



Lebanon Valley College

ATHLETIC TRAINING PROGRAM

2019-2020

Athletic Training Student Handbook

“Athletic training is practiced by athletic trainers. Athletic Trainers (ATs) are healthcare professionals who render service or treatment, under the direction of or in collaboration with a physician, in accordance with their education and training and the states' statutes, rules and regulations. As a part of the healthcare team, services provided by ATs include injury and illness prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention, and rehabilitation of injuries and medical conditions.”

National Athletic Trainers' Association

For more information about the profession of athletic training visit:

www.nata.org

NOTICE

This *Athletic Training Student Handbook* was created to inform the Athletic Training Student (ATS) of policies and procedures of the Athletic Training Program (ATP) at Lebanon Valley College (LVC). The overall intent of this handbook is to ensure a quality educational experience for each student and to ensure safe and efficient operation of all athletic training facilities. To achieve the goals of the educational program, each student must be thoroughly familiar with the policies and procedures listed herein. If anyone feels that a particular policy needs to be reviewed, it should be brought to the attention of the Athletic Training Program Director (PD). Policies and procedures can be changed, but not ignored.

The information in this handbook is not all-inclusive. This handbook should be used as a guide throughout the progression in the ATP. As needed, the handbook will change as policies and procedures are modified, added, or deleted. Any alterations to the handbook will be made available to all students, faculty, and Preceptors.

This handbook and other essential documents necessary for the operation of the ATP will be accessible through the “Athletic Training Major” Canvas course. Students are required to know how to locate and access these documents as updates are made for use in the Athletic Training Program.

TABLE OF CONTENTS

ACCREDITATION	7
INTRODUCTION TO ATHLETIC TRAINING PROGRAM	8
VISION AND MISSION STATEMENT	9
GOALS AND OUTCOMES	9
PROGRAM PERSONNEL.....	10
PROPER ATHLETIC TRAINING RELATED TERMINOLOGY	11
STATEMENT OF NON-DISCRIMINATION	14
STATEMENT OF REASONABLE ACCOMMODATIONS	14
Technical Standards Policy.....	14
ADMISSION REQUIREMENTS & PROCEDURES	16
LVC Undergraduate Student Admission Policy	16
Graduate Student Admission Policy	18
STUDENT EXPENSES & FINANCIAL AID.....	19
Student Expenses	19
Financial Aid.....	19
Estimated Program Expenses.....	19
STUDENTS SELECTED INTO THE ATHLETIC TRAINING PROGRAM	21
Documents to Submit Prior to First Fall Semester	21
Grading Policy	22
Student Professional Liability Insurance	22
PROFESSIONAL PHASE OF ATHLETIC TRAINING PROGRAM.....	23
Program of Study	23
Academic Calendar & Catalog	25
Grievance Policy.....	25
MATRICULATION & GRADUATION (DEGREE) REQUIREMENTS	25
Athletic Training Program Academic Progression.....	25
Academic Probation.....	26

Termination from MAT Program	26
LVC ATP Committee on Academic Policies & Procedures (CAPP).....	26
Awarding of Degree.....	27
ATHLETIC TRAINING PROGRAM POLICIES	27
Attendance Policy	27
Academic Dishonesty	28
Dress Code & Physical Appearance Policy	28
Expected Classroom and Laboratory Behavior and Etiquette	31
Examination Policy	31
Guidelines for Anatomy Cadaver Lab	32
Writing Guidelines.....	32
Professionalism & Personal Communication Policy	32
Social Media Policy	33
Cellular Phone Policy	35
Conduct & Relationships Policy.....	36
Confidentiality of Records Policy.....	37
Board of Certification (BOC) Exam Policy.....	37
PROFESSIONAL BEHAVIOR & DEVELOPMENT: EXPECTATIONS OF STUDENT....	38
Behaviors of Professional Practice	38
LVC ATP Athletic Training Student Qualities.....	39
Professional Membership/Association.....	40
DISCIPLINARY ACTION.....	40
CLINICAL EDUCATION.....	41
Integrated Clinical Skills.....	42
Integrated Clinical Skill Completion	42
Clinical Education Requirements for Graduation.....	44
ATS Responsibilities in Clinical Education	44
Acceptable Clinical Hours	44

Clinical Practice Process.....	45
General ATS Guidelines for Clinical Education	45
CPR (Retraining)	47
Blood-Borne Pathogen Training (Annual) and Exposure Policy	47
Standard Precautions (OSHA), HIPAA, and FERPA.....	49
Communicable Disease Policy	49
Clinical Education Contract.....	51
Clinical Practice Coursework	51
Clinical Supervision Policy.....	52
Clinical Hour Policy	52
Clinical Site Development	53
Selection and Assignment of Clinical Education Experiences	53
Conflict of Interest Policy.....	54
Clinical Education Attendance Policy	55
Athletic Participation	55
Outside Employment	55
Transportation to Clinical Sites	56
Substance Abuse Policy.....	56
Travel and Living Expenses.....	56
Program Dismissal	57
Medical Leave of Absence (LOA).....	57
PROGRAM EVALUATION.....	59
Clinical Experience Documentation	59
Athletic Training Student Self-Evaluation.....	59
Student Performance Evaluation (Mid/End Rotation).....	59
Preceptor and Clinical Setting Evaluation	60
Course and Instructor Evaluation.....	60
Senior Survey/Exit Interview.....	60

Alumni Survey	60
STATEMENT OF UNDERSTANDING (to be signed)	61
APPENDICES	62
Appendix A:	
Technical Standards Policy Signature Form.....	63
Appendix B:	
Vaccinations and TB Screen.....	64
Appendix C:	
Personal Health Insurance Coverage	65
Appendix D:	
Drug Screen Policy	66
Appendix E:	
Criminal Background Check Policy	68
Appendix F:	
Communicable Disease Policy Signature Form	69
Appendix G:	
Request for Excused Absence Form.....	70
Appendix H:	
National Athletic Trainers’ Association Code of Ethics.....	72
Appendix I:	
BOC Standards of Professional Practice.....	74
Appendix J:	
Blood-Borne Pathogen Student Exposure Incident Report Form.....	78

ACCREDITATION

The ATP at LVC is currently seeking initial accreditation and is currently not accredited by the Commission on Accreditation of Athletic Training Education (CAATE). The institution will be submitting a self-study to begin the accreditation process during the fall 2019 semester.

Submission of the self-study and completion of a site visit does not guarantee that the Program will become accredited. Students that graduate from the program prior to accreditation **WILL NOT** be eligible to sit for the credentialing examination for ATs and will not be eligible for licensure in most states.

INTRODUCTION TO ATHLETIC TRAINING PROGRAM

The ATP at LVC is seeking initial accreditation. The Master in Athletic Training (MAT) is part of the Department of Athletic Training. Only students accepted into the professional phase of the ATP will be eligible to pursue a MAT.

The Athletic Training Student (ATS) is a person who is engaged in a professional program of study that may lead to national certification as an athletic trainer by the Board of Certification (BOC), Inc. (<http://www.bocatc.org>). The ATP is an intense, demanding, and rewarding program of study. The ATP prepares students for successful completion of the BOC examination and for future careers in athletic training. The professional phase is comprised of two major components including academic course work and the clinical practice portion to complete the degree. Students' progress in a specific course sequence. In addition, students are engaged in various clinical education experiences that provide the ATS with practical learning designed to strengthen both professional preparation and career placement.

Upon completion of the requirements of the MAT degree, including clinical requirements and granted endorsement by the Program Director, students will be eligible for the BOC Inc. examination for Athletic Training. *Students must also comply with state practice acts prior to practicing the profession of athletic training.*

Being an ATS at LVC is a significant opportunity and responsibility. While ATSs are responsible for assisting in the healthcare of the athletes and patients at diverse clinical assignments, they also represent the entire ATP and LVC in all that they do. Any misconduct that compromises the image or integrity of the ATP, Lebanon Valley College, or puts the health of patients at risk, is grounds for dismissal from the ATP. The policies and procedures of the ATP are clearly outlined in the pages following. Violations of these policies and procedures will be treated as described in the sections of this handbook that address particular academic or clinical education issues.

It is the intention of the entire ATP faculty and staff that the students' experiences with this program be enjoyable and educational. We will attempt to provide students with the opportunity to gain the knowledge, skills, and abilities necessary to be an outstanding athletic trainer. We ask for and expect cooperation, dedication, loyalty, and enthusiasm in return.

Acknowledgment is given to the National Athletic Trainers' Association (NATA), Board of Certification Inc. (BOC), and the Commission on Accreditation of Athletic Training Education (CAATE) for the resource and materials contained within this handbook. The ATP realizes the importance of fostering a positive didactic and clinical learning environment and encourages students and instructors to use their collective talents to promote excellence in learning, thereby optimizing each learning experience.

VISION AND MISSION STATEMENT

The vision of the Lebanon Valley College Athletic Training Program is to be the preeminent Athletic Training Program in the world.

The mission of the Athletic Training Program is to provide diverse educational opportunities that will facilitate the personal, intellectual, and professional development of students, preparing them for a career in healthcare as an Athletic Trainer.

GOALS AND OUTCOMES

GOAL 1: Program graduates will have the necessary knowledge, skills, and abilities of a highly qualified healthcare professional in the field of Athletic Training with the ability to effectively work in diverse settings.

Outcomes:

1. Show competence in injury and illness management, clinical examination and diagnosis, and therapeutic interventions fundamental to a care plan for each patient.
2. Demonstrate competence in injury and illness prevention, mitigation of health disparities, and wellness education of patients of varying demographics.
3. Develop and implement the necessary administrative components vital to patient and provider safety, resource management and risk management.

GOAL 2: Program graduates will possess the skills necessary to be autonomous life-long learners.

Outcomes:

4. Show participation in personal and professional growth and development.
5. Discriminate a variety of data to inform practice.

GOAL 3: Program graduates will have the characteristic of an ethical clinician utilizing a servant leader approach.

Outcomes:

6. Grow professional socialization through collaborative interprofessional practice and education.
7. Practice the attributes of a servant leader through patient-centered and value-based care models.
8. Demonstrate professional behaviors consistent with the NATA Code of Ethics and the BOC, Inc. Standards of Professional Practice.

**Continual improvement in the ATP will evolve through the consistent evaluation measures employed by the Program in which effectiveness of the Program as a whole and student outcomes relative to program goals will be measured. The ATP understands the ever-changing scope of medical care, technology, and educational processes, and strives to stay abreast of new developments to become a leader in the preparation of competent athletic trainers.*

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PROPER ATHLETIC TRAINING RELATED TERMINOLOGY

In an effort to promote professionalism and standard nomenclature within the athletic training profession, it is imperative that students, faculty, and Preceptors use the most up-to-date terminology to reflect current educational practices.

The terms “trainer,” “training room,” and “student trainer” are strictly prohibited within the LVC ATP.

The recommended and proper nomenclature is “athletic trainer or AT,” “athletic training facility/clinic,” and “athletic training student or AT student.”

Athletic trainers need to conduct themselves as health care professionals including behaviors both verbal and written.

1. **Athletic Training Faculty:** core faculty teaching specific athletic training content in the program who are also athletic trainers.
2. **Athletic Training Student (ATS):** students admitted to the professional phase of the athletic training program. A student currently enrolled in courses while matriculating through a CAATE accredited professional education program.
3. **BOC Inc.:** Board of Certification (BOC) for Athletic Training; certifying body for athletic training.
4. **CAATE:** Commission on Accreditation of Athletic Training Education (CAATE), the accrediting body for athletic training programs.
5. **Certification:** a voluntary process by which a practitioner’s entry-level knowledge and skills are demonstrated and measured against a defined standard.
6. **Clinical Decision Making:** “clinical decision making is a contextual, continuous, and evolving process, where data are gathered, interpreted and evaluated in order to select an evidence-based choice of action.” (Source: <http://dx.doi.org/10.1016/j.profnurs.2014.01.006>)
7. **Clinical Education:** formalized learning experience through direct patient contact. The teaching and application of athletic training knowledge, skills and clinical abilities on an actual patient base that is evaluated and feedback provided by a Preceptor as a part of an accredited athletic training program. (Source: CAATE Standards).
8. **Clinical Education Coordinator (CEC):** administrator over the clinical portion of the program.
9. **Integrated Clinical Skills (ICSs):** athletic training skills and abilities utilized and assessed during direct patient care.
10. **Clinical Practice Courses (clinical education portion):** courses that connect didactic learning to clinical practice. All clinical education requirements are managed through 5 courses.
11. **Clinical Site/Rotation:** the location where students conduct clinical practice under supervision.

12. **Competence:** “professional competence is the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community served. Competence builds on a foundation of clinical skills, scientific knowledge, and moral development.” (Source: Epstein RM. Hundert EM. Defining and Assessing Professional Competence. JAMA 2002;287(2):227-235)
13. **Core Courses (didactic/laboratory course):** required athletic training coursework.
14. **Direct Patient Contact/Care:** the application of athletic training services directly to a patient (hands-on) as part of their care.
15. **Direct Supervision:** Supervision of the ATS during clinical experiences. The Preceptor must be physically present and have the ability to intervene on behalf of the ATS and the patient.
16. **Disablement Model:** conceptual models that provide a framework for clinical practice and research. Clinicians conceptualize patient function as an interaction between a person’s health condition, environmental factors, and personal factors (World Health Organization). The athletic training profession has adopted/endorsed the World Health Organization’s International Classification of Functioning, Disability, and Health (ICF) as the preferred disablement model for the profession.
17. **EATA:** Eastern Athletic Trainers’ Association – Composed of District 1 and District 2 Organizations - <http://www.goeata.org/> PA is part of District 2 (<http://www.natad2.org/>)
18. **Interprofessional Education (IPE):** the process of learning with, about and from other healthcare providers.
19. **NATA:** National Athletic Trainers’ Association (<https://www.nata.org/>) – Professional membership association for ATs.
20. **Patient Care:** the provision of athletic training services (i.e. injury and illness prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention and rehabilitation of injuries and medical conditions) to an actual patient.
21. **Patient-centered Care:** “providing care that is respectful of and responsive to individual patient preferences, needs, and values, and ensuring that patient values guide all clinical decisions.” (Source: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2847105/>)
22. **PATS:** Pennsylvania Athletic Trainers’ Society – PAs Professional State Organization
23. **Preceptor:** clinical supervisor (athletic trainer or other licensed professional) who teaches and/or evaluates students in a clinical setting using an actual patient base.
24. **Pre-professional Student:** A person with intentions to enroll in an accredited athletic training program. Students are not involved in the provision of athletic training services and the role of pre-professional students is bound by state practice acts.
25. **Professional Preparation:** The preparation of the student who is in the process of becoming an AT. Professional education culminates with eligibility for BOC Inc. certification and appropriate state credential.

