

**UNIVERSITY** OF **INDIANAPOLIS**

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**COLLEGE OF HEALTH SCIENCES**

**MASTER OF SCIENCE IN  
ATHLETIC TRAINING PROGRAM  
(MSAT)**

**STUDENT HANDBOOK  
2022-2023**

**Note:** This Handbook applies to Graduate Students pursuing the MSAT.

**Disclaimer:** The MSAT Program reserves the right to revise information, policies and procedures within the Student Handbook as needed at any time. Changes will become effective at a time determined by the MSAT faculty and will apply to all students enrolled in the MSAT program. Students will be notified of the revisions; electronic versions of the Student Handbook will be updated with revised information or policies as needed.

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## WELCOME

Welcome to the University of Indianapolis Master of Science in Athletic Training Program (MSAT). As an athletic training student (ATS), you will be involved in a program/degree that will prepare you to take the Board of Certification Examination and to become an Athletic Trainer. We, the faculty, are pleased to welcome you to the program.

The MSAT is accredited by the Commission on Accreditation of Athletic Training Education (CAATE) and is part of the College of Health Sciences. The MSAT combines rigorous didactic coursework, with five (5) semesters of clinical experience.

This Handbook is intended to be a guide to inform and assist the Athletic Training Student (ATS) in the MSAT. Included are MSAT guidelines necessary for successful completion of the MSAT and degree. Students are expected to read and study this material so they understand their responsibilities and can function effectively as an ATS. Additional information regarding student life and University policies and procedures can be found in the *University Student Handbook and Academic Catalog*.

As an ATS, the faculty, staff, and preceptors have high expectations of you. We expect you to be diligent in your efforts, to be prompt, to conduct yourself with the highest degree of decorum, to be academically sound, and to represent yourself, our faculty/staff/preceptors, and the University of Indianapolis with professionalism.

Just as we have high expectations of you, we as a faculty, staff, and preceptors also have a responsibility to you. You can expect:

1. **A great education.** You will be given the opportunity to earn your athletic training degree from the University of Indianapolis.
2. **A demanding faculty/staff.** You can expect us to push you diligently in the classroom and in clinical experiences.
3. **An involved faculty/staff.** You can expect constant monitoring of your academic progress and clinical performance in the MSAT.
4. **A helpful faculty/staff.** You can expect us to work extremely hard with you and for you.
5. **A faculty/staff committed to success.** You can expect us to give the necessary effort to make our program successful and progressive.
6. **Honest and fair.** You can expect us to treat you in a respectful manner.
7. **An accessible faculty/staff.** The faculty and staff will be available for assistance, guidance, or just small talk.
8. **Great teachers, athletic trainers and leaders.** We will work to assist you in reaching your potential to become the best athletic training student and athletic trainer that you can be, while developing characteristics within you that will last a lifetime.
9. **Opportunities.** You will have many opportunities to observe athletic trainers and other health care professionals both on campus and at our clinical sites. You may have the

opportunity to become involved with national athletic events throughout the city of Indianapolis.

10. **Memories.** You will develop great memories and friendships that will last a lifetime at the University of Indianapolis.



## UNIVERSITY OF INDIANAPOLIS

### **Vision**

The University of Indianapolis will be recognized regionally and internationally for its high quality of student engagement in learning, leadership, and service.

### **Motto**

"Education for Service"

### **Identity Statement**

The University of Indianapolis was founded as Indiana Central University in 1902. It was popularly known as Indiana Central College from 1921 to 1975, when use of the word "University" was resumed. In 1986 the name was changed to University of Indianapolis.

The University of Indianapolis is a private, residential, metropolitan institution of higher learning that provides a transformational educational experience through strong programs in the liberal arts and sciences, selective professional and doctoral programs, collaborative partnerships throughout the city and the world, and a Christian tradition that emphasizes character formation and embraces diversity.

### **Mission Statement**

The mission of the University of Indianapolis is to prepare its graduates for effective, responsible, and articulate membership in the complex societies in which they live and serve, and for excellence and leadership in their personal and professional lives. The University equips its students to become more capable in thought, judgment, communication, and action; to enhance their imaginations and creative talents; to gain a deeper understanding of the Christian faith and an appreciation and respect for other religions; to cultivate rationality and tolerance for ambiguity; and to use the intellect in the process of discovery and the synthesis of knowledge. [uindy.edu/about-uindy/history-and-mission](http://uindy.edu/about-uindy/history-and-mission)

## COLLEGE OF HEALTH SCIENCES – UNIVERSITY OF INDIANAPOLIS



## **Vision**

The College of Health Sciences at the University of Indianapolis will be recognized regionally, nationally, and internationally for its development of high-quality healthcare practitioners who exhibit lifelong learning, leadership and service. [uindy.edu/health-sciences](http://uindy.edu/health-sciences)

## **Identity Statement**

The College of Health Sciences, established in 2007, is comprised of the Krannert School of Physical Therapy, the School of Occupational Therapy, the Department of Kinesiology, and the Athletic Training Program at the University of Indianapolis. The Schools within the College of Health Sciences offer undergraduate, graduate and post-graduate degree programs.

## **Mission Statement**

The mission of the College of Health Sciences at the University of Indianapolis is to develop lifelong learners who are engaged in leadership, scholarship, and service within their communities and are influential in the health and well-being of persons across diverse populations. The College of Health Sciences prepares practitioners who combine the art and science of their health professions with high ethical and moral standards. These skillful professionals display compassion and respect in their decisions, communications, and actions.

## **MASTER OF SCIENCE IN ATHLETIC TRAINING PROGRAM**

### **Mission Statement**

The mission of the Master of Science in Athletic Training Program (MSAT) at the University of Indianapolis is to develop qualified health care professionals in the field of athletic training. Through rigorous and comprehensive didactic and clinical education encompassing the Domains of Athletic Training, the MSAT strives to stimulate critical thinking and application of athletic training knowledge and clinical skills. The MSAT will provide students with the knowledge, psychomotor skills, and foundational behaviors of professional practice necessary to succeed as an evidence-based provider of athletic training services. Additionally, the MSAT educates students to allow them to engage in compassionate healthcare. Students who complete the MSAT at the University of Indianapolis will be eligible to become an athletic trainer certified by the Board of Certification.

### **Outcomes and Objectives**

1. **Outcome #1** - Demonstrate competence in knowledge and clinical skills for the practice of athletic training.

**Objectives:**

- 1.1. Students will recognize signs and symptoms of injury/illness and demonstrate competence in clinical examination, diagnosis, and referral.
- 1.2. Students will demonstrate skill in injury/illness prevention, risk management, health promotion and wellness.
- 1.3. Students will recognize emergent conditions and demonstrate skill in immediate and emergency care to formulate and implement a management plan.
- 1.4. Students will demonstrate skill in developing and implementing an intervention program/plan of care for patients.
- 1.5. Students will demonstrate the ability to use the International Classification of Functioning, Disability, and Health as a framework for the delivery of patient care and communication.
2. **Outcome #2** - Utilize evidence-based practice to provide patient-centered care.

**Objectives:**

- 2.1. Students will demonstrate the ability to access and read research in athletic training.
- 2.2. Demonstrate the ability to develop a research question, synthesize available evidence, and provide conclusions.
- 2.3. Students will demonstrate the ability to use clinical data, clinical expertise, and best available evidence to make clinical decisions.
3. **Outcome #3** - Demonstrate effective communication skills and professional behaviors with patients and other health care providers.

**Objectives:**

- 3.1. Students will demonstrate effective oral, and non-verbal communication skills.
- 3.2. Students will demonstrate effective written communication skills.
- 3.3. Students will demonstrate effective professional attitude and behavior.
- 3.4. Students will demonstrate knowledge of and comply with NATA Code of Ethics, BOC Standards of Practice and UIndy policy and procedures.
- 3.5. Students will advocate for the health needs of clients, patients, communities, and populations.
- 3.6. Students will create professional development plans according to personal and professional aspirations.
4. **Outcome #4** - Demonstrate service to and advocate for the profession of athletic training.

**Objectives:**

- 4.1. Students will demonstrate service to the University, profession, or community.
- 4.2. Students will engage in professional development.
- 4.3. Students will maintain membership in professional organizations, certifications, and licensure.

- 4.4. Students will demonstrate skill in healthcare administration and leadership.
- 5. **Outcome #5** - Incorporate quality improvement and reflective skills needed for the practice of athletic training.

**Objectives:**

- 5.1. Demonstrate the ability to use data and best practices to critically analyze clinical practice and make recommendations for improvement.
- 5.2. Students will develop knowledge regarding and incorporate clinician- and patient-oriented outcomes to capture clinical data and drive quality improvement.
- 5.3. Develop an understanding of the use of electronic health record systems to store and extract clinical data.
- 5.4. Students will understand the principles of data privacy, protection, and security and its application.
- 5.5. Students will develop reflective practice skills needed to critically appraise clinical practice performance.

## **ACCREDITATION INFORMATION**

The University of Indianapolis is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools.

The Master of Science in Athletic Training Program is accredited by the Commission on Accreditation of Athletic Training Education (CAATE). The next comprehensive review of the MSAT is the 2026-2027 academic year.

Commission on Accreditation of Athletic Training Education

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[www.caate.net](http://www.caate.net)

## **WHAT IS ATHLETIC TRAINING?**

Athletic trainers (ATs) are highly qualified, multi-skilled health care professionals who render service or treatment, under the direction of or in collaboration with a physician, in accordance with their education, training and the state's statutes, rules and regulations. As a part of the health care team, services provided by athletic trainers include primary care, injury and illness

prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention and rehabilitation of injuries and medical conditions.

