sound decisions while demonstrating integrity.
- 3) Ongoing continuous quality assessment and improvement.

Accountability is a willingness to be responsible for and answerable to one's own actions.

Sample behaviors include:

- 1) Acknowledging and accepting the consequences of one's own actions.
- 2) Adhering to laws, codes, practice acts and standards that govern professional practice.
- 3) Assuming responsibility for learning and change.

APPENDIX D



STANDARDS OF PROFESSIONAL PRACTICE

CERTIFIED ATHLETIC TRAINERS

PREAMBLE

The primary purpose of the Practice Standards are to establish essential duties and obligations imposed by virtue of holding the ATC® credential. Compliance with the Practice Standards are mandatory.

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 Practice Standards at all times.

STANDARD 1: DIRECTION

The Athletic Trainer renders service or treatment under the direction of, or in collaboration with a physician, in accordance with their training and the state's statutes, rules and regulations.

STANDARD 2: PREVENTION

The Athletic Trainer implements measures to prevent and/or mitigate injury, illness and long term disability.

STANDARD 3: IMMEDIATE CARE

The Athletic Trainer provides care procedures used in acute and/or emergency situations, independent of setting.

STANDARD 4: EXAMINATION, ASSESSMENT AND DIAGNOSIS

The Athletic Trainer utilizes patient history and appropriate physical examination procedures to determine the patient's impairments, diagnosis, level of function and disposition.

STANDARD 5: THERAPEUTIC INTERVENTION

The Athletic Trainer determines appropriate treatment, rehabilitation and/or reconditioning strategies. Intervention 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. Appropriate patient centered outcome assessments are utilized to document efficacy of interventions.

STANDARD 6: PROGRAM DISCONTINUATION

The Athletic Trainer may recommend discontinuation of the intervention program at such time the patient has received optimal benefit of the program. A final assessment of the patients' status is included in the discharge note.

STANDARD 7: ORGANIZATION AND ADMINISTRATION

The Athletic Trainer documents all procedures and services in accordance with local, state and federal laws, rules and guidelines.

STANDARD 8: CULTURALLY CONGRUENT PRACTICE

The Athletic Trainer practices patient centered care that is aligned with the cultural values, beliefs, worldview, and practices of the patient and other stakeholders.

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, specialists 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.

CODE 1: PATIENT CARE RESPONSIBILITIES

The Athletic Trainer, specialist or applicant:

- 1.1 Renders quality patient care regardless of the patient’s age, gender, sex, race, religion, disability, sexual orientation, gender identity, or any other characteristic including those protected by law.
- 1.2 Protects the patient from undue harm and acts always in the patient’s best interest and is an advocate for the patient’s welfare, including taking appropriate action to protect patients from health care providers or athletic training students who are impaired or engaged in illegal or unethical practice.
- 1.3 Demonstrates sound clinical judgment that is based upon current knowledge, evidence-based guidelines and the thoughtful and safe application of resources, treatments and therapies.
- 1.4 Communicates effectively and truthfully with patients and other persons involved in the patient’s program, while maintaining privacy and confidentiality of patient information in accordance with applicable law.
 - 1.4.1 Demonstrates respect for cultural diversity and understanding of the impact of cultural and religious values.
- 1.5 Develops and maintains a relationship of trust and confidence with the patient and/or the parent/guardian of a minor patient and does not exploit the relationship for personal or financial gain.
- 1.6 Does not engage in intimate or sexual activity with a patient and/or the parent/guardian of a minor patient.
- 1.7 Informs the patient and/or the parent/guardian of a minor patient of any risks involved in the treatment plan.
 - 1.7.1 Does not make unsupported claims about the safety or efficacy of treatment.
- 1.8 Does not practice athletic training, or otherwise render patient care, while under the influence of alcohol, drugs, or any other substance that may or is likely to impair the Athletic Trainer’s ability to render quality, skilled care to the patient.

CODE 2: COMPETENCY

The Athletic Trainer, specialist or applicant:

- 2.1 Engages in lifelong and professional learning activities to promote continued competence and culturally congruent practice.
- 2.2 Complies with the most current BOC recertification policies and requirements.