26. **Program Director (PD):** administrator over the athletic training program.
27. **Supervision of Professional Athletic Training Students:** “A physical presence of the clinical instructor [Preceptor] allowing for ‘visual and verbal’ contact between the Preceptor and the student with ‘the ability for the Preceptor to intervene on behalf of the patient’.”
(Source: CAATE: 2007 Standards)
28. **Supporting Courses:** courses required to instruct education competencies that support athletic training.
- *Source: Athletic Training Glossary (<https://caate.net/resources-and-additional-documents/>)

STATEMENT OF NON-DISCRIMINATION

In compliance with the LVC Statement of Non-Discrimination, the ATP accepts applications from eligible applicants, regardless of race, color, national origin, ancestry, religion/creed, sex, pregnancy, sexual orientation, or gender identity or expression, age, disability, genetic information, veteran status, or another unlawful basis. Furthermore, this statement extends into all clinical settings. All Preceptors, coaches, staff, patients, and athletes must be judged and treated under the same conditions.

STATEMENT OF REASONABLE ACCOMMODATIONS

The LVC ATP is dedicated to providing reasonable accommodation to qualified students throughout the ATP curriculum; however, students must be able to meet the Technical Standards as outlined below and provide a signed copy of the **Technical Standards Policy Signature Form (Appendix A)**. The Program follows the policy set forth by the College regarding access to the Center for Accessibility Resources:

Individuals with disabilities are guaranteed certain protections and rights of equal access to programs and activities under Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act Amendments Act (ADAAA) of 2008. Therefore, LVC recognizes the responsibility of the college community to provide equal educational access for otherwise qualified students with disabilities.

Any student who needs classroom or testing accommodations is invited to present letters to the Center for Accessibility Resources, located in the Lebegern Learning Commons on the ground floor of the Mund College Center.

<http://www.lvc.edu/offices-directories/center-for-disability-resources/>

Accommodations for clinical education are considered on a case-by-case basis, designed to meet individual student needs. Determining reasonable accommodations to enable an individual to meet the Technical Standards required of an Athletic Trainer will be an interactive process involving faculty and Preceptors, the student, and the Director of the Center for Accessibility Resources.

Technical Standards Policy

The ATP at LVC is a rigorous and intense program that places specific requirements and demands on the students enrolled. An objective of the Program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The technical standards set forth by the ATP establish the essential qualities considered necessary for students admitted to this Program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program's accrediting agency (CAATE). The following abilities and expectations must be met by all

students admitted into the ATP. In the event a student is unable to fulfill these Technical Standards with or without accommodations, the student will not be admitted into the Program.

Candidates for selection to the Athletic Training Program must demonstrate:

1. The willingness to follow the policies and procedures as stated in the LVC Athletic Training Student Handbook;
2. The mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm;
3. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients;
4. The ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively. Students must be able to understand and speak the English language at a level consistent with competent professional practice;
5. The ability to record the physical examination results and a treatment plan clearly and accurately;
6. The capacity to maintain composure and continue to function well during periods of high stress;
7. The perseverance, diligence, and commitment to complete the Athletic Training Program as outlined and sequenced;
8. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations;
9. Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

Candidates for selection into the Athletic Training Program will be required to verify they understand and meet these technical standards or that they believe that, with certain accommodations, they can meet the standards. *Compliance with the program's program standards does not guarantee a student's eligibility for the BOC certification exam.* All students must sign the **Technical Standards Policy Signature Form (Appendix A)** as part of their application to the LVC ATP.

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

ADMISSION REQUIREMENTS & PROCEDURES

Consideration for admission into LVCs ATP is possible for students who are already pursuing an undergraduate *Pre-Athletic Training/Exercise Science Major* at LVC and for transfer students with a bachelor degree from another institution.

LVC Undergraduate Student Admission Policy

Pre-Athletic Training Program Phase

LVC students seeking admission into the professional phase of the ATP are considered to be of *Pre-Athletic Training/Exercise Science Major* status. Students are not an *Athletic Training Major* or an *Athletic Training Student* until meeting all curriculum criteria and having been selected into the professional phase of the ATP. The Athletic Training Program Director (PD) will notify the Registrar's Office to change the status of students who have earned admission into the ATP.

LVC Student-athletes seeking admission into the professional phase of the ATP are advised to contact the PD prior to applying. Without exceptions, student-athletes are required to complete all of the professional phase program requirements as stated in this handbook. In some instances, this may require additional semesters or completion of required clinical hours during the non-traditional academic calendar. Student-athletes should be aware that failure to complete the required hours of clinical experience within each Clinical Practice course will result in failure to proceed to the next Clinical Practice level; which will delay completion of the ATP requirements for successful program completion.

Five-Year Bachelor's to Master Option

The five-year master's degree option is designed for incoming freshmen (or internal or external transfers who meet degree matriculation requirements) who are interested in an accelerated path toward the advanced degree. In this option, students complete three years of undergraduate coursework in the Exercise Science Department followed by two full years of Athletic Training specific courses. There are a total of 66 credits over the course of six semesters culminating in the Master of Athletic Training degree. At the conclusion of the spring semester of the 4th year, students will receive a Bachelor of Science degree with a major in Exercise Science. Following the completion of the 5th year, students will receive a Master of Athletic Training degree.

High school graduates will be eligible for the five-year Master of Athletic Training program if they meet the following academic criteria.

- Overall high school GPA of 3.0
- Submission of SAT or ACT scores

Sophomore Status

If the cohort is not full, exercise science students, who have reached sophomore status and obtained a 2.75 GPA may apply to enter the *Pre-Athletic Training* cohort. Students must file a written request to the PD and submit a copy of their transcript.

Admission Requirements - Professional Athletic Training Phase

The following information must be submitted before acceptance into the professional phase of the ATP can be made official:

- A. Signed **Technical Standards Policy Signature Form (Appendix A)**
- B. **Grade Point Average (GPA):** At the conclusion of the third year of study, prior to PHT/ATR 611 Human Anatomy, the GPA requirements are:
 - **Cumulative GPA – 2.750 on a 4.000 scale**

Graduate Student Admission Policy

Applications are considered on a rolling basis for acceptance into LVCs ATP. Individual applications are reviewed once materials have been received; therefore, it is in the applicant's best interest to complete their application, including submission of required documentation, as early as possible. Fulfillment of the basic requirements does not guarantee admission. The admissions committee selects the most qualified applicants for admission by considering the following admission requirements:

- A. Bachelor's degree from an accredited institution
- B. Minimum cumulative GPA of 2.750 on a 4.000 scale
- C. Official transcript verifying that the following college pre-requisite courses have been completed within the last seven years with a minimum grade of a C (>73% without rounding) or better in the following pre-requisite courses. (Note: Advanced Placement (PP) and CLEP credits will not be accepted for any science pre-requisite course):
 - a. Biology – 3-4 credits with lab
 - b. Chemistry – 3-4 credits with lab
 - c. Physics – 3-4 credits with lab
 - d. Psychology – 3 credits
 - e. Human Anatomy (or A&P I) – 3-4 credits with lab
 - f. Human Physiology (or A&P II) – 3-4 credits with lab
 - g. Exercise Physiology – 3 credits

***NOTE:** Every student is eligible to apply even if the pre-requisite courses or the undergraduate degree is still in progress. All pre-requisite courses must be completed by the start date of the program.

- D. Graduate Record Examination (GRE) scores
- E. Signed **Technical Standards Policy Signature Form (Appendix A)**
- F. **International Applicants:** All foreign coursework must be evaluated by a Foreign Credential Service. We also require TOEFL/IELTS Scores for any applicant for whom English is their second language (scores are considered on a case by case basis).
- G. Interviews will be conducted upon review of application.

To apply to LVC's Athletic Training Program:

- A. Submit Official Transcripts
- B. Submit GRE Scores (Contact Program Director for GRE Institutional Code)
- C. Submit a signed **Technical Standards Policy Signature Form (Appendix A)**
- D. Submit TOEFL/IELTS Scores, if applicable

Upon successful completion of the application process, students are selected on a competitive selection process based on educational/practical field sites available, individual candidate credentials, and materials submitted. If not selected, students may reapply the following year.

Note: Meeting admission criteria does not guarantee admission into the ATP.

STUDENT EXPENSES & FINANCIAL AID

Student Expenses

College tuition and fees can be found at <http://www.lvc.edu/offices-directories/business-office/graduate-professional-studies/>

Financial Aid

Financial aid and scholarship can be found at <http://www.lvc.edu/admission/tuition-financial-aid/>. Currently, there are no scholarships specifically for athletic training at LVC.

Numerous scholarship opportunities are available through PATS, EATA, and the NATA. Many require the student to be a member of the NATA and are competitive, merit-based awards. Information and eligibility requirements can be found on the websites for each of the above professional organizations or from the Athletic Training PD. Occasionally, other awards are available from outside organizations. Eligibility requirements for these awards vary and information will be distributed to the ATS when received by the PD.

College policies on refunds can be found at <http://www.lvc.edu/offices-directories/business-office/graduate-professional-studies/refunds/>

Estimated Program Expenses

In addition to tuition and fees, additional expenses (i.e. travel, clothing, Criminal Background Check, etc.) associated with LVCs ATP and all clinical experiences are the responsibility of the student. An estimated cost of tuition and fees is outlined below. Please contact the PD if you have any questions.

A list of expenses that may be incurred by the student include: (this list may not be complete)

Item	Cost	Description
Criminal Background and Drug Testing	Between \$50-\$75	All students are required to undergo a criminal background and drug test prior to acceptance and matriculation.
Physical Exam/Immunizations	\$25	Required physical exam and immunizations are the responsibility of the student.
Textbooks	Approximately \$250 per term	See the MAT instructors for textbook lists

Item	Cost	Description
Instructional Assessment Fee	\$250 per year	
Laptop Computer/Tablet	Between \$200-\$700	A laptop computer/tablet is required for the MAT program.
Clothing	\$100-\$150 over 2 years	MAT program clothing is available through the ATP. Polo shirt, t-shirts and jackets are most often purchased by the student.
Travel to/from clinical site and/or cost of living at a distant site	\$200-\$500 for local clinical sites. \$100-\$300 for immersive clinical sites.	The cost varies based on the location of the clinical site and the price of gasoline. Students may be paired and carpooling is encouraged.
Annville Cost of Living	Between \$500-\$700 per month for Annville cost of living Between \$300-\$700 per month for immersive experience cost of living	The United States Census Bureau website has information about the cost of living in Annville.
International Experience (option)	Between \$2000-\$5000	The MAT offers international experiences that range from 7 to 10 days. Any international experience is optional.

STUDENTS SELECTED INTO THE ATHLETIC TRAINING PROGRAM

Once accepted, ATSS will participate in a structured educational setting emphasizing CAATE standards and guidelines. Students will become proficient in entry-level athletic training competencies, through formal classroom instruction and clinical practice within the clinical education settings. Typically, 15-20 students (maximum 25) are admitted each year, at the conclusion of the spring semester. Each semester in the program will include both a didactic and clinical education component. **Students admitted into the professional phase of the graduate healthcare programs at LVC are permitted to take professional phase courses based on availability.**

Completion of all ATP coursework and a rich clinical education experience serves to prepare students for successful completion of the BOC certification examination and entry-level athletic training. While LVC cannot guarantee BOC certification, the ATP strives to adequately prepare students to be successful in the certification process, as well as all of their professional endeavors.

Documents to Submit Prior to First Fall Semester

The ATP officially begins during the month of May. During that first semester, students will not be completing clinical practice hours. To begin clinical practice hours during the subsequent Fall semester students must submit various documents. See the designated Appendix for more information regarding the required documents. Prior to the first Fall Semester, students must upload the following to E*Value:

- A. Proof of CPR certification as Professional Rescuer (annual, as required)
- B. Proof of Blood-Borne Pathogen training (annual through SafeColleges)
- C. Proof of HIPPA training (through CEC)
- D. Proof of FERPA training (through SafeColleges)
- E. Proof of Personal Vaccinations (immunization record) and TB Screen (Appendix B)
 - a. Physical exam, documented on the Report of Medical History form (found on E*Value)
- F. Proof of Personal Health Insurance Coverage (Appendix C)
- G. Verification of Completed Drug Screen (through Quest) – (Appendix D)
- H. Verification of Criminal Background Check – (Appendix E)
 - a. All students who earned acceptance into the ATP must complete a drug screen and background check as described in this handbook before beginning clinical practice in any clinical education setting. ***Failure to pass a drug screen and background check may result in dismissal from the Athletic Training Program.**
 - b. Negative background checks including the following three mandatory as well as any further requirements as per individual clinic sites:
 - (a) Pennsylvania Child Abuse History Clearance
<https://www.compass.state.pa.us/cwis/public/home>
 - (b) Pennsylvania State Police Criminal Record Check
<https://epatch.state.pa.us/Home.jsp>
 - (c) FBI fingerprint (Department of Human Services)

<https://uenroll.identogo.com/>

- I. Signed Communicable Disease Policy Signature Form (annual) (Appendix F)
- J. Signed privacy agreement (through CEC).

****(All results and information pertaining to the above information will be kept in secured ATS files within the Athletic Training Program Director's office and must be verified before beginning the initial clinical experience.)***

Grading Policy

The following scale is consistent for each course. Each course has a specific assignment and testing criteria.

100-93.00%	A	4.00
92.99-90.00%	A-	3.67
89.99-87.00%	B+	3.33
86.99-83.00%	B	3.00
82.99-80.00%	B-	2.67
79.99-77.00%	C+	2.33
76.99-73.00%	C	2.00
<72.99	F	0.00

Student Professional Liability Insurance

Through the course of providing athletic training services, staff and athletic training students will be exposed to a certain level of professional liability. While performing within the general operating policies, procedures, and other guidelines as a part of providing services to Lebanon Valley College athletes, students, and staff and providing services while representing Lebanon Valley College, staff and athletic training students will be provided liability insurance coverage under the College's general liability policy.

PROFESSIONAL PHASE OF ATHLETIC TRAINING PROGRAM

Program of Study

The LVC ATP is pursuing accreditation by the Commission on Accreditation of Athletic Training Education (CAATE). As part of the criteria to meet the 2020 Standards and Guidelines for accreditation by CAATE, the ATP is required to document where all curricular standards are taught throughout the curriculum. A complete listing of the curricular standards and where they are introduced in the curriculum can be found in the office of the Program Director.

Mastery of these standards provide the entry-level athletic trainer with the capacity to provide athletic training services to clients and patients of varying ages, lifestyles, and needs. The CAATE requires that the standards be instructed and evaluated in each accredited professional athletic training program.