Athletic training education uses a competency-based approach in both the classroom and clinical settings. Using a medical-based education model, athletic training students are educated to provide comprehensive patient care in five domains of clinical practice: prevention; clinical evaluation and diagnosis; immediate and emergency care; treatment and rehabilitation; and organization and professional health and well-being. The educational requirements for CAATE-accredited athletic training education programs include acquisition of knowledge, skills and clinical abilities along with a broad scope of foundational behaviors of professional practice.

To become a certified athletic trainer, a student must graduate with a master's degree from an accredited professional athletic training education program and pass a comprehensive test administered by the Board of Certification (BOC). Passage of the certifying examination is a requirement for licensure in most states. Once certified, he or she must meet ongoing continuing education requirements in order to remain certified. Athletic trainers must also work in collaboration with a physician and within their state practice act. [www.nata.org](http://www.nata.org)

## **CURRICULUM**

All faculty/staff/preceptors in and associated with the MSAT are charged with upholding the National Athletic Trainers' Association (NATA) Code of Ethics (Appendix A), the Board of Certification (BOC) Standards of Practice (Appendix B), the Indiana Athletic Training State Practice Act and the CAATE Standards for Accreditation of Professional Athletic Training Programs.

The MSAT is a progressive, outcome-based education program. It combines foundational and specific athletic training knowledge with the acquisition and integration of clinical skills. Students are provided the opportunity to engage in clinical experiences and apply clinical skills with real and simulated patients. This experiential approach to learning requires students to think critically; thus preparing students for athletic training practice.

The MSAT is six (6) semesters over two (2) years; combined with five (5) semesters of clinical experience. Each student will follow a specific course progression in this cohort program. The courses are arranged in a sequential manner. The successful graduate of the MSAT will earn a Master of Science in Athletic Training (MSAT) degree. The degree consists of 65 credit hours and clinical experiences.

### **Course Descriptions**

Year One – Summer (9 credit hours)

*ATRG 500 Introduction to Athletic Training Practice (3)*

Course covering the roles and responsibilities of an athletic trainer as well as the history, governance structure, and regulation of the athletic training profession. This course will also cover introductory concepts related to evidence-based practice, basic evaluation skills, and documentation. Instruction and practical application of taping, wrapping, bracing techniques, and protective equipment is also included.

#### *ATRG 501 Emergency Procedures (3)*

The course is designed to cover in-depth First Responder and Professional Rescuer Skills.

Topics addressing prevention, recognition, and management of life-threatening and/or severe injury/illness are included. Application of skills that include the environment, CPR/AED, airway management, immobilization, bleeding control and sudden illness management are also addressed. Students will be certified in CPR/AED.

#### *ATRG 502 Applied Clinical Anatomy (3)*

This course is an introduction to the structural anatomical study of the human body for athletic training students focusing on the interrelationships of structure, function, and human movement. Special emphasis will be given to those systems with direct and major roles in exercise performance, namely the muscular, skeletal, nervous, endocrine, cardiovascular, and respiratory systems. The structure and related function of each of these body systems will be examined in detail, emphasizing the key components related to exercise and training. The major anatomical structures of other body systems (e.g., gastrointestinal) will also be covered. Gross anatomical identification of specific bones, landmarks, origins/insertions/actions, joint structures, nerves, vessels and organs will be the primary focus of this class.

#### Year One -Semester I Fall (15 credit hours)

#### *ATRG 510 Lower Quarter Evaluation (4)*

Course covering an in-depth study of the normal anatomical structures in the lower extremity including joint structure and musculoskeletal/nervous systems. Also discussed are common risk factors and causes of injuries as identified by contemporary epidemiological studies, common injuries to each body part, typical symptoms, and common clinical signs associated with injuries/illnesses with the physically active. A lab covering the assessment techniques for injuries commonly seen in the lower quarter will be included.

#### *ATRG 511 Foundations of Intervention (2)*

This course is designed to provide the student with the foundational theory and principles related to injury/illness intervention. Included are topics addressing tissue healing, theories of pain and pain control, concepts of kinetic chain stability and mobility, as well as principles related to the use of therapeutic medications.

#### *ATRG 512 Applied Kinesiology (3)*

Course covering the origin, insertion, and action of muscles and muscle groups of the body with attention to methods to evaluate muscle length, joint range of motion, and to measure strength using manual muscle or break tests. Basic theoretical principles of movement science including, motor control, motor learning, motor development, and general principles of biomechanics for movement analysis will be discussed. Application of these principles to the study of human motion, postural evaluation, gait analysis and evaluation of muscle function during activities common to sport participation and rehabilitation also are addressed.

*ATRG 513 Evidence Based Methods and Analysis (3)*

Introduction to research methodology, and qualitative and quantitative data analysis as related to evidence-based practice of athletic training. The course addresses formulating clinical questions; searching, reading and appraising research; understanding levels of evidence; and citing and referencing works to become consumers of and designers of evidence. The course introduces students to the selection, application, and interpretation of basic descriptive, correlational, and inferential statistics.

*ATRG 514 Clinical Integration I (1)*

Course designed to refine psychomotor skills and introduce specific athletic training proficiencies integrating cognitive concepts and skills into progressively higher-level practical application. Skill integration will be achieved through successful completion and evaluation of new and existing skills/clinical proficiencies under the direct supervision of an athletic training preceptor.

*ATRG 515 Athletic Training Practicum 1 (2)*

Fieldwork experiences designed to integrate previously acquired knowledge and skill through live or scenario-based application. Students are expected to demonstrate clinical reasoning skills, professional verbal and written communication, evidence-based practice and ethical conduct. Students will gain clinical experiences either on or off campus under the direct supervision of an athletic training preceptor.

Minimum of 160 clinical hours

Year One – Winter (14.5 credit hours)

*ATRG 520 Upper Quarter Evaluation (4)*

Course covering an in-depth study of the normal anatomical structures in the upper extremities, head, cervical spine, thoracic spine, and lumbar spine including joint structure and musculoskeletal/nervous systems. Also discussed are common risk factors and causes of injuries as identified by contemporary epidemiological studies, common injuries to each body part, typical symptoms, and common clinical signs associated with injuries/illnesses with the physically active. A lab covering the assessment techniques for injuries commonly seen will be included.

### *ATRG 521 Therapeutic Exercise (3)*

This course focuses on the in-depth study of therapeutic exercises used in athletic training. Instruction will include rehabilitation plan development, implementation, documentation, and evaluation of efficacy of the rehabilitation program. Specific and current rehabilitation techniques will be introduced to the student for specific athletic injuries.

### *ATRG 522 General Medical Conditions (4)*

This course is designed to provide the student with the basic understanding of pathophysiology as a change from normal physiological functioning of the various systems of the human body. The course is based on illness and disease within a systems framework across the lifespan. Emphasis is placed on an overview of the etiology, pathogenesis, and clinical features of common illnesses and disease most often encountered by allied health care professionals. Course will also introduce the student to therapeutic medications commonly prescribed for injury and illnesses associated with the physically active population, both prescription and over the counter. Included in the course will be indications, contraindications, precautions, record-keeping procedures, drug classifications, side effects, and governing regulations related to the use of medication with the physically active.

### *ATRG 526 Research Application I (.5)*

Applied research relevant to athletic training through locating, appraising, and critiquing current evidence. Students will write a thorough literature review related to a research question.

Independent group work with a faculty/staff mentor

### *ATRG 524 Clinical Integration II (1)*

Course designed to refine psychomotor skills and introduce specific athletic training proficiencies integrating cognitive concepts and skills into progressively higher-level practical application. Skill integration will be achieved through successful completion and evaluation of new and existing skills/clinical proficiencies under the direct supervision of an athletic training preceptor.

### *ATRG 525 Athletic Training Practicum 2 (2)*

Fieldwork experiences designed to integrate previously acquired knowledge and skill through live or scenario-based application. Students are expected to demonstrate clinical reasoning skills, professional verbal and written communication, evidence-based practice and ethical conduct. Students will gain clinical experiences either on or off campus under the direct supervision of an athletic training preceptor.

Minimum of 160 clinical hours

## Year Two – Summer (6.5 credit hours)

### *ATRG 541 Exercise Applications for AT (3)*

This course provides students with the basic program design concepts and rationale to design fitness programs for individuals emphasizing cardiovascular training, strength training, flexibility training, balance, power, and speed/agility. Students will learn how to design exercise programs based on underlying principles of individualized fitness assessment and body composition results, personal health/fitness goals, weight management, and exercise design principles. The course is also designed to provide the student with a basic understanding of nutritional concepts

### *ATRG 536 Research Application II (.5)*

Applied research relevant to athletic training through developing a research proposal including research project methods and description.

Independent Group Work with Faculty/Staff Mentor

### *ATRG 535 Athletic Training Practicum 3 (3)*

Fieldwork experiences designed to integrate previously acquired knowledge and skill through live or scenario-based application. Students are expected to demonstrate clinical reasoning skills, professional verbal and written communication, evidence-based practice and ethical conduct. Students will gain clinical experiences off campus under the direct supervision of an athletic training preceptor.

Minimum of 220 clinical hours

## Year Two –Semester I Fall (10.5 credit hours)

### *ATRG 531 Therapeutic Modalities (3)*

Course covering the physiological effects, indications, contraindications, and precautions of contemporary therapeutic modality use. Students will design and plan therapeutic interventions. Focus will be on the application of therapeutic modalities according to evidence-based protocols. Included in this course will be the role of equipment safety and maintenance of therapeutic modalities.

### *ATRG 542 Organization and Administration in AT (2)*

This lecture/seminar course will focus on the professional management and administrative issues in athletic training. This course will introduce the student to the advanced theory and techniques associated with the management of the more complex issues associated with athletic training. Organization and administration topics will include management and supervision of personnel, financial resources, as well as the preparation in planning, designing,



developing, organizing, implementing, directing, and evaluating an athletic training health care program and facility. Current issues in athletic training related to professional conduct and practice will also be discussed. Legal concerns, risk management and insurance will also be discussed.