CODE 3: PROFESSIONAL RESPONSIBILITY

The Athletic Trainer, specialist or applicant:

- 3.1 Practices in accordance with the most current BOC Practice Standards.
- 3.2 Practices in accordance with applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training including, without limitation, applicable state licensing and ethical requirements.
- 3.3 Practices in collaboration and cooperation with others involved in a patient's care when warranted; respecting the expertise and medicolegal responsibility of all parties.
- 3.4 Provides athletic training services only when there is a reasonable expectation that an individual will benefit from such services.
- 3.5 Does not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, identity or services or the skills, training, credentials, identity or services of athletic training.
 - 3.5.1 Provides only those services for which they are prepared and permitted to perform by applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training.
- 3.6 Does not guarantee the results of any athletic training service.
- 3.7 Complies with all BOC exam eligibility requirements.
- 3.8 Ensures that any information provided to the BOC in connection with exam eligibility, certification, recertification or reinstatement including but not limited to, exam applications, reinstatement applications or continuing education forms, is accurate and truthful.
- 3.9 Does not possess, use, copy, access, distribute or discuss certification exams, self-assessment and practice exams, score reports, answer sheets, certificates, certificant or applicant files, documents or other materials without proper authorization.
- 3.10 Takes no 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 or misconduct; actual or threatened use of violence; the prohibited sale or distribution of controlled substances, or the possession with intent to distribute controlled substances; or improper influence of the outcome or score of an athletic contest or event.
- 3.11 Reports any suspected or known violation of applicable local, state and/or federal rules, requirements, regulations and/or laws committed by themselves and/or by another Athletic Trainer that is related to the practice of athletic training and/or that may impact the Athletic Trainer's ability to practice athletic training in accordance with "BOC Standards of Professional Practice."

- 3.12 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 themselves or by another Athletic Trainer that is related to athletic training.
- 3.13 Complies with applicable local, state and/ or federal rules, requirements, regulations and/or laws related to mandatory reporting when identified as a “mandatory reporter” or “responsible employee.”
- 3.14 Cooperates with BOC investigations into alleged illegal and/or unethical activities and any alleged violation(s) of a “BOC Standard of Professional Practice.” Cooperation includes, but is not limited to, providing candid, honest and timely responses to requests for information and/or documentation.
- 3.15 Complies with all confidentiality and disclosure requirements of the BOC and existing law.
- 3.16 Does not endorse or advertise products or services with the use of, or by reference to, the BOC name without proper authorization.
- 3.17 Complies with all conditions and requirements arising from certification restrictions or disciplinary actions taken by the BOC, including, but not limited to, conditions and requirements contained in decision letters and consent agreements entered into pursuant to Section 4 of the “BOC Professional Practice and Discipline Guidelines and Procedures.”
- 3.18 Fulfills financial obligations for all BOC billable goods and services provided.

CODE 4: RESEARCH

The Athletic Trainer, specialist 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 human rights and well-being of research participants.
- 4.3 Conducts research activities intended to improve knowledge, practice, education, outcomes and/or public policy relative to the organization and administration of health systems and/or health care delivery.

CODE 5: SOCIAL RESPONSIBILITY

The Athletic Trainer, specialist or applicant:

- 5.1 Strives to serve the profession and the community in a manner that benefits society at large.
- 5.2 Advocates for appropriate health care to address societal health needs and goals.

CODE 6: BUSINESS PRACTICES

The Athletic Trainer, specialist or applicant:

- 6.1 Does not participate in deceptive or fraudulent business practices.
- 6.2 Seeks remuneration only for those services rendered or supervised by an Athletic Trainer; does not charge for services not rendered.
 - 6.2.1 Provides documentation to support recorded charges.
 - 6.2.2 Ensures all fees are commensurate with services rendered.

- 6.3 Maintains adequate and customary professional liability insurance.
- 6.4 Acknowledges and mitigates conflicts of interest.