Curriculum – Sequence of Courses

Year One			Year Two		
SUMMER			SUMMER		
Course ID	Course Name	Credits	Course ID	Course Name	Credits
PHT/ ATR 611	Human Anatomy (Summer I)	5	ATR 734	Therapeutic Interventions II (Summer I)	4
ATR 612	Fundamental Skills & Prevention in AT (Summer II)	2	ATR 760	Athletic Training Clinical Practice III	1
ATR 618	Prevention and Care of Emergency Medical Conditions (Summer II)	3	ATR 727	Clinical Skills Lab III (Summer I)	1
ATR 613	Intro. to Clinical Skill Development (Summer II)	1			
	Total Credits	11		Total Credits	6
FALL			FALL		
Course ID	Course Name	Credits	Course ID	Course Name	Credits
ATR 652	Research Methods I	2	ATR 752	Research Methods II (last 8 weeks)	2
ATR 628	Musculoskeletal Assessment & Diagnosis I	4	ATR 736	Optimizing Athletic Performance (last 8 weeks)	3
PHT/ ATR 616	Biomechanics and Kinesiology	4	ATR 744	Administration and Mgt. in Athletic Training (last 8 weeks)	2
ATR 624	Clinical Skills Lab I	1	ATR 762	Athletic Training Clinical Practice IV (First 9-10 weeks (end of summer/beginning of fall))	3
ATR 661	Athletic Training Clinical Practice I	2	ATR 729	Clinical Skills Lab IV (last 8 weeks)	1
ATR 602	Overview of Professional Practice	1			
	Total Credits	14		Total Credits	11
SPRING			SPRING		
Course ID	Course Name	Credits	Course ID	Course Name	Credits
ATR 632	Musculoskeletal Assessment & Diagnosis II	4	ATR 746	Psychosocial Aspects of Health, Injury & Performance (first 8 weeks online)	2
ATR 634	Therapeutic Interventions I	4	ATR 750	Seminar in Athletic Training (online)	2
ATR 630	Clinical Epidemiology & Evidence Based Practice	2	ATR 764	Athletic Training Clinical Practice V	4
ATR 626	Clinical Skills Lab II	1			
ATR 662	Athletic Training Clinical Practice II	2			
ATR 614	Pathophysiology and Pharmacology	3			
	Total Credits	16		Total Credits	8

Academic Calendar & Catalog

Academic Calendar can be accessed at:

<http://www.lvc.edu/academics/academic-resources/academic-calendar/>

College Catalog can be accessed at:

<https://www.lvc.edu/academics/academic-resources/college-catalogue/>

Grievance Policy

The LVC ATP follows the College grievance policy. Accessible here:

<https://www.lvc.edu/academics/academic-resources/college-catalogue/college-academic-policies-and-procedures/grievances/>

MATRICULATION & GRADUATION (DEGREE) REQUIREMENTS

Athletic Training Program Academic Progression

Athletic Trainers are allied health professionals and academic performance must be a priority of all students enrolled in the professional phase of LVCs ATP. The professional phase grade point averages (GPA) are calculated independently from the three-year pre-professional phase completed at LVC prior to entering the professional phase of the ATP. Beginning with the First Summer Semester (ATR 611 Human Anatomy, ATR 612, ATR 613, & ATR 618), each enrolled student in the professional phase of the ATP must achieve and maintain a cumulative professional GPA of 3.000 or higher on a 4.000 scale.

The ATP has two types of courses with course-specific grades. In every **Didactic/Laboratory Course**, a minimum grade of a C ($\geq 73\%$ without rounding) or a grade of “P” (Pass) must be achieved as part of the professional phase to remain in good standing. In every **Clinical Practice Course**, a minimum grade of a B ($\geq 83\%$ without rounding) must be achieved as part of the professional phase to remain in good standing.

A grade less than a ‘C’ in any **Didactic/Laboratory Course** and a grade less than a ‘B’ in any **Clinical Practice Course** is considered a failing grade. If a student fails to meet the minimum requirements for a didactic/laboratory or clinical experience course but maintains a cumulative professional GPA of 3.000 or higher on a 4.000 scale, then the professional course must be repeated at its next course offering. Each course, as part of the professional phase of the ATP, is offered once per academic calendar year. Failing a course will extend the time needed to complete the program. Coursework for “extra credit” or re-testing is not an option to improve final course grades. A professional course may only be repeated once to meet the requirements. Only a maximum of two (2) professional phase ATP courses may be repeated. Courses passed with a ‘C’ or better cannot be repeated to improve the professional GPA. All professional phase requirements must be completed within three (3) years of beginning the professional phase of the ATP at LVC.

NOTE: For professional courses that are repeated and the minimum grade is achieved, only the higher grade earned is used to calculate the professional and cumulative GPA.

Academic Probation

Newly enrolled (First Year, Summer semester) professional phase ATs who earn a professional GPA below 3.000 will be placed on academic probation for one semester. A student in this situation must raise their GPA to 3.000 after the First Year Fall Semester of the professional phase. The student will be required to regularly meet with the PD or designated faculty member to ensure academic improvement through additional assignments, tutoring, and/or counseling. If the 3.000 professional GPA standard is met after one semester on probation, the student will be removed from academic probation and continue in the program in good academic standing. Failure to achieve the 3.000 professional GPA after the First Year Fall Semester will result in termination from the MAT. Failure to achieve a 3.000 GPA at any time during the professional phase of the program (except the First Year Summer Semester) will result in termination from the MAT program.

Termination from MAT Program

Students can be terminated from the MAT program for the following academic reasons:

- a. If at any time, it is not mathematically possible to achieve the required 3.000 professional GPA by the completion of the following semester, no probationary period will be provided and the student will be terminated from the program.
- b. Failure to meet the standards imposed by academic probation as described above or as stipulated by a Committee on Academic Policy and Procedure (CAPP).
- c. A failing grade in three or more professional courses.
- d. Failure to receive a passing grade (C or better; Pass) in a repeated professional course.
- e. Failure to receive a passing grade (C or better; Pass) in a professional course while on academic probation.
- f. Failure to bring up the professional GPA to a 3.000 on a 4.000 scale while on academic probation by the end of the First Fall Semester.
- g. Failure to meet degree requirements in the specified time frame of three (3) years of beginning the professional phase of the ATP at LVC. A student whose matriculation has been terminated has the right to petition the ATP Committee on Academic Policy and Procedures (CAPP) for reconsideration.
- h. Failure to abide by the policies and procedures of the ATP as outlined in this document and the entire *Athletic Training Student Handbook*.

LVC ATP Committee on Academic Policies & Procedures (CAPP)

The ATP Committee on Academic Policies and Procedure (CAPP) was developed specifically for the ATP to assure that the standards set by the College at large and academic policies and procedures set by the ATP faculty are consistently applied in a non-prejudicial and non-discriminatory manner.

Petitions to reconsider dismissal actions against a student must be submitted to the CAPP. Due to the limited time between some semesters, students must submit petitions as soon as possible and no later than seven days after the posting of semester grades. The CAPP will respond to the petition and schedule a hearing in a timely manner to accommodate as soon as possible to minimize disruption for the subsequent semester. The CAPP will inform the student of the scheduled hearing date. The student will be requested to submit all pertinent materials to the committee in advance of the hearing. The student has the right to present his/her case in person if so desired. The committee may request the attendance of other individuals who may speak to the issue(s) under consideration. The student will be notified of the committee's decision in writing within 5 days after the hearing. For decisions made by the CAPP, an appeal to the Associate Dean of Academic Affairs will be allowed only in the event of significant additional information and/or extenuating circumstances.

Awarding of Degree

The Master of Athletic Training Degree (MAT). Students who successfully complete the professional phase of study in the Master of Athletic Training Program (including all prescribed clinical experiences) will be awarded the MAT Degree.

ATHLETIC TRAINING PROGRAM POLICIES

Students are expected to conduct themselves in a professional manner at all times when representing LVC and the ATP. This includes upholding professional standards and ethical practice (national and state standards), ongoing learning and education, effective communication and dialogue, professional attitudes and behaviors, proper patient contact and interaction, professional appearance and dress that is indicative of a health care professional. Professional behavior and development is something learned, practiced, and modeled for others.

Attendance Policy

The ATP strives to deliver a quality educational experience. Active participation in learning experiences within the classroom and laboratory is a contributing factor to the quality of education attained. Furthermore, active engagement in learning experiences in the clinical setting is critical to translating the knowledge, skills and abilities learned in the class/laboratory setting to clinical practice. **Student attendance is mandatory.**

Students may only be excused from class/laboratory sessions or from their assigned clinical education assignment under certain circumstances. Proper approval must be obtained by submitting the ***Request for Excused Absence Form (Appendix G)***. The ***Request for Excused Absence Form (Appendix G)*** must be submitted prior to the date of absence for foreseen circumstances.

Circumstance	Category	Required Documentation
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Clinical responsibilities	Foreseen	<i>Request for Excused Absence Form</i> , team schedule, travel confirmation, and Preceptor communications
Athletic Training related Professional Conferences	Foreseen	<i>Request for Excused Absence Form</i> , conference agenda and registration confirmation
Personal Day Class/Laboratory Session (one per semester)	Foreseen	<i>Request for Excused Absence Form</i> . *Approval must be obtained two weeks prior to requested personal day.
Personal Day Clinical Education Assignment (two per semester)	Foreseen	<i>Request for Excused Absence Form</i> . *Approval must be obtained two weeks prior to requested personal day.
Academic responsibilities	Foreseen	<i>Request for Excused Absence Form</i>
Family and/or personal emergency	Unforeseen	Immediate communication with Program Director and Clinical Education Coordinator. Required documentation will be determined on a case-by-case basis
Illness and/or hospitalization	Unforeseen	Immediate communication with Program Director and Clinical Education Coordinator. Required documentation will be determined on a case-by-case basis.

If a student is excused from class or laboratory session, it is the students' responsibility to make up coursework, assignments, quizzes, exams or other learning activities at the convenience of the primary instructor.

If a student is absent from a class or laboratory session without proper approval (unexcused absence), the student will not be permitted to make up any coursework, assignments, quizzes, exams, or other learning activities.

Personal Day absence beyond one for class/laboratory sessions or two for clinical education assignments will result in a 5% deduction from the final grade.

Academic Dishonesty

The ATP follows the College Academic Dishonesty policy.

<https://www.lvc.edu/academics/academic-resources/college-catalogue/college-academic-policies-and-procedures/academic-honesty/>

Dress Code & Physical Appearance Policy

Dress Code Policy

An important part of professional conduct is appearance. All ATs are expected to abide by the following guidelines when participating in ATP classroom lectures, laboratory activities, and clinical rotations (on-campus and off-campus). All attire is expected to be professional, functional, and modest.

- **Professional Dress for Lecture Days** (syllabi will distinguish lecture versus lab attire)
 - Clothing that represents yourself, the ATP, and LVC in a professional way.
 - Clothing not on the *Prohibited* list – see below.
- **Professional Dress for Lab Activities**
 - Appropriate dress for laboratory sessions includes clothing that permits the students to move through the full range of motion without being restrictive.
 - Shorts and T-shirts are ideal. No cleavage/breasts, belly, or buttocks should be visible at any time. (**See the Three B check below.**)
 - For shoulder, spine or auscultation labs please note the following:
 - Females are permitted to wear a bathing suit, halter top, or sports bra
 - For hip, pelvis, or spine labs please note the following:
 - Males and females are to wear shorts
 - Closed-toe shoes are to be worn to all lab sessions.
- **Professional Dress categories when Attending Speaker Events and/or Conferences:**
 - Business casual dress
 - Dress pants and dress or polo shirt for males
 - Dress pants or skirts (that fall below the knee) and modest blouses/sweaters for females
 - Professional attire
 - Suit and tie for men
 - Business suit with either dress/skirt (that falls below the knee) or pants for females
 - Be sure to maintain good personal hygiene according to the standards listed in the physical appearance section of this handbook. Hair should be tied back or neatly groomed. Fingernails should be short and clean.
 - The following are never appropriate as business casual or professional attire
 - Bare mid-drifts, low cut or see-thru garments
 - Jeans
 - Sneakers
 - Excessively high heels
 - Excessive jewelry
 - Strong perfumes or colognes
- **Professional Dress for ALL clinical sites (on-campus and off-campus):** *each individual site may require different professional dress; therefore, be sure to communicate with the Preceptor.
 - Appropriate pants or shorts (often khaki in color)
 - Polo or collared shirts
 - Proper footwear (closed-toe shoes, neutral-colored socks)
 - Must wear a wristwatch
 - Name tags must be worn at all times.

The following types of clothing are always PROHIBITED, except if stated differently in laboratory course syllabi:

- The three (3) B's – breast, belly, or buttocks (see further description below)
- Hats/Visors in the classroom/laboratory space

- Open-toed shoes, slip-on shoes, flip-flops or sandals
- Jeans
- Cut-offs
- Sweat pants/wind pants
- Tank tops
- Faded or torn clothing
- Bandanas or “do-rags”
- Excessively tight clothing
- Clothing that exposes undergarments or skin around the mid-drift
- Any clothing with promotional logos other than those affiliated with LVC
- Other clothing deemed inappropriate by the staff

The three B check – before you leave your residence, stand in front of a full-length mirror. Perform the following body motions/postures; if at any time any one of the three B’s is exposed or at risk for exposure from any angle or vantage point, you are not in compliance with the dress code policy – CHANGE YOUR CLOTHES.

- Raise arms overhead to 180° shoulder flexion, add a full torso twist to each side
- With arms overhead, bend forward at the hips (90° hip flexion) – the body will be parallel to the floor
- With arms overhead, perform a full squat
- In all positions, check the three B’s – if you can see it, so can a patient or other bystander

Physical Appearance Policy

Personal hygiene and clean-cut grooming are essential for healthcare providers. ATSs should maintain a neat and professional appearance at all times. The appearance of the ATS should not distract from the professional image they are trying to develop. Extremes of appearance are to be avoided during any educational experience (classroom, laboratory, or clinical). These guidelines are in place because you represent not only yourself but also the entire ATP and LVC.

Untidiness or sloppiness will not be tolerated during any educational experiences. The following is expected:

- Appropriate grooming.
- Jewelry that does not interfere with patient care is permitted but must be kept to a minimum.
- Facial hair will only be permitted if it appears professional and well-kept.

ATSs who do not comply with the dress code or physical appearance policy will be excused from the classroom, laboratory or clinical setting and expected to return promptly in the appropriate attire. All violations of the dress code or physical appearance policy will be personally addressed with the individual student and documented in the students’ file. A documented ongoing pattern (5 violations or more) of inappropriate dress or physical appearance may be grounds for dismissal from the clinical assignment and/or the ATP.

Expected Classroom and Laboratory Behavior and Etiquette

To establish a productive learning environment for everyone in all curricular settings, it is critical to adhere to the following classroom and laboratory guidelines:

- Be on time;
- Be respectful of every individual you encounter;
- Be respectful of equipment and supplies and DO NOT use any equipment or supplies for personal use;
- Silence cell phones and refrain from using them in the classroom and laboratory space while class or lab is in session;
- Do not place your shoes on the treatment tables or the chairs that people sit in;
- Remove keys from pockets when working on the treatment tables;
- Keep the classroom and laboratory environment clean at all times;

Examination Policy

*This policy applies to all Written Exams, Oral Exams, Quizzes, & Simulations/SP encounters.

The common assessment period for the ATP is Monday 8 am – 10:00 am. A faculty member may choose to use this common assessment period and/or the designated class time to administer assessments (e.g. written exams, online exams, oral exams, quizzes, and simulations/Standardized Patient (SP) encounters).

Students must not discuss any information about the assessment while the exam is in progress or with another student who is waiting to take the assessment. Violation of these policies constitutes “academic dishonesty” and will result in disciplinary action up to and including permanent dismissal from the Program. Refer to the Academic Honesty Guidelines.