#### *ATRG 543 Practice Issues in Athletic Training (1)*

This course is designed to explore the process of planning, implementing, and executing quality improvement strategies in athletic training. Students will be exposed to content related to outcome measure assessment and implementation as well as the role of electronic medical record systems in collecting and synthesizing clinical data. Finally, the course will use real world examples, data, situations, and challenges to engage students in the development of clinical outcome and electronic medical record skills.

#### *ATRG 546 Research Application III (.5)*

Applied research relevant to athletic training through collecting and analyzing data; and drafting a research manuscript or research portfolio.

Independent Group Work with Faculty/Staff Mentor

#### *ATRG 544 Clinical Integration III (1)*

Course designed to refine psychomotor skills and introduce specific athletic training proficiencies integrating cognitive concepts and skills into progressively higher-level practical application. Skill integration will be achieved through successful completion and evaluation of new and existing skills/clinical proficiencies under the direct supervision of an athletic training preceptor.

#### *ATRG 545 Athletic Training Practicum 4 (3)*

Fieldwork experiences designed to integrate previously acquired knowledge and skill through live or scenario-based application. Students are expected to demonstrate clinical reasoning skills, professional verbal and written communication, evidence-based practice and ethical conduct. Students will gain clinical experiences either on or off campus under the direct supervision of an athletic training preceptor.

Minimum of 240 clinical hours

#### Year Two – Winter (9.5 credit hours)

#### *ATRG 552 Athletic Training Advocacy and Leadership (2)*

This course will emphasize advocacy and leadership in the athletic training profession. Students will learn about advocacy initiatives and leadership roles that can be taken within and outside of the profession of athletic training at the local, state and national levels. Students in the

course will apply advocacy concepts through professional experiential exercises. Current issues in athletic training related to ethical conduct and practice will be applied through case studies and course discussion. Students will also create professional development plans according to personal and professional goals and requirements.

#### *ATRG 551 Psychosocial Intervention (2)*

The course is designed to describe communication strategies, techniques and psychosocial interventions commonly used in athletic training. Included in this course is the recognition and management strategies of mental health conditions, as well as the role of personality in motivation in response to events and return to activity. Focus will be on the application of communication strategies, and development of management and referral strategies. The course will also address cultural competence in patient care and the role of various mental healthcare providers that comprise the mental health referral network.

#### *ATRG 553 Seminar in Athletic Training (1)*

This course is a culminating experience in athletic training that will provide the student with a comprehensive review of athletic training foundational and specific knowledge regarding the Domains of Athletic Training. This course will help the student to prepare for athletic training practice.

#### *ATRG 556 Research Application IV (.5)*

Applied research relevant to athletic training through completing a research manuscript or research portfolio and developing an abstract and presentation for professional dissemination.

Independent Group Work with Faculty/Staff Mentor

#### *ATRG 554 Clinical Integration IV (1)*

Course designed to refine psychomotor skills and introduce specific athletic training proficiencies integrating cognitive concepts and skills into progressively higher-level practical application. Skill integration will be achieved through successful completion and evaluation of new and existing skills/clinical proficiencies under the direct supervision of an athletic training preceptor.

#### *ATRG 555 Athletic Training Practicum 3 (3)*

Fieldwork experiences designed to integrate previously acquired knowledge and skill through live or scenario-based application. Students are expected to demonstrate clinical reasoning skills, professional verbal and written communication, evidence-based practice and ethical conduct. Students will gain clinical experiences off campus under the direct supervision of an athletic training preceptor.

Minimum of 240 clinical hours

## **ACADEMIC AND PROFESSIONAL BEHAVIOR POLICIES**

### **University Non-Discrimination Policies**

The University of Indianapolis does not discriminate on the basis of race, color, national origin, religion, sex, disability, sexual orientation (or gender identity or expression) or age in its programs and activities. The University complies with the Rehabilitation Act of 1973 and the Americans with Disabilities Act.

The following person has been designated to handle inquiries regarding the non-discrimination policies. For questions, please contact Erin Farrell at 317-788-6132 or [farrelle@uindy.edu](mailto:farrelle@uindy.edu). For further information on notice of non-discrimination, contact U.S. Department of Education office for Civil Rights, Citigroup Center, 500 W. Madison Street, Suite 1475, Chicago, IL 60661.

The University is committed to the prohibition of sex discrimination, sexual harassment and sexual violence and complies with all requirements of Title IX of the Education Amendments of 1972 ("Title IX"), which forbids discrimination on the basis of sex in education programs or activities ([uindy.edu/campus-life/titleIX](http://uindy.edu/campus-life/titleIX)). Questions about the University's policies and procedures and any complaint about sex discrimination should be directed to the Title IX Coordinator: Jessica Ward, Title IX Coordinator, Office of Student Affairs (317) 788-2139 Email: [wardjl@uindy.edu](mailto:wardjl@uindy.edu).

All forms of harassment will not be tolerated and will result in an immediate dismissal from the classroom. Further consequences may apply depending on the situation. The student must meet with the instructor after class has concluded to initiate the process of returning to class.

### **Request for Accommodations**

In accordance with the Americans with Disabilities Act (ADA), the University ensures that students with disabilities have equal access to educational programs and co-curricular activities. Our program is committed to all students achieving their potential. Students with a disability or who think they have a disability (e.g. attention, health, hearing, learning, mobility, physical, psychiatric, vision) that may require accommodations for classroom and/or clinical experiences must register with Services for Students with Disabilities (SSD) for disability verification and for determination of reasonable academic accommodations. Students must contact SSD (Schwitzer Center 206, Mon-Fri, 8 AM-4:30 PM / 317-788-6153 / [www.uindy.edu/ssd](http://www.uindy.edu/ssd)) to disclose the disability and complete the necessary documentation (<http://www.uindy.edu/ssd/forms-resources>). It is the student's responsibility to distribute copies for their Memorandum for Accommodations each semester to their course instructors as appropriate. Course instructors cannot make accommodations until official documentation from SSD has been provided by the student. Students must initiate arrangements for accommodations for tests, labs, clinical experiences and other assignments at least one week prior to the activity or due date in order to allow adequate time for the course instructor to meet the needs for the accommodation.

Otherwise, it is not guaranteed that the accommodation can be provided in a timely manner. Students are encouraged to discuss their concerns and needs with faculty at their earliest opportunity. This information is included in all course syllabi throughout the program.

**\*\*Please note that University accommodations do not guarantee accommodations for the Board of Certification examination. Students must contact the BOC directly to review policies associated with the certification exam. Additional documentation may be required.**

## **Confidentiality of Student Records**

The University of Indianapolis complies with the Family Educational Rights and Privacy Act of 1974, as amended (FERPA). Student academic information is considered confidential and is not released without the written authorization of the student. All student information is stored appropriately and confidentially. Only directory information may be released to legitimate agencies, such as student loan agencies or governmental agencies. No information is given to the public without student consent. Directory information is defined by the University of Indianapolis as information restricted to name, address, phone number, enrollment status (full-time or part-time) degree(s) earned, date of degree, and major. A student can request that no information, including directory information, be made available outside the University. Such requests are given in writing to the Registrar.

The Family Educational Rights and Privacy Act (FERPA) governs access to student academic and program records. Without their permission, the MSAT is unable to release any information about the student's educational program and experiences to anyone who does not have a legitimate education related use for that information (not even to family or those who call for references). This becomes vitally important when students request letters of recommendation and for faculty and staff to serve as a reference for them. Faculty will follow FERPA guidelines unless the student gives written permission to share academic information.

## **APPLICATION AND ADMISSION POLICIES**

The MSAT Program at the University of Indianapolis is highly competitive with application into the MSAT in the Fall of each year. The maximum number of students accepted annually is 20. There are three routes to program application: Post-Baccalaureate, Early Assurance and Early Entry. Each applicant must meet the following "Application Requirements". **Completion of all "Application Requirements" does not equate with automatic acceptance, however.**

The following are required for consideration for admission:

### **Eligibility Requirements**

- Cumulative GPA of 3.0 or higher

- Completion of prerequisite courses with at least a “C” or better in each course and minimum prerequisite GPA of 3.0. Courses taken on a pass/fail basis or any non-course credit will not count, such as Advance Placement (AP) credits.
  - Human Anatomy
  - Human Physiology
  - Chemistry (1 semester)
  - Physics (1 semester)
  - Biology (1 semester, some Human Physiology courses may count towards this requirement)
  - Exercise Physiology with Lab
  - Nutrition
  - Biomechanics or Kinesiology
  - Psychology
  - Statistics
- Completion of baccalaureate degree at an accredited college or university by the time of matriculation into the MSAT program, unless one of the following regarding UIndy undergrads apply:
  - Evidence that the applicant is a UIndy undergraduate student who has or will complete the core requirements of their UG degree prior to matriculation.
  - UIndy students earning early assurance to the MSAT program must meet specific thresholds during their undergraduate education.
- English as a foreign language
  - Applicants for whom English is their 2nd language must score a 100 on the Test of English as a Foreign Language (TOEFL) Internet Based Test. See Admission Requirements for International Graduate Students ([uindy.edu/graduate-admissions/international-graduate-requirements](http://uindy.edu/graduate-admissions/international-graduate-requirements))

## **Application Process and Requirements**

- Applicants must apply for admission online through the Athletic Training Centralized Application Service (ATCAS) ([atcas.liaisoncas.com/applicant-ux/#/login](http://atcas.liaisoncas.com/applicant-ux/#/login))

- Review the ATCAS website for instructions and fees.
  - All transcripts are submitted via ATCAS, including any dual credit courses.
- Application Timeline
  - Applications will be available June 30 and must be completed by November 15 for priority review
  - Please note: We suggest submitting materials early. ATCAS verification typically takes 4 weeks. Applicants are responsible for confirming that all application materials are uploaded into ATCAS for verification to occur.
  - Applications received after November 15 will be reviewed on a rolling basis until the cohort is filled.
- Recommendations
  - All applicants are required to provide three recommendations, including one from an athletic trainer (preferred).
  - Recommendations must be completed using the ATCAS system and requirements.
- Personal Statement
  - All applicants are required to write a personal statement completed and submitted using the ATCAS system.
- Observation Hours
  - 50 observation hours with an athletic trainer or other sports medicine rehabilitation/healthcare provider is strongly recommended.
  - Applicants may upload the information in the documents section of ATCAS.
- Interview
  - After the application deadline, top ranked applicants will be invited for an interview.
  - Interviews are conducted in person on campus. Remote video interviews can be pre-arranged for applicants with health or travel restrictions.
  - Interviewed applicants will have additional opportunities to learn about the program, such as:

- Program informational session
- Health Pavilion tours with current students
- Meet and greet with faculty and admissions staff

## **MSAT Matriculation Requirements**

- Letter of Intent
  - Students offered admission must sign a letter of intent indicating their acceptance of admission and acknowledgement of all matriculation requirements.
- Completion of Prerequisite Courses and Official Transcripts
  - All prerequisite coursework must be completed with a grade of C or better prior to beginning the MSAT program. An official transcript showing a conferred degree will be submitted to the MSAT Admissions Counselor by June 1 for any incoming student.
- Financial Aid
  - Students intending to apply for Financial Aid should visit the UIndy Financial Aid Website ([uindy.edu/financial-aid](http://uindy.edu/financial-aid)).
- Technical Standards
  - UIndy upholds the technical standards set forth by the American Disabilities Act (ADA) as well as the health and safety policy designed by the Centers for Disease Control and Prevention (CDC). All candidates must review the documents below and verify their understanding of the standards and policy before being granted acceptance into the program.
    - ADA Technical Standards  
([uindy.edu/documents/ADA\\_Acc\\_Form\\_Technical\\_Standards\\_Final\\_.pdf](http://uindy.edu/documents/ADA_Acc_Form_Technical_Standards_Final_.pdf))
    - CDC Communicable Disease Policy  
([uindy.edu/documents/communicable\\_disease\\_policy.pdf](http://uindy.edu/documents/communicable_disease_policy.pdf))
- Required Health Documentation
  - Students in the MSAT program must comply with all health requirements. Health requirements are tracked throughout the program in order to ensure students remain in compliance with Program and Clinical

requirements. Proof of immunity and/or vaccinations are required. Additionally, students are required to have a physical exam completed by a primary health provider, as well as proof of health insurance prior to matriculation.

- Criminal Background Check and Drug Screen
  - Criminal background checks are required of students in the MSAT. The specific procedures for how to request a criminal background check will be explained to the student. Students are responsible for all costs related to obtaining a criminal background check.
  - Drug screens may be required of students at some clinical education sites. The specific procedures for how to obtain a drug screen will be explained to the student when appropriate.

## **Early Assurance Admission Requirements**

The Early Assurance option is designed for incoming freshmen who have declared pre-athletic training as a concentration in conjunction with any undergraduate major. This option will inform your course selections throughout your undergraduate career. With acceptance into the Early Assurance program and fulfillment of all program criteria, you will be guaranteed admission into the master's degree program in athletic training.

To be *considered* for the Early Assurance program, you must be admitted into any undergraduate degree program by the University of Indianapolis and meet the following:

- Cumulative high school GPA of 3.5 on a 4.0 scale
- Proficiency in high school math and science courses
- Declare pre-athletic training as a concentration by February 1
- Optional: Qualified standardized test scores Test-Optional Policy ([uindy.edu/admissions/admission-requirements#test-optional](http://uindy.edu/admissions/admission-requirements#test-optional))

Once admitted to the Early Assurance program, you must meet the following academic standards and other requirements to keep your guaranteed status into the graduate program:

- All undergraduate requirements must be met before entering the graduate program.
- Cumulative undergraduate GPA of 3.3 or higher
- Prerequisite course GPA of 3.3 or higher



- Grade of "C" or higher in all prerequisite course work. *NOTE: Advanced Placement (AP) Credits are not accepted as prerequisites for the athletic training graduate program.*
- Participate in an interview for the program
- Completed application via ATCAS

## **Early Entry (3+2) Requirements**

The Early Entry (3+2) program is designed for incoming freshmen (or transfers meeting degree matriculation requirements) who are interested in an accelerated path toward the advanced degree, and who want to earn their degree in five instead of six years. This option allows you to be granted permission to start athletic training coursework in your fourth year after the completion of all undergraduate and core requirements. To qualify for this option, you must:

- Be enrolled in a University of Indianapolis undergraduate program
- Declare a major with a concentration in Pre-AT
- Have a cumulative undergraduate GPA of 3.3 or higher
- Have a prerequisite course GPA of 3.3 or higher
- Minimum grade of C in prerequisite courses
- Submit a letter from your undergraduate advisor approving that all designated university core, major and prerequisite courses will be completed prior to your fourth year of college

Early admission is not guaranteed, eligible students must participate in the regular application process.

## **Admissions Policies**

**The Athletic Training Program Director and MSAT Faculty reserve the right to deny acceptance to any student.**

**UIndy upholds the technical standards set forth by the American Disabilities Act (ADA) as well as the health and safety policy designed by the Centers for Disease Control and Prevention (CDC). All candidates must review the documents below and verify their understanding of the standards and policy before being granted acceptance into the program. Appendix C & F.**

## **PREREQUISITE COURSES**

<b>Course Type</b>	<b>UIndy Equivalent</b>
Human Anatomy	Biology 103 – Principles of Human Anatomy
Human Physiology	Biology 104 – Principles of Human Physiology
Exercise Physiology with Lab	KINS 350 – Exercise Physiology or KINS 245
Nutrition	KINS 249 or KINS 251
Biomechanics or Kinesiology	KINS 410 – Biomechanics
Psychology (3 credit hours)	Multiple Options
Chemistry (one semester)	CHEM 150/CHEM 151 or CHEM 104
Physics (one semester)	PHYS 150 or PHYS 103
Statistics	KINS 204 or MATH 220 or MATH 245
Biology (3-4 credit hours)	Multiple Options, some Human Physiology courses may count towards this requirement

## **MSAT RETENTION AND GRADUATION**

In order to remain in good standing in the MSAT, students must:

1. Abide by the Policy and Procedures outlined in the Athletic Training Student Handbook
2. Maintain current CPR/AED for Professional Rescuer and Healthcare Provider or Basic Life Support for HealthCare Providers certification
3. Provide proof of Health Insurance
4. Successfully complete annual bloodborne pathogens and HIPAA training
5. Complete Criminal Background Checks/Safe Harbor, Zachary Reports, and Drug Screens when applicable
6. Maintain NATA membership throughout program
7. Maintain a cumulative GPA of 3.0
8. Earn a grade of "C" or higher in each course in the MSAT program

9. Demonstrate satisfactory completion of all skills and clinical projects at the minimum required level, associated with the didactic and clinical education components of the program
10. Earn the minimum number of clinical hours for each clinical rotation experience
11. Students will take a cumulative exam at the end of the following time points; End of Semesters I and II in the first year. Students will take a UIndy benchmark exam at the end of Semester I in their second year that is modeled after the BOC exam. Students must earn a score of 70% or higher on the cumulative exams and 65% or higher on the UIndy benchmark exam. Students who fail to meet that benchmark for a cumulative or benchmark exam will work with program faculty on a remediation plan.
12. Meet program Professional Develop Units requirements (involvement in various service and professional activities as part of the program)
13. Attendance at one professional conference/symposium over the course of the program, students must provide proof of attendance.

## **PROBATION/DISMISSAL**

Students must maintain a 3.0 grade point average to be in good academic standing. In addition, a grade of “C” or higher is required for each course within the MSAT. However, the course instructor may recommend to the Program Director that a student retake a course or prove competency regardless of a student’s overall course grade. This includes redoing any assignment and/or test. Students must pass all practical examination tasks. For example, certain techniques evaluated during laboratory practical exams may require the student to prove competency regardless of overall grade in the course as a whole. In another example, students who perform poorly on an examination but still have a passing grade in a course may still be required to retake an examination to prove competency on the material. The Program Director will review students’ academic standing at the end of each semester.

If the cumulative grade point average is below 3.0 at the conclusion of any semester of the program, the student will be placed on academic probation. Dismissal will occur, at the discretion of the program director, if the cumulative 3.0 grade point average is not achieved by completion of the subsequent semester, excluding summer terms. Additionally, if the cumulative grade point average falls below a 3.0 for a second time, not in succession, the student will be dismissed at the discretion of the program director.

## **ACADEMIC MISCONDUCT/INTEGRITY**

Academic Misconduct may include any of the following, as identified in the University Student Handbook:

- Cheating

- Fabrication
- Plagiarism
- Interference
- Violation of Course Rules
- Fabricating Academic Misconduct
- Abuse of Confidentiality

Academic Integrity: According to the University's Student Handbook, **"The students, faculty, and administration of the University of Indianapolis commit themselves to the highest level of ethical conduct in academic affairs"**. Students at The University of Indianapolis are always expected to be in compliance with the *University's Policy of Academic Misconduct*. Scholastic dishonesty will not be tolerated in MSAT. Students who engage in scholastic dishonesty will be referred to the Dean of the College of Health Sciences for appropriate disciplinary action.

## **Cheating**

Examples of cheating include, but are not limited to, giving or receiving aid during examinations, using any type of crib sheet, copying from or looking at another exam, or submitting another's work as your own.

## **Fabrication**

A student must not falsify or invent any information or data in an academic exercise including, but not limited to, records or reports, laboratory results, and citations to the sources of information.