All assessments are scheduled at logical breaks in the material and dates are tentative. Most of the material that will be on the assessments will be covered in lecture and laboratory. There will be sections or even chapters that the student will be required to read which may be on the exam. All assessments begin ON TIME. If you arrive later than 15 min after the start of the assessment, you will not be allowed to take the assessment. If you are tardy (within 15 minutes after the start of the exam), 1 point for each minute you are late will be deducted from your assessment score.

Students are not permitted to use, or be in possession of, the following devices during ANY assessment: phones, laptops (unless online exam), tablets, smartwatches, calculators, or any other electronic device. If a student requires a blank piece of paper, for note-taking or calculations during the examination, it must be surrendered to the instructor upon completion of the exam. Restroom breaks will not be allowed during assessments; therefore, students are expected to use restroom facilities prior to any assessment. Faculty may change a student’s seat at any time during the examination at their discretion.

The Clinical Skills Assessment Framework of the ATP was designed to demonstrate the

student's learning over time. Three different assessments are in place to evaluate the student at the novice, advanced beginner, and competent level. More information regarding the Clinical Skills Assessment Framework can be obtained from the Athletic Training Program Director.

Guidelines for Anatomy Cadaver Lab

The use of human cadavers is a privilege. These individuals have donated their bodies so that students may learn and become better ATs. It is necessary, therefore, to treat all bodies and body parts with the respect they deserve. The highest standards of conduct are expected in the laboratory. No one, except students enrolled in the current class and instructors, is allowed into laboratories without prior permission of the instructor. Under no circumstances are photographs to be taken. Body parts are not to be removed from the human cadaver laboratory. If these rules are violated, the result will be immediate removal from the class with follow-up disciplinary action through the ATP, LVC, and possible legal action

Writing Guidelines

The ATP expects that preparation of written assignments, manuscripts, and professional papers or presentations are completed and submitted according to *the American Medical Association Manual of Style, 9th edition, 1998*. Refer to the AMA Manual of Style for further guidance in preparing written work and citations. Written assignments will be graded according to their grammatical, mechanical, and technical fidelity and their adherence to the appropriate professional format as well as for their content. Assignments received late may be penalized 10% of the total points for the assignment per day. Depending on the course requirements, assignments may be submitted electronically as well as in hard copy. Specific requirements and expectations will be included in course syllabi.

If a question arises about the authenticity of written work and the possibility of plagiarism is suspected, the faculty may, at their discretion, may use a program through Canvas. If evidence of inappropriate placement of unreferenced material is found, disciplinary action will be taken forward in the administrative structure of both the Department and the College through the Academic Honesty policy/process.

TUTORIAL FOR CITATIONS AND PLAGIARISM: URL to libguides on citations/plagiarism: <http://libguides.lvc.edu/citingreferences>

Professionalism & Personal Communication Policy

Conducting oneself as a professional involves every aspect of life. ATs should pay close attention to the image they project when communicating, this includes (but is not limited to): email messages/addresses, text messages, voice mail, voice recordings on cell/home phones, ringtones, personal websites, social media accounts (not limited to Facebook pages, twitter

accounts, SnapChats, etc. - see Social Media policy below). With the majority of the above being public domains, ATs should very closely monitor the contents and methods of their personal and professional communications. Any inappropriate content or communications noticed or brought to the attention of the ATP faculty will be addressed immediately. Any notices that are brought to the attention of the ATP faculty will be immediately addressed with the accused student. The ATS will be asked to rectify the situation by whatever means necessary (depending on the content/communication type). The incident will be documented in the student's file and failure of the student to correct the issue in a timely and appropriate manner may result in further disciplinary action at the discretion of the Athletic Training PD and others with authority over the academic program.

Students should always use professional means of communication. Students should call or email as the first rule of communication. Text messaging communication should only be utilized in emergency situations or by the "approval" of the individual receiving the text message. Please avoid texting faculty and course instructors unless it is an emergency situation that requires their immediate attention.

Social Media Policy

The LVC ATP supports the use of social media to reach audiences important to the College such as students, prospective students, faculty and staff. The College's presence or participation on social media sites is guided by College policy. This policy applies to ATs who engage in Internet conversations for school-related purposes or school-related activities such as interactions in or about clinical and didactic/laboratory course activities. Distribution of sensitive and confidential information is protected under HIPAA (<https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html>) and FERPA (<https://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>) laws whether discussed through traditional communication channels or through social media.

General Information – Policy, Procedure/Considerations, and Consequences

Social media outlets are defined as mechanisms for communication designed to be disseminated through social interaction, created using highly accessible and scalable publishing techniques. Social media outlets are commonly thought of as a group of Internet-based technological foundations of the Web that allows the creation and exchange of user-generated content. Examples include but are not limited to LinkedIn, Wikipedia, Second Life, Flickr, blogs, podcasts, Twitter, Facebook, and YouTube. While this policy may need to be modified as new technologies and social networking tools emerge, the spirit of the policy will remain the protection of sensitive and confidential information. Social media often spans traditional boundaries between professional and personal relationships and thus takes additional vigilance to make sure that one is protecting personal, professional, and the College's reputations.

It is expected that all students represent the College, and the ATP in a fair, accurate and legal manner while protecting the brand and reputation of the institution. When publishing information on social media sites, remain cognizant that information may be public for anyone to see and can be traced back to the individual. Since social media typically enables two-way communications with an audience, everyone has less control about how materials posted will be used by others.

As one person remarked, “If you wouldn’t put it on a flier, carve it into cement in the quad or want it published on the front of the Wall Street Journal, don’t broadcast it via social media channels.”

Policy

- Protect confidential, sensitive, and proprietary information: Do not post confidential or proprietary information about the College, faculty, staff, students, clinical facilities, patients, or others with whom one has contact in the role of LVC ATS.
- Respect copyright and fair use. When posting, be mindful of the copyright and intellectual property rights of others and of the College. For guidance, visit the College’s Library site or seek consultation through the Copyright Office - Libraries.
- Do not use LVC or ATP marks, such as logos and graphics, on personal social media sites. Do not use LVC’s name to promote a product, cause, or political party or candidate.
- Use of the ATP marks (logos and graphics) for College sanctioned events must be approved (posters, flyers, postings) by the administration.
- It is expected that during clinical experiences, use of any devices (cell phones, computers, notebooks, etc.) employed for social media will be used only as authorized by faculty or Preceptors. It is always expected that the cell phone aspect of any device is silenced.
 - No personal phone conversations or text messaging are allowed at any time while in patient/client areas or in the classroom/laboratory setting. If the student needs to respond to an emergency text or phone call during class, the student should ask to leave the classroom and respond as deemed necessary.
- Use of devices (cell phones, computers, notebooks, etc.) during class shall be restricted to note taking and classroom activities. Use otherwise is distracting for not only the student involved in the activity but those in the immediate area/vicinity.
- No student shall videotape professors or fellow students for personal or social media use without the express written permission of the faculty or fellow student. At NO time shall patients be videotaped or photographed without written permission of the patient/client, patient/client guardian (if applicable), and of the facility.
- Be aware of your association with LVC in online social networks. If you identify yourself as a student, ensure your profile and related content is consistent with LVC policies and with how you wish to present yourself to colleagues, patients, and potential employers. Identify your views as your own. When posting your point of view, you should neither claim nor imply you are speaking on LVC’s behalf, unless you are authorized to do so in writing.
- HIPPA and/or FERPA guidelines must be followed at all times. Identifiable information concerning patients/clinical rotations must not be posted in any online forum or Web` page.
- Ultimately, you have sole responsibility for what you post. Be smart about protecting yourself, your and others privacy, and confidential information.

Procedure/Considerations

- There is no such thing as a “private” social media site. Search engines can turn up posts years after the publication date. Comments can be forwarded or copied. Archival systems save information, including deleted postings. If you feel angry or passionate about a subject, it’s

wise to delay posting until you are calm and clear-headed. Think twice before posting. If you are unsure about posting something or responding to a comment, ask your faculty. If you are about to publish something that makes you even the slightest bit uncertain, review the suggestions in this policy and seek guidance.

- Future employers hold you to a high standard of behavior. By identifying yourself as an LVC ATS through postings and personal Web pages, you are connected to your colleagues, clinical agencies, and even patients. Ensure that content associated with you is consistent with your professional goals.
- ATSs are preparing for a profession which provides services to a public that also expects high standards of behavior.
- Respect your audience.
- Adhere to all applicable College privacy and confidentiality policies.
- You are legally liable for what you post on your own site and on the sites of others. Individual bloggers have been held liable for commentary deemed to be proprietary, copyrighted, defamatory, libelous or obscene (as defined by the courts).
- Employers are increasingly conducting Web searches on job candidates before extending offers. Be sure that what you post today will not come back to haunt you.
- Monitor comments. You can set your site so that you can review and approve comments before they appear. This allows you to respond in a timely way to comments. It also allows you to delete spam comments and to block any individuals who repeatedly post offensive or frivolous comments.
- Do not use ethnic slurs, personal insults, obscenity, pornographic images, or engage in any conduct that would not be acceptable in the professional workplace.
- You are responsible for regularly reviewing the terms of this policy.

Consequences

- Violations of patient privacy with an electronic device will be subject to HIPAA and/or FERPA procedures/guidelines and consequences.
- Students who share confidential or unprofessional information do so at the risk of disciplinary action including failure in a course and/or dismissal from the program.
- Each student is legally responsible for individual postings and may be subject to liability if individual postings are found defamatory, harassing, or in violation of any other applicable law. Students may also be liable if individual postings include confidential or copyrighted information (music, videos, text, etc.).

Resources: https://www.ncsbn.org/Social_Media.pdf

Cellular Phone Policy

In the classroom:

In the classroom setting (lecture and laboratory), ATSs should have their cell phones off or on a quiet, vibrate mode. The cell phone should remain in the student's backpack, bag, or purse, and should not be taken out while the class is in session, as this is very disruptive to the instructor

and the class. Text messaging during a class period will not be tolerated. ATP faculty may confiscate the cellular phone until the end of the class period if they become aware of such activity.

In the clinical setting:

In the clinical setting, cell phone use by ATSs should be restricted to emergency situations only. Any type of cell phone use (conversation or text messaging) is distracting and unnecessary in the clinical education environment. Preceptors will inform the Program Director and/or Clinical Education Coordinator if cell phone usage by an ATS continues to be problematic.

Conduct & Relationships Policy

With Athletes/Patients Policy

ATSs have a twofold role; that of a general student and that of an ATS. ATSs should remember that they are filling both of these roles in and out of the clinical settings and therefore must act accordingly. It is recognized that in working closely with a team, friendships may arise between ATS and patient. A professional demeanor should be exercised at all times. In the clinical setting, students should fulfill their roles as ATSs for their respective teams/patients. In this role, they are not only responsible for assisting in the care of the team's athletes/patients, but also for being active learners and increasing their athletic training skills, knowledge, and abilities.

LVC Athletic Setting

ATSs dating LVC athletes/patients can lead to very compromising situations. An ATS is NOT permitted to date athletes/patients from the team that he/she is assigned. If a situation arises where an ATS is dating an LVC athlete/patient from another team, the relationship cannot become evident in the clinical setting. Such a relationship must be reported to the Clinical Education Coordinator immediately upon entering the professional phase of the Athletic Training Program – regardless of the relationship as already established or developing. If the student fails to communicate this and it does become evident and in any way inhibits the ability of the ATS to perform, interferes with the athlete's performance, or the coach or supervisor feels the relationship is affecting the athlete/patient, or team, the ATS will be reprimanded or removed from the clinical education experience. For these reasons, relationships between ATSs and LVC athletes/patients are **HIGHLY** discouraged.

High School Setting

At NO time can an ATS date or demonstrate an inappropriate relationship with a student or patient at any of the high school affiliate sites. If a Preceptor becomes aware of such, he/she will notify the Athletic Training Program Director, and the ATS will be dismissed from the LVC ATP. In addition, the student could face criminal charges.

With Coaches & Other Medical Professionals Policy

ATs should develop professional relationships with the coaches of the teams with which they work. Students' interacting with coaches should increase with their clinical experiences. If an ATs has any problem or difficulty with an athlete or coach, it should be brought to the attention of the Preceptor immediately.

When interacting with physicians and other medical professionals, ATs should be very professional. These interactions are a critical component to the clinical education of the student, and they are to be sought out. ATs are encouraged to ask questions when appropriate and to use appropriate professional language.

Relationships between ATs and any coach or member of the sports medicine team are **HIGHLY** discouraged. Any established or developing relationship must be reported to the Athletic Training PD immediately. Failure to report such relationships will result in the ATs dismissal from the LVC ATP.

Confidentiality of Records Policy

During your experiences as an LVC ATs, you will come into contact with a variety of different people. As an ATs, you have an obligation to yourself, the athletes/patients you work with, your supervisors, team physicians, athlete's/patient's parents, other athletic training students, the ATP, and to Lebanon Valley College. As an ATs, you should always maintain a professional and working relationship to the people you work with, especially the athletes/patients. This is admittedly difficult at times, as the student-athletes/patients are often your peers. Socialization with the athletes/patients during working time is highly discouraged. As an ATs you are to never discuss any information concerning an athlete/patient with anyone other than your immediate supervisor. This includes any information regarding an athlete's/patient's medical condition, treatment, or any information which you acquire in a locker room, athletic training clinics, physician's office, or otherwise. This information is considered to be non-public information and is protected under HIPPA/FERPA. If someone asks you a question about an athlete/patient, refer him/her to your supervisor. Remember that anything an athlete/patient tells you falls into the area of medical confidentiality. The unique opportunity you have to observe and participate in various clinical settings as an ATs can and will be terminated if you violate this confidentiality. The staff athletic trainer, team physician, or the coach will handle all public comments about injuries.

Board of Certification (BOC) Exam Policy

The ATP at LVC is dedicated to educating students who qualify to sit for the BOC exam. Any student enrolled in their (final) semester prior to graduation is eligible to sit for the BOC exam. In order to sit for the BOC exam, students must be endorsed by the Program Director of the ATP. Endorsement is granted to students who earn a passing score on all domains of the Self-Assessment Exam provided by the BOC, Inc.

PROFESSIONAL BEHAVIOR & DEVELOPMENT: EXPECTATIONS OF STUDENT

Professional development is a process. The following information is specific to the expectations the profession of athletic training, the ATP at LVC and all program faculty and Preceptors have of themselves and each student.

Behaviors of Professional Practice

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

Primacy of the Patient

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

Team Approach to Practice

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

Legal Practice

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

Ethical Practice

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

Advancing Knowledge

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

Cultural Competence

- Demonstrate awareness of the impact that clients'/patients' cultural differences have on their

attitudes and behaviors toward healthcare.

- Demonstrate the knowledge, attitudes, behaviors, and skills necessary to achieve optimal health outcomes for diverse patient populations.
- Work respectfully and effectively with diverse populations and in a diverse work environment.