## **Plagiarism**

A student must not adopt or reproduce ideas, words, or statements of another person without giving an appropriate acknowledgment to the source. A student must give due credit to the originality of others and acknowledge indebtedness whenever he or she does any of the following:

1. Quotes another person's actual words, either oral or written;
2. Paraphrases another person's words, either oral or written;
3. Uses another person's ideas, opinions, or theories;
4. Cites facts, statistics, or other illustrative material, unless the information is common knowledge.

Note: **Plagiarism** is using the thoughts and/or words of another as though they were your own. All sources (internet, books, conversation) must be referenced. Plagiarism can result in failure or even university expulsion.

## **PROFESSIONAL DEVELOPMENT UNITS (PDUs)**

All Athletic Training Programs and Students are preparing for the BOC with the same content knowledge. As you progress toward a first job, it is often the “other” activities you have completed throughout your MSAT experiences that will set you apart from your peers. These may make the difference between obtaining the position you desire versus having it go to another individual.

The purposes of Professional Development Units (PDUs) are to:

1. Encourage students to pursue current and future professional development activities
2. Ensure that students become involved and engaged in a variety of different professional development experiences while preparing for life after the MSAT degree
3. Make students more marketable to prospective employers
4. Allow students to become accustomed to participating in future professional development activities

The following are options for PDUs in the MSAT:

### **Category A – Professional Development**

- ATSA membership (1)
- Non- athletic training association membership (2 for each membership)
- Attending educational events
  - IATA/ Student IATA (strongly encouraged) (5)
  - GLATA (strongly encouraged) (15 each)
  - NATA (strongly encouraged 20 each)
  - Professional Edge Center (2 each)
- Attending outside athletic training related educational sessions (1 per hour)
- Participating in quiz bowl (3)
- Surgery observations (3)

- Submission of an abstract to professional conference/symposium (3)
- Presenting poster presentation (5)
- Presenting oral presentation (5)
- Journal Club (1 per presentation)
- Journal article submission (10)
- Passing additional certifications (NSCA, ACSM, FMS, etc.) (up to 15)
- Attendance at other pre-approved professional meeting (Variable)

### **Category B – Professional Service**

- Special Olympics(1 per hour, max of 3 per one event)
- Athletics Special Event beyond assigned clinical experience (1 per hour, max of 3 per one event)
- Attending IATA Executive Council Meeting (1 each)
- Professional Association liaison to IATA or GLATA (5)
- Serving as lab model or simulated patient for faculty (2 each)
- Assisting with Faculty research beyond course requirements (2-10) \*Determined by faculty
- Officer in ATSA (5)

### **Category C – Community/University Service**

- Helping students with peer evaluations
- Peer tutoring
- Blood drive
- Attend student recruitment events
- Other service events organized through ATSA (variable and pre-approved by faculty)

### **Category D – Other**

- Other activities pre-approved by faculty (must be submitted in writing) (1 per hour)

Campus speaker, convocations, etc.

A total of 60 PDUs are required for the successful completion of the MSAT. Students are to record all PDUs completed using this Google Form. [forms.gle/LBbPmJTApEa4kkim8](https://forms.gle/LBbPmJTApEa4kkim8)

## CLASSROOM ATTENDANCE AND BEHAVIOR

Attendance, class participation, and professional behavior are expected during all class sessions. All students are expected to be prepared for class daily.

Should a student need to be absent from class, the student needs to contact the course instructor prior to class. Should a student be absent from class due to illness, they should not attend clinical rotations on the same day. Frequent absences will be addressed individually by the program faculty. Failure to attend class may result in administrative withdrawal from the class or failure in the course. Certainly, unexpected events do happen (i.e., family death, sudden illness, etc.) which will be addressed on an individual basis.

Should you miss an examination or quiz, you will receive a zero unless prior arrangements have been made with the instructor OR you have an accepted written medical excuse from a healthcare provider.

If a student is ill, classroom attendance may be affected. Please also see the Communicable Disease Policy (Appendix F) for additional information and procedures to follow for classroom and clinical experience attendance in the event of an illness.

## PROFESSIONAL BEHAVIORS

It is expected that students behave in a manner that is professional in and out of the classroom. All students are expected to adhere to the BOC Standards of Professional Practice (Appendix B). As a graduate student in a healthcare program you are held to a high standard of professional behavior which will be monitored and enforced. Violation of the standards of professional practice will result in disciplinary action.

*Table 1: Communication*

Appropriate	Inappropriate
Effective Verbal communication <ul style="list-style-type: none"><li>• Uses appropriate correct grammar</li><li>• Remains engaged in conversation</li><li>• Speaks respectfully to all</li></ul>	Ineffective verbal communication <ul style="list-style-type: none"><li>• Uses profanity or other inappropriate terms</li><li>• Demonstrates defensive language</li><li>• Is argumentative</li></ul>

Appropriate	Inappropriate
<ul style="list-style-type: none"> <li>Reinforces society's and professional values/manners by using Please and Thank you</li> </ul> <p>Effective Nonverbal communication</p> <ul style="list-style-type: none"> <li>Demonstrates proper body language and facial expressions</li> <li>Listens and maintains eye contact during conversation</li> </ul> <p>Effective Written communications</p> <ul style="list-style-type: none"> <li>Demonstrates legible handwriting</li> <li>Utilizes electronic communication in a respectful and appropriate manner</li> <li>Uses appropriate grammar and spelling</li> </ul> <p>Other Positive communication skills</p> <ul style="list-style-type: none"> <li>Communicates schedule, changes in the schedule or conflicts that arise</li> </ul>	<ul style="list-style-type: none"> <li>Lacks communication with members of the health care team</li> </ul> <p>Ineffective Nonverbal communication</p> <ul style="list-style-type: none"> <li>Does not demonstrate active listening</li> <li>Fails to maintain eye contact</li> <li>Demonstrates <ul style="list-style-type: none"> <li>Eye rolling</li> <li>Heavy sighs</li> <li>Shrugging shoulders</li> <li>Disengagement</li> </ul> </li> </ul> <p>Ineffective Written communication</p> <ul style="list-style-type: none"> <li>Uses text language in documentation, email or letter</li> </ul> <p>Other Inappropriate Communication</p> <ul style="list-style-type: none"> <li>Mixes professional communication with social communication</li> <li>Does not take privacy precautions in written, and verbal communication (HIPAA)</li> <li>Discusses patients, injuries, and/or conditions through social media</li> </ul>

*Table 2: Responsibility*

Appropriate	Inappropriate
<p>Punctuality</p> <ul style="list-style-type: none"> <li>Arrives on time for all assigned times</li> </ul> <p>Limitations</p> <ul style="list-style-type: none"> <li>Understands "role" of an athletic training student</li> <li>Understands his/her skill set</li> </ul>	<p>Punctuality</p> <ul style="list-style-type: none"> <li>Arrives late for class and /or clinical rotation</li> </ul> <p>Limitations</p> <ul style="list-style-type: none"> <li>Does not recognize limitations and boundaries</li> </ul>



Appropriate	Inappropriate
<ul style="list-style-type: none"> <li>Understands the scope of practice of an Athletic Trainer</li> <li>Understands personal relationship boundaries with athletes/patients</li> </ul> <p>Ownership of actions</p> <ul style="list-style-type: none"> <li>Demonstrates initiative and is proactive</li> <li>Performs daily tasks without being asked</li> <li>Admits when makes mistakes and recognizes it as a learning opportunity</li> <li>Takes responsibility for actions</li> <li>Accepts constructive feedback</li> </ul> <p>Abides by Policies and Procedures of the MSAT and assigned clinical site</p>	<ul style="list-style-type: none"> <li>Performs skills outside of the scope of an athletic training student</li> <li>Lacks self-motivation and initiative</li> </ul> <p>Ownership of actions</p> <ul style="list-style-type: none"> <li>Makes excuses for inappropriate actions</li> <li>Does not follow through with assigned tasks/ projects</li> <li>Does not “attempt” skills you feel you are “weak” in</li> </ul> <p>Demonstrates apathy toward the profession and/or clinical assignment</p>

*Table 3: Integrity/Honesty*

Appropriate	Inappropriate
<p>Demonstrates honesty/truthfulness and is ethical</p> <p>Demonstrates respect for:</p> <ul style="list-style-type: none"> <li>Patient</li> <li>Preceptor, Faculty, Staff</li> <li>Profession</li> <li>Peers</li> <li>Coaches</li> <li>Administrators</li> </ul> <p>Trustworthy</p> <ul style="list-style-type: none"> <li>Demonstrates confidentiality</li> </ul>	<p>Demonstrates dishonesty</p> <ul style="list-style-type: none"> <li>Misrepresents abilities or credentials</li> <li>Is unethical</li> </ul> <p>Demonstrates a negative attitude and actions toward profession, patients, peers, administrators.</p> <ul style="list-style-type: none"> <li>Pessimistic</li> <li>Disapproving attitude</li> <li>Overly negative</li> <li>Self-promotion</li> </ul>

Appropriate	Inappropriate
<ul style="list-style-type: none"> <li>Recognizes when help is needed and asks for it</li> </ul> <p>Presents self as a professional during all encounters</p> <ul style="list-style-type: none"> <li>Communication</li> <li>Behaviors</li> <li>Appearance</li> <li>Dress – abides by dress code</li> </ul>	<p>Fails to maintain confidentiality</p> <ul style="list-style-type: none"> <li>Does not protect patient health and safety as a priority</li> <li>Does not seek out help to enhance learning and care provided</li> </ul> <p>Does not present self as a professional during all encounters</p> <ul style="list-style-type: none"> <li>Communication</li> <li>Behaviors</li> <li>Appearance</li> <li>Dress – does not abide by dress code</li> </ul>

## INTERPERSONAL RELATIONSHIPS

As an athletic training student, you will meet and interact with many different people – faculty, staff, physicians, athletes/patients, and peers.

1. Athletic Training Student and Athletic Trainer – The athletic trainer is your immediate supervisor and you will be responsible to them at all times for clinical experiences. Feel free to discuss anything with them at any time. The AT may also be your preceptor at any given time.
2. Athletic Training Student and Team Physicians - As an ATS, you will have a wonderful opportunity to get to know the team physicians and other medical specialists associated with the MSAT. You can learn a great deal just by watching them work and listening to them discuss injuries. Feel free to ask questions. Generally speaking, most of the arrangements for a physician visit with a patient will be made through the athletic trainers. However, if you are called upon to present the patient to the physician, be sure to give the physician detailed information and follow their orders immediately and explicitly.
3. Athletic Training Student and Coaches - This is an area that is very important and you will make the most of your experience if you learn to communicate with the coaches. However, remember that the athletic trainer of that sport is your ultimate superior and anything you do is their responsibility.
4. Athletic Training Student and Patient - Because of your involvement with patients both in and outside of the athletic training facility, there is a need to create separation between professional and social responsibilities. Knowing that you only act as an athletic training student when you are involved in athletic training activities will help

you to say no to questions that arise during social occasions. You have no obligation to act as anything more than a regular student when you are involved in activities away from the athletic training facility. Your athletic training responsibilities end when you leave for the day; therefore, you are not to practice your athletic training skills outside of the athletic training facility. Because you are trained in CPR/AED, if a situation arises that requires your professional skill, please use good judgment.

## **SOCIAL MEDIA AND AWARENESS POLICY**

Athletic training students should be concerned with any behavior that might embarrass themselves, their families, and/or University of Indianapolis or their clinical education sites. This includes any activities conducted online.

Please keep the following guidelines in mind as you participate on social networking web sites.

- Before participating in any online community or network understand that anything posted online is available to anyone in the world. Any text or photo online is completely out of your control the moment it is placed online – even if you limit access to your site.
- You should refrain from posting personal information, including but not limited to home address, phone numbers, email address, etc.
- You should refrain from posting your whereabouts or your [travel] plans. You could be opening yourself to online predators.
- Faculty, staff, and clinical preceptors can and do monitor these websites.
- Potential employers and scholarship committees search these sites to screen candidates and applications.

The following is a policy established for students related to social media and electronic forms of communication (email, texting), particularly as it relates to clinical education. Any violation of this policy is considered professional misconduct and may result in either probation or dismissal from the program.

1. Students should avoid interaction (e.g., Facebook friends, Twitter followers, Instagram, Snap Chat) with current faculty, staff, and preceptors personal accounts. Current students are encouraged to “like” the University of Indianapolis Athletic Training Facebook page and are encouraged to follow @UIndyAT and Instagram and other professional social media accounts for current information/news related to the profession.
2. Students should NOT interact on social media/electronic forms of communication with student-athletes or patients, particularly if you are currently engaging in clinical education experiences that may result in interaction with that athlete or patient. This includes Facebook, Twitter, Instagram, Snap Chat, etc., email, and texting. (If the patient/athlete has a medical need, he/she should contact the ATC or the appropriate health care professional, not the student).

3. Students should NOT interact on social media/electronic forms of communication with any athletes or patients who are minors. This includes Facebook, Twitter, Instagram, Snap Chat, etc., email, and texting.
4. Students should NOT take any pictures or post anything about the patients they are providing care to on any social media. This is unprofessional, and also considered a HIPAA violation.
5. Do NOT share any information regarding patient diagnosis, diagnostic imaging, etc. to any form of social media.
6. The malicious use of on-line social networks such as derogatory language about any member of the UIndy Athletic Training Program (including faculty & staff), the NATA, the BOC or other related professional entities or clinical sites, demeaning statements about or threats to any third party, inappropriate photos including yourself or others in the MSAT, or statements depicting hazing, sexual harassment, vandalism, stalking, underage drinking, illegal drug use, or other inappropriate behavior will be subject to disciplinary action if knowledge of such violations are known.

## **PREGNANCY**

Enrollment of pregnant students requires careful planning of coursework and clinical experiences to protect the health of mother and fetus and the integrity of the mother's educational experience. It is important, therefore, that any student who suspects they may be pregnant to inform the Program Director at the time the pregnancy is medically confirmed. Some clinical experiences may not be possible during the later stages of pregnancy and it may not be possible to re-assign clinical experience placements to accommodate the needs of pregnant students. The student, Program Director, and Coordinator of Clinical Education will meet to examine the student's specific situation and determine an appropriate plan of action. If she must take a pregnancy related leave of absence from the program, a student in good academic standing will be eligible for reinstatement following the conclusion of pregnancy and health clearance from their medical provider.

## **COSTS ASSOCIATED WITH THE PROGRAM**

Program tuition and fees are located on the program website. Tuition and fees are subject to change annually. Refunds are not available for admission application or late registration fees. Students should obtain the refund policy from the office of Financial Aid. [uindy.edu/student-billing/refunds](http://uindy.edu/student-billing/refunds)

In addition to tuition/fees students in the MSAT incur additional costs. Additional costs include:

1. NATA membership - \$75.00 annually
2. Attendance at a professional conference - \$45, varies annually
3. Transportation costs for off-campus clinical experiences - \$300-500.00/semester
4. One time enrollment fee for Viewpoint Health Portal - \$20.00
5. Criminal Background Check through required vendor Viewpoint – up to \$50.00 annually

6. Drug Screen through required vendor Viewpoint - up to \$50.00 annually
7. CPR/AED face shield – up to \$20.00
8. Two Step Tuberculosis Skin Test - \$5.00 annually through the Health and Wellness Center
9. Flu Shot - available through the Health and Wellness Center
10. Clothing to meet dress code requirement – variable
11. Fanny/Sling Pack and Athletic Training Kit – up to \$50.00
12. Scissors - up to \$10.00

## **STUDENT HEALTH AND SAFETY**

The MSAT is committed to the health and safety of each student. The ways in which the MSAT ensures student health and safety include:

1. Verification of required vaccinations/immunizations
2. Verification of required physical examination from a healthcare provider
3. Verification of signed MSAT Technical Standards
4. Annual 2-step tuberculosis testing
5. Documentation of annual electrical equipment calibrations and/or electrical safety checks at clinical sites
6. Annual Bloodborne Pathogen Training and review of Bloodborne Pathogen Guidelines and verification of training
7. Annual HIPAA and FERPA Training and verification of training
8. Transportation policy related to inclement weather
9. MSAT Communicable Disease policy and verification of policy
10. Malpractice insurance policy for all students (University blanket policy)

## **CLINICAL EDUCATION POLICIES**

Clinical education is the application of knowledge and skills, learned in classroom and laboratory settings, to actual practice on patients under the supervision of a preceptor. The preceptor guides the student through the educational hands-on experience in order to optimize learning and increase the student's confidence over time.

Supervision of the athletic training student (ATS) during clinical experience must be constant and consistent. The preceptor must be physically present and have the ability to intervene on behalf of the ATS and the patient.

The clinical education component of the program is planned to include clinical practice opportunities with varied patient populations. Clinical experiences occur with various patient populations in settings that athletic trainers commonly practice. Clinical experiences may occur both on and off campus.

Each clinical site will have its own policies and procedures that the ATS must follow. Given that each clinical education setting and clinical experience are different, all ATSs must complete a UIndy MSAT Orientation Checklist with their preceptor for each clinical experience. The MSAT Orientation Checklist form is to be completed by the preceptor and all ATS during the first week for each clinical experience. The Orientation Checklist can be found on CORE under the Electronic Forms tab.

## **CLINICAL ASSIGNMENTS**

Athletic Training Students will be assigned to a preceptor(s) for their clinical experience by the Coordinator of Clinical Education (CCE) and/or Program Director. ATSs will be assigned to clinical experiences based upon a variety of factors which include but are not limited to the following:

1. Previous experience and clinical rotations
2. Clinical experiences needed necessary for program completion
3. Indicated professional practice preferences
4. Availability of clinical sites

Student input will be considered when appropriate but is not guaranteed. Students will be notified about clinical placements at least 2 weeks prior to the start of the clinical experience.

## **CLINICAL EDUCATION ATTENDANCE**

Students are expected to treat clinical experiences as they would a job and attend clinical experiences as scheduled. Students on clinical assignment will be expected to be present at the facility during facility and event hours, weekends, and holidays as scheduled by the preceptor and/or CCE. Students are expected to give their full attention to their clinical assignments during their scheduled time frame. All ATSs must have at least 1 day of relief per calendar week (every 7 days). A clinical week is Monday through Sunday.

If a situation should arise in which it is unexpectedly necessary to be absent (illness, death in the family, etc.), it is the student's responsibility to notify both the CCE and the preceptor. A plan for making up the missed time will be developed collaboratively between all parties.

In the rare circumstance of an excused absence, all requests must be pre-approved through the CCE and preceptor when possible and should include a plan for making up the time at the clinical setting.

## **CLINICAL HOUR AND PATIENT ENCOUNTER TRACKING**

All students are required to complete daily hour logs and patient encounter logs in CORE to document the time engaged in clinical education. Every patient encounter (direct and indirect) should be logged in CORE. Students should develop a habit of recording their hours and patient encounters daily to keep their information current. Students who fail to log their clinical hours and or patient encounters on CORE within a 7 day period, will not be given credit for their completed clinical hours/encounters. It is the student's responsibility to log hours and patient encounters. Students should only track those hours for which they are engaged in clinical education. Travel time, food/snack breaks, homework breaks, social visits, and other miscellaneous instances should not be included in the daily time log. Each clinical practicum course syllabus lists the patient encounter and hour logging requirements.

## **CRIMINAL BACKGROUND CHECK**

Criminal background checks are required of students in the MSAT. The specific procedures for how to request a criminal background check will be explained to the student. Students are responsible for all costs related to obtaining a criminal background check and for submitting the appropriate documentation to the CCE and/or preceptor. Students are also strongly advised to maintain a copy of all documentation for their own records.