Professionalism

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

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LVC ATP Athletic Training Student Qualities

Athletic Training Students are expected to demonstrate the following qualities:

- a. **Dependability** –ATs must establish consistent trustworthiness and reliability when fulfilling obligations, assignments (academic and clinical), and maintain consistent adherence to all of the policies and procedures of the ATP and all affiliated clinical experience facilities.
- b. **Loyalty** –ATs must demonstrate loyalty to their studies, the ATP and the College. This includes maintaining the integrity of self and the community and resisting participation in gossip or negative conversations.
- c. **Dedication** –ATs must exhibit a dedication to their personal, intellectual, and professional growth. This includes showing dedication to the clinical and didactic opportunities presented to them. All of these aspects will enhance the learning experience and environment for both student and instructor.
- d. **Responsibility** – ATs must accept responsibility for their own learning, view challenges as opportunities for growth, and strive to develop the mindset of a life-long learner.
- e. **Professionalism** – ATs must embrace the path to becoming a professional and always demonstrate professionalism. This will require students to dress appropriately, communicate effectively, respect others, grow from feedback, complete tasks competently, consistently and promptly, ask intelligent questions, manage impulsivity, and remain persistent. Growing into a professional is a process. In order to earn respect as a professional, one must prove to emulate the characteristics of a professional.
- f. **Servant Leadership** – ATs must hold themselves accountable to share power, listen and empathize with others, put the needs of others before their own, help others to achieve their maximum potential to ensure growth and strength of the community that surrounds them.
- g. **Ethical** – ATs must conform to all rules and standards set forth by the National Athletic Trainers' Association Code of Ethics (Appendix H), LVCs ATP, and LVC.
- h. **Initiative** – ATs are expected to independently motivate themselves to assess their resources, take responsible and timely action when required, and demonstrate a willingness to get things done enthusiastically.

- i. **Reflective** – ATs must aim at becoming reflective by constantly self-monitoring their actions and attitudes. Furthermore, this translates into thinking independently when presented with information to ensure that students think and reflect on what was seen and heard versus just repeating it.

Professional Membership/Association

It is **strongly advised** that ATs join appropriate professional associations, specifically the National Athletic Trainers' Association (NATA). Membership to the NATA will provide the student with membership to the national association, as well as district membership to the Eastern Athletic Trainers' Association (EATA) also referred to as NATA District 2. Membership in the NATA has numerous benefits for the student, including a subscription to the *Journal of Athletic Training*, *Athletic Training Education Journal*, and *NATA News*, significant discounts on conference registration costs, and fee reduction for the national certification exam. Student members will also have access to an online student blog provided through the NATA website at www.nata.org. To be eligible for most scholarships through the state (PATS), district (EATA D2), and national associations (NATA), ATs must be members of the NATA. Students are also encouraged to join the Pennsylvania Athletic Trainers' Society (PATS). Membership information can be obtained online or from the Athletic Training Program Director.

DISCIPLINARY ACTION

ATs are expected to conduct themselves in a professional manner at all times. Again, ATs should remember that they are not only representing themselves but the entire Athletic Training Program, as well as Lebanon Valley College. Any misconduct or action taken by a student that in any way portrays a negative image upon the ATP or the College will be grounds for disciplinary action. The Athletic Training Program Director and the ATP CAPP Committee will review any and all incidents that are brought to their attention by clinical staff, other faculty members, students, coaches, etc. and determine the appropriate action to be taken. Severe misconduct or noncompliance with the policies and procedures stated within this handbook may be grounds for dismissal from the Athletic Training Program. If dismissed from the ATP, the student is not eligible for re-admission into the program.

CLINICAL EDUCATION

The clinical education curriculum facilitates the development of professional practice skills to achieve Athletic Training Program (ATP) and Athletic Training Students (ATS) goals and objectives of an entry-level athletic trainer. The ATP expects ATSs to be appropriately challenged to integrate skills and knowledge learned in the classroom to current athletic training practice in an environment that is supported by Preceptors who demonstrate expertise in the clinical athletic training setting. The purpose of the clinical education component at LVC is to provide a broad spectrum of experiences and increasing levels of autonomy that ensures the ATS is well prepared to enter the field of athletic training.

There are five clinical education opportunities scheduled throughout the two-year curriculum. Clinical Education Orientation occurs prior to the first Clinical Practice course to introduce ATSs to policies, procedures, and requirements of clinical education and affiliating sites.

The initial two clinical practice experiences, ATR 661 Athletic Training Clinical Practice I (fall) & ATR 662 Athletic Training Clinical Practice II (spring), are semester-long integrative experiences in local colleges and secondary schools during which foundational science and fundamental skills are taught didactically. ATSs are assigned to available sites by the Clinical Education Coordinator (CEC) and are expected to participate in the patient management sequence as appropriate as they progress through Integrated Clinical Skills (ICS).

The third integrative clinical experience occurs during the summer immediately following the first professional year. ATR 760 Athletic Training Clinical Practice III is a 30-hour non-sport clinical experience.

The final two clinical education experiences are immersive in nature and occur in the second year of the professional program. ATR 762 Athletic Training Clinical Practice IV commences prior to the start of the semester during the traditional fall sports preseason and continues through 7 weeks (total of 8-10weeks) of the fall semester, during which time there will be no additional didactic coursework. ATSs will be required to come to campus once a week as part of the clinical education course. Following this experience, ATSs will engage in an 8-week accelerated semester of coursework for the remainder of the fall semester.

During the final spring semester, all ATSs will be placed in a clinical experience preferably located outside of a 60-mile radius of LVC. ATR 764 Athletic Training Clinical Practice V will be a semester-long experience during which time ATSs will take one additional online course, ATR 750 – Seminar in Athletic Training, to prepare them for the NATABOC certification exam and subsequently as an entry-level practitioner. Experiences during this 16-week timeframe may include clinical settings previously completed, or other specialty practice settings based on professional goals of the ATS. ATSs are expected to demonstrate high levels of patient management skills and independent critical and clinical decision making with appropriate oversight by Preceptors in their respective environments.

Through the completion of all clinical education experiences, the ATP expects ATSs will have the opportunity to participate in a wide range of clinical practice experiences, including: Individual and team sports; Sports requiring protective equipment; Patients of different sexes; Non-sport patient populations; and a variety of conditions other than orthopedics. Some clinical rotations will require afternoon, evening, and weekend commitments.

Integrated Clinical Skills

The integration and synthesis of knowledge and skill competencies into clinical education is termed an Integrated Clinical Skill (ICS). ATSs must demonstrate a command of knowledge, skills, and clinical abilities in a specific area (e.g. Therapeutic Exercise) before demonstrating their aptitude of the ICS (e.g. rehabilitation of a patient).

ICSs are evaluated as part of each clinical practice course in the semester following the classroom instruction and assessment of specific Education Competencies. Each clinical practice course is designed to provide the ATS with “authentic” clinical experiences to engage the ATS in utilizing the Education Competencies in the practice of athletic training. The clinical practice course will spend time preparing each ATS for the integration of these skills in patient care which may include reviewing specific knowledge and skills (competencies) taught and assessed in previous academic courses. This may be accomplished through mock scenarios, including but not limited to “paper patients” and “standardized/simulated patient encounters”, in an effort to continue the ATSs learning and clinician development by integrating these Competencies as proficiencies (ICS) in direct patient care.

Integrated Clinical Skill Completion

Throughout each clinical practice course (ATR 661, ATR 662, ATR 760, ATR 762, ATR 764) and corresponding clinical education experience, the ATS should be consistently incorporating and utilizing the knowledge, skills, and abilities on which they have already been formally evaluated within the ATP, according to the ATS’s level in the program. To complete an ICS, the ATS must complete an ICS Evaluation form and de-identified supporting documentation for each proficiency package related to each Clinical Practice course. The ICS Evaluation form will be made available to the ATS as part of the corresponding course.

The ICS Evaluation form and de-identified supporting documentation is completed by the ATS and Preceptor as evidence of their involvement in a “real” clinical case. The Preceptor is asked to rate the ATS’s overall performance on the proficiency as noted on the continuum from NOVICE to ADVANCED BEGINNER to COMPETENT.



<p>COMPETENT (9)</p>	<p>Competent – The student was able to perform this skill effectively and efficiently, and take into account the patients’ context and values of a complex situation. The student is able to make clinical decisions based on the patient by prioritizing the most important skills.</p> <ul style="list-style-type: none"> • For example, when taking a blood pressure reading on a patient, a competent student is able to accurately and efficiently perform the skill, decide the next steps based on the findings, and make decisions on when to perform the skill-based on the continuum of patient care.
<p>ADVANCED BEGINNER (8)</p>	<p>Advanced Beginner – The student was able to retrieve past experiences they have had and utilize that to apply to this situation. The student was able to implement these clinical skills efficiently and effectively in a broader clinical context.</p> <ul style="list-style-type: none"> • For example, when taking a blood pressure reading on a patient, an advanced beginner is able to accurately perform each required step of taking blood pressure as well as describe and interpret relevant clinical findings.
<p>NOVICE (7)</p>	<p>Novice – The student was able to recognize most of the objective facts and features relevant to the skill but did so without or with limited consideration of the overall situation or the patient.</p> <ul style="list-style-type: none"> • For example, when being asked to take a blood pressure reading on a patient, a novice student is able to accurately perform each required step of taking blood pressure as well as describe relevant clinical findings.

The ICS Evaluation form should be completed and electronically signed by the Preceptor for each proficiency content area. Only scores of 80% and above may be submitted as an ICS. Any score below 80% is considered practice and as such, may be submitted as a Case Log. If the ICS needs to be re-evaluated, the process will be repeated with a new form. Finally, the Preceptor should electronically sign and submit the ICS Evaluation form along with de-identified supporting documentation provided by the ATS. This will document all ICS the ATS has successfully completed with the Preceptor.

*All ICS Evaluation forms will be submitted and maintained electronically on E*Value.*

Clinical Education Requirements for Graduation

To be eligible for graduation from the ATP, each student must meet the following requirements:

- Accumulate a **minimum of 1,020 clinical education hours** under the direct supervision of an Approved Preceptor (a BOC Certified Athletic Trainer or Physician approved by the Program Director and Clinical Education Coordinator).
- Clinical education hours must be obtained over a minimum of 2 calendar years.
- During the five (5) Clinical Practice courses, each student will gain experience with a variety of patient demographics including: patients throughout the lifespan (e.g., pediatric, adult, elderly), sex, socioeconomic status, level of athletic activity (e.g., competitive and recreational, individual and team activities, high and low intensity activities), and non-sport patient populations (e.g., military, industrial, occupational, or leisure activities).
- During the five (5) Clinical Practice courses, each student will gain experience with a variety of health conditions including: patients with emergent, behavioral (mental health), musculoskeletal, neurological, endocrine, dermatological, cardiovascular, respiratory, gastrointestinal, genitourinary, otolaryngological, ophthalmological, dental, and environmental conditions.
- Students must earn a B or higher to progress to the next Clinical Practice level and subsequently graduation

ATS Responsibilities in Clinical Education

- It is the responsibility of the ATS to document all accumulated clinical education hours. Hours must be recorded on a daily basis and signed by the Preceptor at the conclusion of each 2-week time period. ATSS should not miss classes to go to their clinical assignment.
- The Preceptor has the right to deny verification of clinical hours if the student is negligent in obtaining a signature on a biweekly basis. Fraudulent documentation of clinical hours is considered academic dishonesty. ATSS who are found to be falsifying documents will receive an “F” in their Clinical Practice, dismissed from the athletic training program, and turned over to academic affairs.
- The Clinical Education Coordinator will also check hour sheets periodically throughout the semester.
- All documented hours (signed by the student and the Preceptor) are due at the final Clinical Practice meeting at the conclusion of each semester.
- Forms for documentation of hours are located in E*Value.
- The ATS will make him or herself available for afternoon, evening and weekend hours for each Clinical Practice course as assigned by the Preceptor.
- The ATS will make arrangements in their personal schedule and outside employment schedules to meet the assigned hours of their clinical assignment.
- The student will obtain transportation to and from any off-campus sites.

Acceptable Clinical Hours

Acceptable clinical education hours to be counted toward graduation requirements must be directly supervised by a Preceptor at an affiliated clinical site, and may include the following:

- Hours in the Athletic Training Clinic.
- Hours preparing for practices and athletic contests.
- Hours spent with rehabilitation programs of physically active people while under the supervision of an LVC Preceptor.

Time which is **NOT** considered clinical education hours includes, but may not be limited to, the following:

- Hours spent **traveling** with a team, (not performing clinically).
- Hours spent not attached to a clinical experience.
- Hours spent under the supervision of a person who is **not** an LVC Preceptor and/or at a site **not** affiliated with LVC.

Clinical Practice Process

The ATS should attempt to seek “authentic” patient exposures during their clinical education experiences. Under the direct supervision of their Preceptor, each ATS should incorporate their knowledge and skills gained in the classroom into clinical practice. For this learning process to take place we encourage all our Preceptors to institute an “athletic training clinical practice teaching model” permitting ATSs to engage in true “clinical practice” on “real-life” patients encountered during their clinical education.

The ATS should seek the following opportunities to complete each ICS in a prioritized manner:

1. The ATS should demonstrate each proficiency on a “real-life” patient as part of clinical practice under the direct supervision of their Preceptor.
2. If this situation is NOT possible, the ATS should seek out an opportunity to perform the ICS during a patient re-evaluation or follow-up situation.
3. If the previous two opportunities do not present themselves, the ATS should conduct a “mock scenario” utilizing a “paper patient” or “standardized/simulated patient encounter” coordinated by their Preceptor in collaboration with the program faculty.

{Dishonesty and failure to accurately complete this process is ethically and morally wrong and could result in clinical suspension or dismissal from the ATP. In addition, this process is crucial in documenting ATS learning over-time, which is in compliance with the athletic training accreditation standards.}

General ATS Guidelines for Clinical Education

ATSs must be pre-registered and enrolled for the appropriate Clinical Practice in Athletic Training course (ATR 661). The following is a list of requirements each ATS must complete prior to commencing any clinical practice course.

- 1) As already indicated in an earlier section of this handbook; students must upload the following to E*Value:
 - B. Proof of CPR certification as Professional Rescuer (annual, as required)

- C. Proof of Blood-Borne Pathogen training (annual through SafeColleges)
- D. Proof of HIPAA training (through CEC)
- E. Proof of FERPA training (through SafeColleges)
- F. Proof of Personal Vaccinations (immunization record) and TB Screen (Appendix B)
 - a. Physical exam, documented on the Report of Medical History form (found on E*Value)
- G. Proof of Personal Health Insurance Coverage (Appendix C)
- H. Verification of Completed Drug Screen (through Quest Diagnostics) – (Appendix D)
- I. Verification of Criminal Background Check – (Appendix E)
 - a. All students who earned acceptance into the ATP must complete a drug screen and background check as described in this handbook before beginning clinical practice in any clinical education setting. ***Failure to pass a drug screen and background check may result in dismissal from the Athletic Training Program.**
 - b. Negative background checks including the following three mandatory as well as any further requirements as per individual clinic sites:
 - (d) Pennsylvania Child Abuse History Clearance
<https://www.compass.state.pa.us/cwis/public/home>
 - (e) Pennsylvania State Police Criminal Record Check
<https://epatch.state.pa.us/Home.jsp>
 - (f) FBI fingerprint (Department of Human Services)
<https://uenroll.identogo.com/>
- K. Signed Communicable Disease Policy Signature Form (annual) (Appendix F)
- L. Signed privacy agreement (through CEC).