Students who have a positive result on a criminal background check will be required to meet with the Program Director and CCE (and potentially the Dean of CHS) to discuss potential ramifications of these positive results. These ramifications could include difficulty or inability to locate clinical placements for the student and/or ineligibility to sit for the Board of Certification exam or obtain state license.

## **DRUG SCREENS**

Drug screens may be required of students at some clinical education sites. The specific procedures for how to obtain a drug screen will be explained to the student when appropriate. Students are responsible for all costs related to obtaining drug screens and for submitting the appropriate documentation to the CCE and/or preceptor. Students are also strongly advised to maintain a copy of all documentation for their own records.

Students who have a positive result on a drug screen will be required to meet with the Program Director and/or CCE to discuss potential ramifications of these positive results. These ramifications could include difficulty or inability to locate clinical placement.

## **CLINICAL EXPERIENCES**

### Year One - Summer

Clinical experiences, on-campus, with preceptor providing health care for preseason athletics

### Year One - Fall Semester 1

During the first 12 weeks of the semester, students will be assigned to a preceptor for part time clinical experience followed by a 4-week immersive clinical experience with the same preceptor.

### Year One - Winter Semester 2

Students will experience 2 different rotations of approximately 7 weeks each

### Year Two - Summer

Students will be involved in an immersive clinical experience with a preceptor

### Year Two - Fall Semester 1

Students will be involved in a clinical experience a semester long clinical experience. Students may also experience a general medical rotation.

### Year Two - Winter Semester 2

Students will be involved in an immersive clinical experience for the final 8 weeks of the semester. Students may also experience a general medical rotation.

All students will have clinical opportunities with varied patient populations through the lifespan, of different sexes, different socioeconomic statuses, varying levels of athletic ability and activities in accordance with CAATE Standard 17. Likewise, students will gain experience with patients with a variety of health conditions in accordance with CAATE Standard 18.

## **IMMERSIVE CLINICAL EXPERIENCES**

During the MSAT, students will experience immersive clinical placements. During immersive clinical placements, students do not have on-campus academic responsibilities. Students will be assigned to a preceptor during the immersive experiences and the student will be in attendance at the clinical site during the time the preceptor is at the clinical site. Students must abide by the required clinical hours during the immersive clinical experience.

## **ESTABLISHING NEW CLINICAL SITES**

For immersive experiences for ATRG 535 and ATRG 555 students who wish to seek out a new clinical site must work with the CCE a minimum of 6 months in advance of the rotation to establish a new site. Even if a site agrees to host you, an affiliation agreement must be fully executed prior to your start date. Affiliation agreements can take several months or longer to fully execute. In some instances, both parties may not be able to come to an agreement to fully execute an affiliation agreement for your clinical experience and in this case the student cannot complete an immersive experience at that site.



## **CLINICAL EVALUATIONS**

Clinical education sites are evaluated regularly by the Program Director and/or the Coordinator of Clinical Education. As a means to ensure continuing quality assurance, the clinical education experience is evaluated through a variety of methods utilizing preceptor evaluations, student evaluations, and clinical site visits. The following methods of evaluations are utilized to assess the clinical education experience of the UIndy AT Program:

### Preceptor Evaluation of Student

Preceptor Evaluation of Students will be completed by the preceptor. A midterm and final evaluation will be performed on students who are assigned to a clinical site for greater than 7 weeks. Students who complete a clinical rotation of less than 7 weeks will only receive a final evaluation by the preceptor.

### Student Evaluation of Preceptor

The Student Evaluation of preceptor serves as a means to ensure quality of the preceptors that supervise an ATS during clinical experiences. Students will complete a Student Evaluation of Preceptor at the end of each clinical experience. These evaluations will remain anonymous; however, they will be presented to the preceptor in aggregate form for training and development needs.

### Student Evaluation of Clinical Setting

The Student Evaluation of Clinical Setting serves as a means to ensure quality of the clinical education settings in which an ATS has clinical experience. Students will complete a Student Evaluation of Clinical Setting at the end of each clinical experience. These evaluations will remain anonymous; however, they will be presented to the preceptor in aggregate form for training and development needs.

### Clinical Site Visits

Clinical site visits serve as a means for the AT Program Director and/or Coordinator of Clinical Education to visit the clinical education site to ensure quality clinical instruction. During the clinical site visit, the Program Director and/or coordinator of clinical education will meet with the preceptor(s) to discuss the clinical experience.

## **DRESS CODE**

In order to promote professionalism that is required when providing patient care, an athletic training student shall act and dress like an allied health professional in the athletic training facility. It is the responsibility of each student to keep their appearance neat and clean. Athletic Training Students at a minimum must adhere to the UIndy dress code outlined below.

### General Appearance

Professional presentation as an athletic training student must occur at all times during clinical education experiences. Professional presentation includes appropriate attire, demeanor, and proper hygiene. Discretion should be used concerning make-up, tattoos, jewelry, and piercings.

When engaged in any clinical education experience, discuss proper dress with the preceptor prior to engaging in clinical education. At a minimum, the policy set by the UIndy Athletic Training Program applies at all clinical sites.

To ensure patient and student safety, the following jewelry items are not permitted to be worn during clinical education experiences: nose rings, eyebrow rings, tongue piercings, long necklaces, excessive finger rings and bracelets, and excessive ear piercings.

Personal hygiene requirements include the following: hair must be clean, out of the eyes, and unobtrusive while participating in clinical education experiences. Long hair should be tied back so as to not interfere with patient care. Hands and fingernails should be clean at all times, and fingernails must be at an appropriate length so as to not harm patients or serve as a potential health hazard. Facial hair is permitted and must be neatly trimmed and maintained at all times.

Appropriate attire must be professional at all times and may not reveal undergarments or body areas that would be considered inappropriate in a healthcare setting.

#### General Dress Code Guidelines

As a general rule, dress/appearance expectations include:

- **Practice:** Khaki pants/shorts, UIndy AT T-shirt or Polo shirt, socks, close-toed shoes
- **Competition:** Khaki pants/shorts, UIndy AT Polo shirt, socks, close-toed shoes
- **Rehabilitation Clinic/Physician Office:** Khaki pants, UIndy AT Polo shirt, socks, close-toed shoes

Athletic Training students may wear appropriate clothing with their assigned clinical site logo when at an off campus clinical site.

Name Tags must be worn during all clinical experiences.

#### *Collared Shirts/Polos:*

- A. Collared shirts (polo shirts) with the UIndy Athletic Training logo are preferred. Students may wear a plain polo shirt and/or a supplied polo shirt from their current clinical rotation.
- B. Clothing should be of an appropriate color when representing UIndy. This would include clothing worn under the required collared shirts, quarter-zips, or sweatshirts.

#### *Pants/Shorts:*

- A. Pants/shorts should be of appropriate length (shorts should be fingertip length) and

worn on or above the iliac crests. Pants/Shorts should be of appropriate looseness to allow for appropriate response to patient needs.

- B. Appropriately colored pants/shorts are required. Pants/Shorts should be solid in color and free of patterns.
- C. Ripped or patched clothing, rolled up pants, jeans or jean shorts, mesh shorts/pants, sweatpants, leggings, yoga pants or items of clothing where undergarments are exposed are not permitted.

#### *Other Clothing Items:*

- A. Sweatshirts or jackets with the UIndy Athletic Training logo are permitted when appropriate. Students may wear supplied outwear from their current clinical rotation when appropriate.
- B. Close-toed shoes, with appropriate socks, must be worn at all times. Shoes must be functional; open-toed shoes, such as sandals, flip-flops, etc. are not permitted. High-heeled shoes are not permitted. Dress shoes worn for indoor events, must be worn with appropriate socks or OSHA approved stockings.
- C. Hats (with the bill forward) are only permitted for outdoor activities and must include a UIndy logo and colors. No hats are to be worn when inside the athletic training facilities.
- D. In cold weather, the outermost layer of sweatshirts or jackets must be plain or contain a UIndy logo.
- E. Clothing that advertises other schools (beyond your currently assigned clinical site), alcohol, tobacco, or other drugs are not permitted.

#### *Outdoor Events*

For outdoor events, clothing should be based on the above guidelines and coordinated between the athletic training staff and students. In the event of inclement weather, nylon pants are allowed, as are coats, hats, and gloves that are functional.

#### *Indoor Events*

For indoor events, business/business-casual dress is appropriate. Dress should always be conservative so that the student is able to provide patient care to the best of their ability without exposing undergarments. Socks (dress socks, nylons, in compliance with OSHA) should always be worn, and dress shoes should always be functional (close-toed, no heels). Please talk with your preceptor for further guidance concerning appropriate dress for indoor events.

#### *Rain Gear and Field Jackets*

Rain gear and field jackets are available on a check out basis through the UIndy AT clinic. These items should never be used outside of athletic training activities. You will be responsible for replacement in the event an item is damaged or lost.

#### *Travel Attire*

Travel attire should be consistent with the athletic training staff and should be professional.

## **CLINICAL GUIDELINES**

### **APPLICATION OF SKILLS ON PATIENTS**

This is the experiential learning aspect of Athletic Training Education and includes active participation, practical application, and problem solving from the student. This is the best location to apply theory to real-time clinical practice and for students to acquire and exercise professional skills in order to prepare students for independence and autonomy beyond graduation. All skills must be formally instructed and evaluated in the classroom setting or by the preceptor before an ATS can administer these skills to patients in the clinical setting. This is to ensure the safety of both the patient and the ATS.

### **COMPLETING CLINICAL EXPERIENCE PROJECTS**

All required clinical experience projects associated with a practicum course must be completed during the assigned practicum course as outlined in the course syllabus. In the extenuating circumstance that clinical experience projects are not completed during the assigned clinical course, the student may receive a Deferred (DE) or Incomplete (I) grade for the clinical experience course at the discretion of the AT faculty and assigned preceptor(s). In the event that a student receives a DE/I grade due to an incomplete clinical project, the student is required to complete with a satisfactory grade, the incomplete clinical experience projects prior to the first day of classes the following semester.