**(All results and information pertaining to the above information will be kept in secured ATS files within the Athletic Training Program Director's office and must be verified before beginning the initial clinical experience.)*

- 2) ATs, in conjunction with their Preceptor, must sign and complete a **Clinical Education Contract** prior to each clinical rotation.
- 3) ATs are required to follow the policies and procedures of LVC and the *Athletic Training Student Handbook*. ATs will abide by the NATA Code of Ethics (Appendix H) and BOC Standards of Professional Practice (Appendix I) as well as the athletic training practice regulations unique to the state in which the clinical facility resides
 - a) To review the PA state practice act visit: –
<http://www.pacode.com/secure/data/049/chapter18/subchaphtoc.html>
- 4) ATs are also required to adhere to professional responsibilities and follow stated policies and procedures specific to each clinical site and rotation. This includes but is not limited to:
 - a) ATs are punctual in reporting daily assignments.
 - b) ATs meet time requirements for clinical assignments.
 - c) ATs dress appropriately as per the dress code policy in the *Athletic Training Student Handbook* for each clinical rotation including:
 - i) Clinical practice course
 - ii) LVC clinical site

- iii) Off-campus clinical sites
 - d) ATS follows directions.
 - e) ATS follows the policies and procedures of the clinical setting.
 - f) ATS displays effective communication with Preceptor.
 - g) ATS demonstrates a positive attitude.
- 5) ATSs must continually work to become competent in their clinical skills. Clinical competency, as well as ATS performance, will be evaluated on a regular basis. ATSs will be provided with copies of all evaluations and will discuss these evaluations with their Preceptor to clarify areas that need improvement. The Preceptors will be evaluated by their ATS(s) at the conclusion of the clinical experience to provide feedback on useful behaviors and not useful behaviors.

Specific guidelines for the completion of required competencies and ICS will be distributed and discussed in each Athletic Training Clinical Practice course. All required competencies and ICS must be completed before progressing to the next level of the clinical education sequence.

The cost of all ATP and clinical facility requirements are the ATSs responsibility.

CPR (Retraining)

ATSs will complete initial certification in a BOC approved CPR/AED course prior to commencement of graduate coursework. All ATSs, LVC ATP faculty and clinical staff will complete re-training as required to remain current. Copies of all ATS certification cards will be uploaded by the ATS to E*Value.

Blood-Borne Pathogen Training (Annual) and Exposure Policy

All staff and ATSs will be made aware of the potential risk for infection associated with providing athletic training services, as well as the measures that can be taken to prevent the risk of blood-borne pathogen transmission. ATSs will complete initial OSHA/blood-borne pathogen training prior to the commencement of graduate coursework as part of the professional phase of the ATP. Annually, all athletic training faculty, staff members and ATSs enrolled in the ATP will complete annual re-training.

LVC's ATP Blood-Borne Pathogen Exposure Policy

Through the normal course of clinical education and clinical practice of athletic training, an Athletic Training Student may come in contact with bodily fluids, which may pose a risk for infection from blood-borne diseases. These diseases may include Hepatitis B, HIV, or other blood-borne pathogens. It is essential that everyone utilizes the following techniques and principles to minimize the risk of pathogen transmission:

- Treat all bodily fluids as infectious.

- Wear vinyl or latex examination gloves whenever touching bio-hazardous material such as open skin, blood, body fluids, or mucous membranes. Do not reuse gloves.
- Wash hands with soap and hot water before and immediately after exposure to blood or body fluids, even if gloves were worn.
- Use protective devices during procedures where bodily fluids are likely to be splashed.
- Use resuscitation masks during CPR and rescue breathing.
- All surfaces (counters, tables, etc.) must be thoroughly washed after being soiled with blood or body fluid. Use 10 percent household bleach solution or a commercially available disinfectant. Use of a fresh 1:10 bleach solution or other OSHA approved cleaners for cleaning all bodily fluid spills is recommended.
- Place all used sharps in a special, puncture-resistant sharps container.
- Place all discarded medical waste in a specially labeled “Bio-hazardous Waste” container located in the Athletic Training Clinic.
- When working outdoors, place all medical waste in a red plastic biohazard bag and then discard it into the proper biohazard waste container upon your return to the Athletic Training Clinic.
- Bio-hazard containers are disposed of by incineration by a licensed outside agency.
- Do not allow athletes/patients to share towels that have been contaminated with blood or bodily fluids.
- Discard towels and clothing that have been contaminated with blood or bodily fluids into a bio-hazardous bag and place it in the laundry basket. The laundering staff will take the proper measures to see that the garments are cleaned properly in order to rid the material from all potential bio-hazardous pathogens.
- Be sure all athletes/patients’ wounds are well covered before practice and competition.
- If you have an open wound, especially on your hand, avoid providing first aid care to injuries that involve bleeding or bodily fluids until the wounds are healed. If you must do so, be sure to wear vinyl or latex examination gloves and cover your wound completely with a dressing.

Event of Exposure

All incidents that involve actual exposure of any ATS shall be reported immediately to the Preceptor. ATs exposed should proceed to the nearest medical facility for evaluation and treatment. In addition, all exposures must be reported to the Clinical Education Coordinator or Program Director within 24 hours. ATs are required to follow each clinical site’s EXPOSURE protocols. All cost, as a result of exposure, will be incurred by the ATS. *(Examples of exposure include needle sticks, splashing of blood into the face, contact with vomit or other bodily fluids on mucous membranes.)*

Control Procedures

Any individual sustaining a puncture injury, cut from sharps, or splatter to eyes, nose, or mouth should:

1. Thoroughly wash the wound area with soap and water. Alcohol-based hand rinses, gels, foams (containing 60+% alcohol) should be used when water is not available.
2. Flush splashes of blood or other potentially infectious material (OPIM) to the nose, mouth, or skin with water.
3. Irrigate eyes with clean water, saline, or sterile solution.
4. ATSS that have a blood or OPIM incident should immediately report to the nearest emergency room. Hospitals in the Annville Area include:

Penn State Hershey Medical Center
500 University Drive
Hershey PA, 17033

Good Samaritan Hospital
4th and Walnut Street
Lebanon PA, 17042

If not in the Annville area, proceed to the nearest emergency room for immediate treatment.

5. In all cases, the ATS and Preceptor must fill out a **Blood-Borne Pathogen Student Exposure Incident Report Form (Appendix J)**, the form must be signed by both ATS and Preceptor. The completed form is given to the Clinical Education Coordinator.
6. The ATS is responsible for all medical costs incurred regarding the exposure incident.

Standard Precautions (OSHA), HIPAA, and FERPA

Demonstration of competence in annual Blood-Borne Pathogens (BBP), as well as FERPA and HIPAA confidentiality standards, is required prior to the start of the first clinical experience. Links to training materials are located in E*Value. BBP and FERPA competence is demonstrated by successful completion (80% score) on the respective assessments. Successful proof of completion must be uploaded into E*Value. Failure to meet 80% competency or complete assessments by the assigned date will result in cancellation of the subsequent clinical experience and may jeopardize the ATS's progression in the Program. Unlimited attempts to meet competency standards are available. HIPAA training is completed with CEC.

Communicable Disease Policy

The purpose of the Lebanon Valley College and the Master of Athletic Training **Communicable Disease Policy and Signature Form (Appendix F)** is to protect the health and safety of all parties. The purpose of this policy is to ensure the welfare of the students enrolled within this department as well as those patients you may come in contact with during your clinical experiences. It is designed to provide Athletic Training Students, Preceptors, and athletic training faculty with a plan to assist in the management of students with infectious diseases as defined by the Centers for Disease Control and Prevention (CDC). This policy was developed using the recommendations established by the CDC for health care workers. (www.cdc.gov)

What are Communicable Diseases?

A communicable disease is a disease that can be transmitted from one person to another. There are four main types of transmission including direct physical contact, air (through a cough,

sneeze, or other particle inhaled), a vehicle (ingested or injected), and a vector (via animals or insects).

Communicable Diseases Cited by the CDC:

Bloodborne Pathogens	Conjunctivitis	Cytomegalovirus infections
Diarrheal diseases	Diphtheria	Enteroviral infections
Hepatitis viruses	Herpes simplex	Human immunodeficiency virus (HIV)
Measles	Meningococcal infections	Mumps
Pediculosis	Pertussis	Rubella
Scabies	Streptococcal infection	Tuberculosis
Varicella	Zoster	

Viral respiratory infections (beyond common cold)

Guidelines for Prevention of Exposure and Infection

1. Students must successfully complete annual Blood-Borne pathogens training prior to initiating formal clinical experiences.
2. Students are required to use proper hand washing techniques and practice good hygiene at all times.
3. Students are required to use Universal Precautions at all times. This applies to all clinical sites.
4. Patient care should not be performed when the athletic training student has active signs or symptoms of a communicable disease.

Guidelines for Managing Potential Infection

1. Any student who has been exposed to a potential infection before, during, or after a clinical experience should report that exposure to his/her supervising Preceptor immediately and to the Clinical Education Coordinator.
2. Any student, who demonstrates signs or symptoms of infection or disease that may place him/her and/or his/her patients at risk, should report that potential infection or disease immediately to his/her supervising Preceptor.
3. The student is responsible for keeping the Clinical Education Coordinator informed of his/her conditions that require extended care and/or missed class/clinical time. The student may be required to provide written documentation from a physician to return to class and/or clinical site.
4. If a student feels ill enough to miss ANY class or clinical experience that student should notify the appropriate instructor or supervising Preceptor immediately. Any absence must be supported with written documentation from a physician.

Clinical Education Contract

At the beginning of each clinical rotation (semester), as part of the Athletic Training Clinical Practice courses, the ATS is required to complete and sign a Clinical Education Contract. This contract explains clinical rotation dates, supervision and hour policies, core learning objectives, and other clinical rotation requirements. The Preceptor and ATS will review the policies and procedures at the clinical education rotation (i.e., EAP, blood-borne pathogen exposure plan, communicable and infectious disease policies, documentation, patient privacy and confidentiality, and how to differentiate practitioners from students) PRIOR to contact with patients. In addition, the ATS is required to establish clinical education goals and learning objectives with their Preceptor at the beginning of the clinical rotation. These goals should include reviewing previous education competencies and clinical proficiencies but should also focus on current clinical practice course objectives and current clinical proficiencies. Each goal should be written as a SMART goal to measure the outcomes.

Clinical Practice Coursework

During the professional phase of the ATP, ATSs are required to take all Clinical Practice in Athletic Training courses (ATR 661, 662, 760, 762, 764). As part of each course requirement, ATSs are required to complete several items to earn a grade in the course. In every **Clinical Practice in Athletic Training course**, a minimum grade of a B ($\geq 83\%$ without rounding) must be achieved as part of the professional phase to remain in good standing.

General Course Requirements:

- 1) Integrated Clinical Skills (ICS)
 - a) Direct patient care (clinical rotation or Injury Clinic)
 - b) Simulated or standardized patient encounters
 - c) Paper patient
- 2) Clinical Experience/Rotation (under the direct supervision of a Preceptor)
 - a) Meet the minimum hour requirement
 - b) Semester dates (Clinical Experience Contract)
- 3) Clinical Journals and Case Study
- 4) Clinical Evaluations
 - a) Clinical Experience Contract
 - b) Mid-semester ATS Performance Evaluation (completed by Preceptor)
 - c) End-of-semester ATS Performance Evaluation (completed by Preceptor)
 - d) ATS Performance Self-Evaluation
 - e) Preceptor and Clinical Site Evaluation
- 5) Professional Development (e.g. conference/workshop attendance, presentations, surgical viewing, physicals, etc.).

Clinical Supervision Policy

Direct supervision of ATSs on campus and off-campus by Preceptors are strictly enforced. ATSs are assigned to Preceptors for their clinical rotations on and off-campus. Each Preceptor is responsible for each assigned ATS. The Preceptor must be physically present and able to intervene on behalf of the ATS and the patient during his or her clinical education experience. ATSs, Preceptors, coaches, and the athletic director are instructed that it is unlawful for an ATS to practice the duties of an athletic trainer unless properly supervised.

ATSs must master clinical competencies and progress properly through the ATP in order to perform athletic training clinical skills under the supervision of a Preceptor. ATSs may not utilize clinical skills or techniques until they have been proven competent to perform the tasks. ATSs are formally instructed in the educational competencies, followed by evaluation of their level of competence on individual clinical skills/tasks. Successful evaluation of a clinical skill/task (competency) is completed prior to performing the skill on a patient in the clinical setting. Preceptors are provided “clinical skills list” for each Clinical Practice level, that describe the clinical skills on which an ATS at that level has been formally instructed and evaluated. ATSs must refrain from performing any clinical skill on any patient in a clinical experience if they have not been instructed AND evaluated in the classroom.

The supervising Preceptor must be on-site at all times to ensure constant ATS to instructor interaction. As stated in the CAATE Standards, the “Preceptor must be physically present and have the ability to intervene on behalf of the ATS to provide on-going and consistent education.” Preceptors should be consistently engaged with the ATS(s) to promote a high impact learning environment and positive clinical experience. At no time during the clinical education experience shall ATSs be used as replacements for regular clinical staff. Under no circumstance should an ATS travel with a team without proper supervision.

Clinical Hour Policy

The ATS is responsible for completing the set minimum number of hours over the duration of the academic semester (a total of 1,020 hours over five semesters). This requirement can include additional clinical time prior to the start of each semester. Upon initiation of each clinical rotation, the ATS and Preceptor should formulate a schedule that will provide the ATS with a variety of clinical experiences (pre-practice treatments, injury evaluations, rehabilitations, practices, games/competition, post-practice treatments, etc.). The Program Director and Clinical Education Coordinator, in conjunction with the Preceptors, will continue to carefully monitor these educational experiences to confirm compliance with this standard. *Please note completion of the minimum hour requirement does not constitute completion of the clinical rotation. Each rotation is for a semester time frame and ATSs are expected to complete the clinical rotation as describe on the Clinical Experience Contract. Changes in the contract require approval from the Clinical Education Coordinator.*

The following weekly clinical hour policy should be followed by every ATS and during all clinical rotations. Any time during a clinical rotation (including outside of the academic semester) the ATS should NOT exceed an average **25 hours** for an **integrative** experience and

of **40 hours** for an **immersive** experience per week. If the ATS decides to engage in the clinical rotation beyond the weekly maximum, he/she can do so on a volunteer basis but the hours still must be logged and will be calculated into the semester total.

1. In a week-long period in which the ATS may incur more than the weekly allowable maximum hours, the ATS schedule the following week should be adjusted accordingly.
2. ATS must be provided one day off in a 7-day period.
3. ATS is not required to attend his/her clinical experience during breaks in the semester (e.g., Fall Break, Spring Break, Good Friday).

Clinical Site Development

Site development is an ongoing process. ATs may suggest sites for consideration; however, the final determination of a facility's acceptance as a clinical education site is made by the CEC. Potential clinical facilities are chosen based on the setting(s) available for clinical experiences; a variety of learning opportunities; stability, experience, and expertise of the clinical staff; interest in and administrative support of clinical education; and the compatibility of practice philosophy with that of the ATP. ATs are **NOT** to initiate or converse with clinical sites (new or established) regarding potential clinical education agreements or site availability. All communication is done through the CEC.

Selection and Assignment of Clinical Education Experiences

ATs are assigned to clinical experiences based on several factors. All ATs will engage in meaningful clinical experiences in a variety of settings including: patients throughout the lifespan; different sexes; differing socioeconomic statuses; varying levels of activity/athletics (i.e. competitive and recreational, individual and team, high and low intensity activities); and non-sport patient populations (i.e. military, industrial, occupational, leisure activities) (**2020 CAATE Standard 17**). Each clinical experience provides a logical progression of increasingly complex and autonomous clinical experiences through the span of the curriculum. Current LVC ATs athletes will be restricted from completing clinical rotations at LVC due to the possibility of conflict of interest. In addition, ATs are prohibited from completing a clinical experience at their former home school district or with Preceptors who are friends or family.

*Be aware that at no time is a clinical experience at a particular facility/location guaranteed. Clinical facilities or Preceptors may cancel a scheduled and/or confirmed clinical experience due to unforeseen changes in staffing or program availability. ATs affected by these cancellations are reassigned to an available similar clinical education experience and Preceptor whenever possible. ATs may also be reassigned to a Preceptor at a time other than the regularly scheduled clinical experience if no other options are available. In the event of a late clinical experience cancellation, the Program will make every attempt to keep ATs in their proper academic and clinical progression sequence; however, this may not always be possible and cannot be guaranteed.

ATSs are responsible for **all expenses** associated with clinical education experiences, including those associated with late cancellations of scheduled clinical experiences. Expenses include costs for drug testing and criminal background clearances, travel, and room and board; additional tuition costs apply to clinical assignments outside the usual academic calendar (i.e., summer and remediation experiences). The Office of Financial Aid should be contacted for questions regarding tuition assistance. While every attempt will be made to accommodate individual ATS's needs, decisions must be made equitably; therefore, financial hardships are not considered in clinical placements/considerations. ATSs are also encouraged to speak with the CEC regarding personal circumstances that they feel may impact clinical education opportunities, selections of clinical experiences, or clinical education placements well in advance of any clinical experience.

Conflict of Interest Policy

Because of the potential for biased ATS evaluations, ATSs will not be placed in any clinical facility where a potential conflict of interest may exist. The following situations are examples of potential conflict of interests:

1. Current LVC athletes whose clinical education site is within LVC athletics.
2. ATS receiving financial payment from the facility.
3. ATS involved in any type of contractual agreement with the facility or parent company (usually for future employment).
4. ATS attended the school district of the clinical site. ATS is currently employed or has been employed by the facility or any other affiliated local or regional facility of the parent company. This may also include extensive volunteer experience within a facility and will be determined on an individual basis.
5. A member of the ATS's immediate or extended family:
 - has some level of authority over the practice of athletic training at a site or is an administrative official of the site (e.g., father, mother, sister, brother, or spouse, is chief executive, financial officer, or primary referral source for practice).
 - is employed by the facility or parent company (this is evaluated on a case-by-case basis once disclosed).
6. A member of the ATS's immediate family, close friend, or former colleague is the Preceptor for an educational experience.
7. ATS or family member has received extensive care from the clinical site which may foster a relationship where a biased evaluation of the ATS's performance may exist.

Other potentially questionable relationships are explored on an individual basis to determine if a conflict of interest exists. ATSs are asked to disclose this information prior to assigning clinical experience sites. Concealing this information will result in the ATS receiving a failing grade for the clinical experience.

****Also see "Conduct & Relationships Policy" section of this handbook**

Clinical Education Attendance Policy

See Attendance Policy

Absence from the clinical setting and responsibilities is discouraged. If a situation arises where an ATS cannot attend an activity involved with the clinical education experience to which they are assigned, they should contact the Preceptor and make them aware of the situation immediately. ATSs are expected to be available for all aspects of their clinical education assignment. Weather-related delays or cancellations enacted by the College may not apply to ATSs clinical experiences. Communication with the Preceptor should guide travel decisions.

All absences must be reported to the CEC, preferably via email.

The Preceptor must report any unexcused absence to the CEC immediately, including repeated late arrival. Unexcused absences and late arrival are demonstrations of unprofessional behavior and may result in removal from the clinical facility and failure of the clinical experience. Multiple unexcused absences and episodes of late arrival will result in immediate removal from the clinical facility, failure of the clinical experience, and possible dismissal from the program. Students may only be excused from their assigned clinical education assignment under certain circumstances. Proper approval must be obtained by submitting the ***Request for Excused Absence Form (Appendix G)***. The ***Request for Excused Absence Form (Appendix G)*** must be submitted prior to the date of absence for foreseen circumstances.

Athletic Participation

The time commitment involved in the professional phase of the ATP requires careful consideration of participation in intercollegiate athletics while completing all of the educational and clinical requirements of the program. While playing one sport is possible, participation in more than one sport is not advised. In addition, participation in athletics during year two of the professional phase is not possible due to the clinical education requirements. Student-athletes are required to complete all of the program requirements as stated in this handbook without exception. In some instances, this may require additional semesters or completion of required clinical hours during the non-traditional academic calendar. Student-athletes should be aware that failure to complete the required minimum hours of clinical experience within each Clinical Practice course will result in the grade of "I" (incomplete) until the minimum hours are obtained. Failure to demonstrate progress towards completion of the clinical requirements may result in failure to proceed to the next Athletic Training Clinical Practice level which will further delay successful completion of the ATP requirements.

Outside Employment

Outside employment combined with the academic and clinical education responsibilities of the ATP will be very difficult. The ATP requires many hours in the classroom as well as the clinical setting. ATSs may find outside employment, but it must not interfere with his/her assigned

clinical responsibilities. While the faculty and staff of the ATP understand the need for ATSs to have part-time employment to assist in financing their education, the ATS will not be released from clinical education experiences and must meet all requirements of the program as a primary commitment.

In addition, the ATS should NOT seek paid employment in any fashion that represents the duties of an Athletic Trainer or any related terminology as defined by the Role Delineation Study published by the BOC, Inc. This includes the role of an ATS, ATS athletic trainer, athletic training aide, or any variation of these terms. In addition, ATSs are not allowed to receive payment for their clinical education hours. This is an ethical conflict with “true” educational practice and employment for athletic trainers.

Transportation to Clinical Sites

ATSs are responsible for their own transportation to and from their clinical education assignments. This includes maintaining a current driver’s license and insurance that is in compliance with State Law. On-campus sites are within walking distance, however, off-campus sites will require the ATS to arrange his/her own transportation. ATSs are responsible for all cost associated with travel to and from their clinical site.

Substance Abuse Policy

The use of illicit and/or illegal substances is grounds for immediate dismissal from the Athletic Training Program. All ATSs are expected to comply with the substance use/abuse policies as outlined in the Lebanon Valley College *Athletic Training Student Handbook*. ATSs taking any substance; illegal, legal, or medically prescribed, that has the potential to impair judgment, alertness, mental status, physical capacities, or otherwise reduce professional performance, should report this use to the Athletic Training Program Director and the ATS’s Preceptor immediately. This will assist the staff in ensuring a safe environment for the athletes and patients receiving services at all of the clinical education sites.

Travel and Living Expenses

As stated previously, responsibility for the cost of, and arrangement for, transportation to/from and during clinical experiences, as well as, organizing living arrangements is the individual ATSs responsibility. Some clinical sites offer free or nominal cost for housing to LVC affiliated ATSs.

Housing arrangements may take considerable time to finalize. Please allow ample planning time to secure the necessary arrangements. Clinical experiences will not be rescheduled or changed to a different site if an ATS has failed to secure appropriate housing or transportation.

Program Dismissal

ATs may be dismissed from the ATP for academic, clinical, or professional reasons.

Breaches of ethical and professional conduct as outlined by the NATA's Code of Ethics and Standards of Ethical Conduct will not be tolerated. ATs guilty of such breaches will be subject to probation or dismissal from the Program.

Medical Leave of Absence (LOA)

If an AT requires more time off (>1 clinical day but ≤5 clinical days) due to illness and is unable to make up the missed days by either weekend hours or extending the affiliation prior to the start of the next didactic semester, make-up days may be scheduled between semesters or after the final clinical experience. Make-up clinical experiences are scheduled at the convenience of the clinical site, not the AT; therefore, ATs must be available to accommodate the make-up experience as scheduled. If make-up days extend beyond graduation, ATs may participate in graduation activities, after which they would return to the clinical setting to complete the experience. Verification of degree completion will be delayed.

If an AT is unable to complete a scheduled clinical experience due to the prolonged medically-related absence (>5 days), the following outlines the options available:

Clinical Experience	% Clinical Experience Completed	Outcome
ATR 661 and ATR 662	< 50%	Mid-term assessment is incomplete. LOA for one year; matriculate with the next cohort.
	≥ 50%	With satisfactory mid-term assessment, decided on a case-by-case basis.
ATR 760	<u>Incomplete</u>	LOA for one (1) year, matriculate with next cohort
ATR 762	< 50%	LOA for one (1) year, matriculate with next cohort
	≥ 50%	Four (4) weeks of the experience satisfactorily completed; may progress to final didactic semester. Make-up experiences are negotiated/scheduled on an individual basis.
ATR 764	N/A	All weeks and clinical experience requirements must be completed before documentation of degree fulfillment is available, a diploma is awarded, and AT is eligible for the licensure exam. Clinical experience will pause for Medical LOA and resume

		when ATS is ready to return (not to exceed 12 months).
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Circumstances of Medical LOAs will be evaluated individually; department faculty reserve the right to modify the above guidelines.

PROGRAM EVALUATION

The Athletic Training Program undergoes on-going and constant evaluation to analyze compliance with accreditation standards. In addition, this evaluation process allows program administration to identify strengths and weaknesses in an effort to gauge the current status and make necessary changes to continue offering an outstanding athletic training education.

Clinical Experience Documentation

1. Clinical Hour Form
 - a. Students will be required to record their clinical hours every two weeks. Students should record hours each day to the nearest 15 minutes as a decimal point. (15 hours and 30 minutes = 15.5 minutes)
 - b. Hours form will be recorded from Monday through Sunday for two weeks and are due the Wednesday following the two-week cycle.
2. Direct Patient Contact (DPC) Form
 - a. The student will be required to document direct patient contact exposures. This includes direct patient care within the scope of practice (i.e. hands-on experiences).
 - b. Students are required to document five DPC every two weeks.
 - c. Students are also required to record the total number of DPC during that same two-week period.
3. Integrative Clinical Skills (ICS) Evaluation Form
 - a. ICSs are evaluated as part of each Clinical Practice course in the semester following the classroom instruction and assessment of specific Education Competencies.
 - b. ICSs will be completed on real patients in the clinical setting and in simulated scenarios in the Clinical Practice classroom setting.

Athletic Training Student Self-Evaluation

At two points in the semester, Athletic Training Students will complete a self-evaluation form identical to the form the Preceptor will use to evaluate the student. These evaluations will be reviewed at the same time the Preceptor reviews their evaluation of the student with the student. Both forms will be signed by the ATS and Preceptor following the review/meeting and will be turned in to the Program Director to be added to the student's file.

Student Performance Evaluation (Mid/End Rotation)

The Preceptor will complete two student performance evaluations of the Athletic Training Student over the course of the semester, one mid-term and final evaluation. It is important that the student receives feedback on areas they need to work to improve on over the course of the experience. The final evaluation of the student will be completed at the end of the semester and should note areas the student improved since the earlier evaluations. The Preceptor will review each of the evaluations with the student in a timely manner so as the student will have an opportunity to make improvements before the final evaluation. The evaluations will be one component of the clinical practice grade in which the student is currently enrolled. The Preceptor

and the athletic training student will sign all of the evaluation forms once they have been reviewed and turn them in to the Program Director. All evaluations completed on the student will remain in their file.

Preceptor and Clinical Setting Evaluation

At the completion of each clinical education experience, students will evaluate the Preceptor and the clinical site to which they were assigned. These will be turned in to the Program Director who will keep the evaluations in a private file. At the end of each academic year, Preceptors will be provided a summary of the student and ATP evaluations to assist them in making improvements to the overall clinical education experience. Results of all evaluations will be recorded in spreadsheets to provide feedback to the ATP as to the quality of the Preceptor and the clinical sites being utilized by the ATP, and to help determine areas needing improvement.

Course and Instructor Evaluation

Each course and the instructor will be evaluated every semester through LVC's electronic course evaluation. In addition, core ATP faculty will be evaluated through direct observation by the Program Director and/or College Dean on an annual basis.

Senior Survey/Exit Interview

During their final semester in the ATP, senior ATS evaluate the program on the areas of coursework, clinical education, administration, professional opportunities, and overall strengths and weaknesses.

Alumni Survey

Alumni Surveys will be sent 6-12 months after ATS graduate. This survey asks graduates of the ATP to assess their undergraduate experience.



Lebanon Valley College

ATHLETIC TRAINING PROGRAM

STATEMENT OF UNDERSTANDING (to be signed)

By signing below, I acknowledge that I have read, understand, and will abide by all of the policies and procedures contained within the Lebanon Valley College *Athletic Training Student Handbook*. I understand that any misconduct or noncompliance with the information contained within this handbook may be grounds for disciplinary action and/or dismissal from the Lebanon Valley College Athletic Training Program, based on the discretion of the ATP Committee.

In addition, my signature below indicates that I, as an Athletic Training Student at Lebanon Valley College, in compliance with HIPAA, FERPA, and the NATA Code of Ethics, recognize that I have an obligation to myself, the patients I treat, the clinical instructional staff, and Lebanon Valley College as a whole to maintain patient confidentiality. This includes withholding any information from anyone, other than my immediate supervisors or other appropriate medical health professionals, that I acquire professionally or socially which is considered professionally confidential. The unique opportunity that I have been offered to observe and participate as a student in a professional healthcare environment will be jeopardized if I violate this confidentiality. I also understand that I represent Lebanon Valley College at all times, and, as a result, I will conduct myself in a professional manner. I understand that if I fail to abide by this professional conduct statement and statutes included in the NATA Code of Ethics, I am aware of the consequences that I will incur and accept that penalty.

ATS Printed Name

ATS Signature

Date

ATP - Program Director Signature

Date

***This page will be retained in the Athletic Training Student File within the office of the Athletic Training Program Director.*

APPENDICES

**Appendix A:
Technical Standards Policy Signature Form**

The Athletic Training Program at Lebanon Valley College is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The technical standards set forth by the Athletic Training Program, as outlined and described in the Athletic Training Student Handbook, establish the essential qualities considered necessary for students admitted into this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program's accrediting agency (Commission on Accreditation of Athletic Training Education [CAATE]).

I, _____, certify that I have read and understand the Technical Standards Policy. I believe, to the best of my knowledge, that I meet each of these standards with or without reasonable accommodation:

1. _____ without accommodation or

2. _____ with accommodation. If accommodations are required, please indicate:

I understand that if I am unable to meet these technical standards I will not be admitted into the Athletic Training Program.

Signature of Applicant _____ Date _____

Appendix B: Vaccinations and TB Screen

Participation in clinical experiences requires complete documentation of immunizations. Lack of documented proof of immunization inhibits completion of clinical experience requirements for degree completion. The following immunizations are expected/required:

1. Annual influenza vaccination.
2. Childhood vaccinations such as MMR (measles, mumps, rubella), Varicella (chicken pox), OPV (polio), DTP (diphtheria, tetanus, pertussis), TDAP.
3. Hepatitis B vaccinations.
4. Negative **TB**. Positive test results may require repeat or additional testing to confirm results and confirmed cases require treatment, both at the ATS's expense. The ATP facilitates testing and documentation through the Shroyer Health Center at a low cost. If ATSS complete all TB testing through their private physician, they are responsible for providing complete documentation to satisfy clinical facility requirements. ATSS who are unable to complete PPD testing must provide negative chest x-ray results showing no active TB disease.

Note: All results must be read and documented by a nurse, PA, or physician – not a medical assistant. Acceptable results include the date of administration, date of reading, and size of skin reaction in millimeters.

A physical exam, documented on the Report of Medical History form (available through E*Value), is required within 6 months **prior** to the start of the first clinical experience. Athletic and work/pre-employment physicals are not acceptable forms of health assessment for clinical education. The Report of Medical History form is available through E*Value. The complete form with immunization records must be uploaded to E*Value by each ATS.

All clinical sites have access to the ATS's health history and immunization records prior to the ATS's arrival. Scheduled clinical experiences are canceled by the clinical site if health requirements are incomplete. ATSS who are assigned to clinical sites with additional health requirements are responsible for scheduling and the cost of all such testing, prior to the start of the clinical experience.

Appendix C:
Personal Health Insurance Coverage

ATs must maintain personal health insurance coverage throughout the professional phase of the Program. Proof of coverage (front and back copy of insurance card or complete information on page 4 of the Report of Medical History form) must be uploaded to E*Value annually with all other clinical education paperwork. Failure to do so will result in the delay of the clinical education experience. The costs associated with the personal health insurance policy are the sole responsibility of the student.

Appendix D: Drug Screen Policy

Student Drug Screen Policy and Procedure

Lebanon Valley College and the Athletic Training Program are committed to protecting the safety and health of its students, as well as people who they may come in contact with during clinical learning experiences. Use of substances that interfere with the judgment and/or motor coordination of students of the Athletic Training Program pose an unacceptable risk for their clients/patients, Lebanon Valley College, the faculty, and healthcare agencies.

The College prohibits the illicit use, possession, sale, distribution, or knowingly being in the presence of any narcotic, marijuana, stimulants, hallucinogens, or other similar drugs and/or chemicals on or off campus.

Lebanon Valley College states its policy in the Student Code of Conduct in the *Student Handbook* regarding the use and misuse of alcohol and illegal drugs. The policy serves as the basis for individual and group decision-making and as a standard of behavior. The procedures and consequences for handling violations are also discussed in the *Athletic Training Student Handbook*. Every student at the College, “by virtue of enrollment, has agreed to abide by and uphold the policies of this institution.”

Athletic Training Program Policy

Due to the requirements of the affiliating clinical facilities, each athletic training student is required to undertake a urine drug screen for evidence of drug abuse. All students must be free of alcohol and unlawful drug use in order to enroll and/or continue in the Athletic Training Program. Athletic Training Students will not be allowed to participate in clinical learning experiences until negative drug screen results have been received. Students who refuse to submit to the urine drug screen will not be permitted to begin and/or continue in the Athletic Training Program.

All drug screens whether federal, non-federal, or in-house are performed by the 49 CFR Part 40 guidelines as required by the Department of Transportation.

Procedure for Obtaining Urine Drug Screen

General information: The urine drug screen will be administered on campus by ARC Point Labs located in Lebanon, PA. The urine drug screen will consist of a standard four-panel test used to detect common street drugs such as:

- Cocaine
- Opiates/morphine
- Amphetamines
- PCP

The testing device is an FDA approved one-step drug test, which is 99% accurate. Cut-off levels are set to the SAMHSA-Substance Abuse and Mental Health Service Administration standards.

Drug Screening Procedures

Every student will be required to provide photo identification when they report for the test. The cost of the test is \$25.00, which will be collected by the Athletic Training Program Director at the time of the test. Make Checks payable to LVC; cash will not be accepted. Insurance policies will not pay for the drug screen.

A staff member of ARC Point will obtain a urine sample in a professional, respectful and discreet manner. Urine samples will be tested at the ARC Point Labs, and results sent directly to the ATP director.

Results

A drug screen will be presumed non-negative if any evidence of drugs is found and when further review by ARC Point could not verify or confirm acceptable justification with proper documentation.

ARC Point will provide written results of drug screens for Athletic Training Students directly to the Program Director of the Athletic Training Program. Non-negative results will be made available to the Dean of Students at the College who will determine any disciplinary action. Results will not be given to parents, guardians, or spouses. All results will be kept confidential and placed in the student's file in the Athletic Training Program office in a secured cabinet.

Non-Negative Urine Drug Screen

The student will be interviewed by the Program Director of the Athletic Training Program or a faculty member designated by the Program Director.

The student may be requested to submit to the collection of a second urine sample for drug screen at the student's expense.

After all testing has been completed, a non-negative drug screen with evidence of drug abuse will require the student to be withdrawn from the Athletic Training Program and will prohibit the student from enrolling and/or continuing in the program.

Disciplinary action may be taken by the College in accordance with the Lebanon Valley College Student Handbook.

Readmission to the Athletic Training Program Following a Non-Negative Urine Drug Screen

Students not allowed to enroll and/or continue in the Athletic Training Program due to a non-negative drug screen are not eligible for readmission to the program.

Random Drug Screens

A random drug screen may be requested by the Athletic Training Program and/or a clinical facility at any time during the student's enrollment in the program. The cost of the random drug screen will be incurred by the student.

Appendix E: Criminal Background Check Policy

Criminal background checks (CBC) and drug screens are intended to protect the public. All professional phase ATSs will complete a baseline national and PA state CBC prior to the first clinical education placement. International ATSs may be required to complete additional background checks beyond what was required for their visa application. ATSs may be required to complete additional background checks/fingerprinting/drug screens at the request of assigned clinical sites and are responsible for the cost of such unless conducted by the clinical site. All CBC requirements must be obtained and uploaded to E*Value by each ATS.

- Positive background or drug screen results will be evaluated on an individual basis; the clinical site makes the final decision as to the acceptability of the ATS for the scheduled clinical experience. If the experience is canceled, the ATP does not guarantee re-placement in a timely manner to allow the ATS to remain in the cohort sequence of courses/clinical experiences. If re-placement is successful and the ATS is required to complete additional background checks and/or drug screens, the ATS is responsible for all costs associated with additional/repeat reports.

The instructions to complete the required FBI and PA checks and clearances can be found on the Athletic Training Canvas page. Contact the CEC if you have any questions.

**Appendix F:
Communicable Disease Policy Signature Form**

The purpose of the Lebanon Valley College and the Masters of Athletic Training Communicable Disease Policy is to protect the health and safety of all parties. The purpose of this policy is to ensure the welfare of the students enrolled within this department as well as those patients you may come in contact with during your clinical experiences. It is designed to provide Athletic Training Students, Preceptors, and athletic training faculty with a plan to assist in the management of students with infectious diseases as defined by the Centers for Disease Control and Prevention (CDC). This policy was developed using the recommendations established by the CDC for health care workers. (www.cdc.gov)

Signature of Understanding

I (print name), _____, do hereby certify that I have read and reviewed the Communicable Disease Policies and Procedures of the Athletic Training Program at Lebanon Valley College. My signature below indicates that I understand my role and responsibilities as an Athletic Training Student, and I will make my best effort to uphold these standards.

Student Signature: _____

Date: _____

Appendix G: Request for Excused Absence Form

Student Name: _____ **Date:** _____

In order for to abide by the ATP Attendance Policy, I am requesting to be excused from (select all that apply):

_____ Class(es) _____ on _____
Class prefix & number Date(s)

_____ Clinical* on _____
Date(s)

To be considered for an excused absence from class or clinical, the instructor and/or Preceptor and Clinical Education Coordinator must approve the absence prior to the Program Director.

The following is (are) the reasons(s) as to why I am requesting to be excused.

- _____ Clinical Responsibilities
- _____ Personal Day Class/Laboratory
- _____ Academic Responsibilities
- _____ Family and/or personal emergency
- _____ Illness and/or hospitalization
- _____ Athletic Training Related Conferences
- _____ Personal Day Clinical Education

Circumstance	Category	Required Documentation
Clinical responsibilities	Foreseen	<i>Request for Excused Absence Form</i> , team schedule, travel confirmation, and Preceptor communications
Athletic Training related Professional Conferences	Foreseen	<i>Request for Excused Absence Form</i> , conference agenda and registration confirmation
Personal Day Class/Laboratory Session (one per semester)	Foreseen	<i>Request for Excused Absence Form</i> . *Approval must be obtained two weeks prior to requested personal day.
Personal Day Clinical Education Assignment (two per semester)	Foreseen	<i>Request for Excused Absence Form</i> . *Approval must be obtained two weeks prior to requested personal day.
Academic responsibilities	Foreseen	<i>Request for Excused Absence Form</i>
Family and/or personal emergency	Unforeseen	Immediate communication with Program Director and Clinical Education Coordinator. Required documentation will be determined on a case-by-case basis
Illness and/or hospitalization	Unforeseen	Immediate communication with Program Director and Clinical Education Coordinator. Required documentation will be determined on a case-by-case basis

**Continue to next page*

SIGNATURES:

Instructor of Course (if applicable): _____
Signature

Approved (Excused)
 Not Approved (Unexcused)

Preceptor (if applicable): _____
Print Name Signature

Approved with no ATS replacement necessary
 Approved only with ATS replacement

• _____
Name of ATS Replacement Signature of ATS Replacement

Not Approved

Clinical Education Coordinator: _____
Signature

Approved (Excused)
 Not Approved (Unexcused)

Program Director: _____
Signature

Approved (Excused)
 Not Approved (Unexcused)

Required Documentation attached:

Yes
 No

Appendix H: National Athletic Trainers' Association Code of Ethics

Preamble

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

1. MEMBERS SHALL PRACTICE WITH COMPASSION, RESPECTING THE RIGHTS, WELFARE, AND DIGNITY OF OTHERS

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

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

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

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

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

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

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

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

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

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

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

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

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

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

*Source: <https://www.nata.org/membership/about-membership/member-resources/code-of-ethics>

Appendix I: BOC Standards of Professional Practice

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Introduction

The BOC Standards of Professional Practice is reviewed by the Board of Certification, Inc. (BOC) Standards Committee and recommendations are provided to the BOC Board of Directors. The BOC Standards Committee is comprised of 5 Athletic Trainer members and 1 Public member. The BOC Board of Directors approves the final document. The BOC Board of Directors includes 6 Athletic Trainer Directors, 1 Physician Director, 1 Public Director and 1 Corporate/ Educational Director.

The BOC certifies Athletic Trainers (ATs) and identifies, for the public, quality healthcare professionals through a system of certification, adjudication, standards of practice and continuing competency programs. ATs are healthcare professionals who collaborate with physicians to optimize activity and participation of patients and clients. Athletic training encompasses the prevention, diagnosis and intervention of emergency, acute and chronic medical conditions involving impairment, functional limitations and disabilities.

The BOC is the only accredited certification program for Athletic Trainers in the United States. Every 5 years, the BOC must undergo review and re-accreditation by the National Commission for Certifying Agencies (NCCA). The NCCA is the accreditation body of the Institute of Credentialing Excellence.

**The *BOC Standards of Professional Practice* consists of two sections:
I. Practice Standards & II. Code of Professional Responsibility**

I. Practice Standards

Preamble

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

II. Code of Professional Responsibility

Preamble

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

Code 1: Patient Care Responsibilities

The Athletic Trainer or applicant:

- 1.1 Renders quality patient care regardless of the patient's age, gender, race, religion, disability, sexual orientation, or any other characteristic protected by law
- 1.2 Protects the patient from undue harm and acts always in the patient's best interests and is an advocate for the patient's welfare, including taking appropriate action to protect patients from healthcare 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

Code 2: Patient Care Responsibilities

The Athletic Trainer or applicant:

- 2.1 Engages in lifelong, professional and continuing educational activities to promote continued competence
- 2.2 Complies with the most current BOC recertification policies and requirements

Code 3: Professional Responsibility

The Athletic Trainer or applicant:

- 1.1 Practices in accordance with the most current BOC Practice Standards
- 1.2 Practices in accordance with applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training
- 1.3 Practices in collaboration and cooperation with others involved in a patient's care when warranted; respecting the expertise and medico-legal responsibility of all parties
- 1.4 Provides athletic training services only when there is a reasonable expectation that an individual will benefit from such services
- 1.5 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
 - 1.5.1 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
- 1.6 Does not guarantee the results of any athletic training service
- 1.7 Complies with all BOC exam eligibility requirements
- 1.8 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
- 1.9 Does not possess, use, copy, access, distribute or discuss certification exams, self-assessment and practice exams, score reports, answer sheets, certificates, certificate or applicant files, documents or other materials without proper authorization
- 1.10 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

- 1.11 Reports any suspected or known violation of applicable local, state and/or federal rules, requirements, regulations and/or laws by him/herself and/or by another Athletic Trainer that is related to the practice of athletic training
- 1.12 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 him/herself or by another Athletic Trainer that is related to athletic training
- 1.13 Cooperates with BOC investigations into alleged illegal or unethical activities. Cooperation includes, but is not limited to, providing candid, honest and timely responses to requests for information
- 1.14 Complies with all confidentiality and disclosure requirements of the BOC and existing law
- 1.15 Does not endorse or advertise products or services with the use of, or by reference to, the BOC name without proper authorization
- 1.16 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.

Code 4: Research

The Athletic Trainer or applicant who engages in research:

- 4.1 Conducts research according to accepted ethical research and reporting standards established by public law, institutional procedures and/or the health professions
- 4.2 Protects the 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 healthcare delivery

Code 5: Social Responsibility

The Athletic Trainer 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 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 AT; 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

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*Source: http://www.bocatc.org/system/document_versions/versions/113/original/boc-standards-of-professional-practice-2018-20180205.pdf?1517845876

Appendix J:
Blood-Borne Pathogen Student Exposure Incident Report Form

**This form should be filled out as soon as possible after a student exposure incident.

Student Name: _____ DOB: _____

LVC Student ID: _____ Student Phone Number: _____

Preceptor: _____ Preceptor Phone Number: _____

1. Date of Exposure: _____

2. Time of Exposure: _____

3. Clinical Site\Location of Exposure: _____

4. Describe clearly and in detail how the incident occurred:

5. Were there any witnesses to incident, if so, list name(s): _____

6. Location of where the medical attention was given (Student Health Center, Emergency Room): _____

Athletic Training Student Signature:

Date

Preceptor Signature

Date

Clinical Education Coordinator Signature

Date