### **CLINICAL SUPERVISION**

Students must be directly supervised during clinical education experiences. Direct supervision requires that the Preceptor must be physically present and have the ability to intervene on behalf of the ATS and the patient. At no time, should the student assume the role of the Athletic Trainer. An ATS is not a licensed allied health care professional and therefore cannot perform duties of a Athletic Trainer (i.e., make return to play decisions, use modalities, etc.) in the State of Indiana without being under the direct supervision of their preceptor. First Responder's are certified in First Aid and CPR/AED and are allowed to perform only those duties within their specific training (i.e., wound care management, RICE, taping/wrapping, etc.). First Responders cannot make return to play decisions or apply therapeutic modalities (including rehabilitation program modification or progression). CAATE discourages the use of "First Responders", and the UIndy MSAT supports this recommendation. Students are NOT to serve as First Responders at any time.

### **CLINICAL HOURS POLICY**

Students are required to be present at clinical education experiences. No student should exceed a maximum of 25 clinical hours per week except for Immersive Clinical Experiences.

Students are expected to meet the minimum clinical hour requirements for the following clinical experience courses:

- ATRG 515 (2 credits) - Minimum 160 clinical hours
- ATRG 525 (2 credits) - Minimum 160 clinical hours
- ATRG 535 (3 credits) - Minimum 220 clinical hours
- ATRG 545 (3 credits) - Minimum 240 clinical hours
- ATRG 555 (3 credits) - Minimum 240 clinical hours

It is expected that students will have regular weekly attendance at the clinical experience as determined by the preceptor. Failure to experience the minimum clinical hours per rotation without notification and/or permission from the Coordinator of Clinical Education or Program Director will result in the student earning an unsatisfactory grade in their practicum course and being dismissed from the program. Students must complete all required clinical hours prior to matriculating to the next clinical semester. Students are expected to continue to engage in their clinical experience for the entire assigned time, even after they have achieved the clinical hour minimum for their respective practicum course.

In situations where students gain more than the maximum weekly clinical hours identified above, the Coordinator of Clinical Education or Program Director will meet with the student and preceptor to discuss strategies for decreasing clinical hours without compromising the educational experiences of the student.

A clinical week is Monday through Sunday. Students must log their hours and patient encounters using CORE, daily. Students who fail to log their clinical hours and or patient encounters on CORE within a 7 day period, will not be given credit for their completed clinical hours/encounters. It is the student's responsibility to log hours and patient encounters. Students must, at minimum, have one day off from clinical experiences per week.

## **LIABILITY INSURANCE**

The University has a blanket malpractice insurance policy for all students who are enrolled in a course in the AT curriculum. The liability insurance covers students in both on campus and off campus clinical experiences under the supervision of a preceptor. The liability insurance does not cover a student who is serving as a first aider at an event that is not sponsored by the Athletic Training Program or the UIndy Department of Athletics.

## **BLOOD BORNE PATHOGENS**

Students may encounter situations where they have the potential to come in contact with blood or other infectious materials while performing duties as an ATS. The potential for exposure not only exists in the athletic training facility but also on the practice and competition fields. See *Appendix E* for the Blood borne Pathogens Policy.

Students are required to annually participate in Blood borne Pathogen training prior to participating in clinical experiences.

## COMMUNICABLE DISEASES

During the course of the program, if an ATS develops an active communicable disease, they are relegated to the following policies to protect patients and other ATS and staff from contracting a communicable disease. Students may return 24 hours after resolution of their symptoms. If fever is present, the student must be fever free without medication for 24 hours prior to returning. Please consult with your personal health care provider for additional guidance. Symptoms that should prompt evaluation include but are not limited to:

- A. acute phase of an upper respiratory infection
- B. acute sore throat
- C. fever over 100.5 F°
- D. vomiting within the previous 24 hours
- E. acute phase of mononucleosis
- F. bacterial sinus infection
- G. conjunctivitis
- H. antibiotic treatment for less than 48 hours
- I. open wounds/infectious skin disorders that are uncovered and/or unmanaged
- J. student suffering from any condition in an infectious state

In order to protect the health and safety of all ATs the following Communicable Disease Guidelines were designed according to Centers for Disease Control and Prevention's (CDC) Guideline For Infection Control In Health Care Personnel, 1998. For the full report go to

[cdc.gov/infectioncontrol/guidelines/healthcare-personnel](https://www.cdc.gov/infectioncontrol/guidelines/healthcare-personnel)

See *Appendix F* for the Communicable Disease Policy

## UNIVERSAL PRECAUTIONS

“Universal Precautions” should be followed by all personnel at all times on all patients. The use of Universal Precautions is based on an individual's skills and interaction with the patient's body substance, non-intact skin, and mucous membrane. This applies to all personnel at all times regardless of the patient's diagnosis.

1. All patients must be regarded as potentially infected with blood-borne pathogens.
2. Strict hand washing must be practiced before and after each patient contact. **Hands must be washed immediately if they are contaminated with blood or body fluids.**
3. Gloves should be worn:

- a. if soiling with blood or body fluids is anticipated,
  - b. for placement of intravenous lines.
  - c. Gloves should not be reused.
4. Articles contaminated with blood or body fluids should be discarded:
  - a. if disposable, in red bags labeled "infectious waste."
  - b. Non-disposable items should be cleaned with a hospital approved disinfectant and sent to Central Services for sterilization.
5. Care should be taken to avoid needle-stick injuries. Used needles should not be recapped or bent; they should be placed in a prominently labeled puncture resistant container designated specially for such disposal.
6. Blood spills should be cleaned up promptly with a solution of 5.25% sodium hypochlorite diluted with Water (1:10 household bleach).
7. Health care workers who have exudative lesions or weeping dermatitis should refrain from all patient care and handling equipment until the condition is resolved.
8. To minimize the need for emergency mouth-to-mouth resuscitation, disposable mouth pieces, resuscitation bags or other ventilation devices should be available for use.
9. Pregnant health care workers should strictly adhere to precautions to minimize the risk of HIV transmission.
10. All specimens must be contained in a leak-proof plastic bag labeled 'bio-hazard.' Students must assume responsibility when appropriate for wearing protective barriers, i.e., gloves, gowns, masks, and protective eyewear, to reduce the risk of exposure to potentially infectious materials. Additionally, students must assume medical, legal, and financial responsibility for the follow-up care associated with any unprotected exposure.

## **DISPENSING MEDICATION**

Federal guidelines dictate specific roles for athletic trainers in the administration and dispensation of medication. Athletic Trainers are only legally allowed to administer over-the-counter medications. Administration of medication is defined as handing patients single doses (e.g. ibuprofen, acetaminophen) in packets that have the lot #, directions, dosage (mg), and warning visible on the front. All OTC medication that is administered by an ATS must be in accordance with all federal guidelines, under the direct supervision of their preceptor, and must be documented appropriately. Any other medications needed must be prescribed and dispensed by a physician. Please view your affiliated clinical practicum site policies on administration and storage of medication.

## **THERAPEUTIC EQUIPMENT SAFETY POLICY**

The UIndy Athletic Training Program requires that therapeutic equipment at all clinical sites is inspected, calibrated, and maintained according to the manufacturer's recommendations. This is required to safeguard the health of the patient and the safety of the student and clinician.

## **CONFIDENTIALITY/PRIVACY**

During clinical experiences, students will have access to patient private health information. Students are to respect the privacy of patients at all times. Patient health status, care, and treatment planning should only be discussed with members of the direct healthcare team. In the classroom and clinical setting, discussing injuries and illnesses is an excellent opportunity to learn; however, patient information must be de-identified during these discussions. Students are required annually to complete HIPAA/FERPA training. prior to observing or participating in clinical experiences.

## **TRAVEL AND TRANSPORTATION**

### Travel during Clinical Experiences

As part of the clinical experience, ATs may have the opportunity to travel with various athletic teams throughout clinical education. Travel is only permitted when accompanied by a preceptor.

Some areas to review with your Preceptor prior to travel may include:

- Emergency Care Policy
- Expected Conduct
- Record Keeping Policies
- Kit (supplies)
- Emergency telephone numbers of host team
- Emergency contact and insurance information on all of the athletes

Remember you are representing not only yourself, but also your team, University of Indianapolis, and the MSAT Program, so conduct yourself accordingly. Athletic training students must follow the respective team rules and guidelines when traveling with athletic teams. Failure to comply will result in reassignment to a different clinical experience and possibly probation/dismissal from the program.

### Student Transportation to Clinical Sites

Students will be given the opportunity to gain clinical experience at a variety of locations, including on- and off-campus locations. In the case of off-campus clinical education experiences, students will be responsible for traveling to and from their primary clinical site at their expense. The University of Indianapolis will not provide the student with transportation to these sites, nor will the university or program pay for the student's expenses related to traveling to those sites. In some cases, the student's clinical education experience will relocate (e.g., for an athletic event) based on the schedule at that site. It is the responsibility of the student to travel to and from the designated site per the arrangements made with the student and preceptor.



Students will be responsible for any tickets, accidents, etc. they may incur while driving to these clinical sites. Therefore, students are highly encouraged to have insurance and to drive responsibly.

#### Student Travel to Clinical Sites in Adverse Weather

In the event of bad weather or hazardous road conditions, each individual student must determine if they feel they can safely travel to the clinical education site. If a student determines it is unsafe, they need to inform their preceptor in as much advance as possible. Students should not abuse this policy or tempt fate. In a nutshell, if the student feels they can arrive and return safely then they should. If the student is unsure of their safety then they should not drive. The student should ride with a safe driver or call the preceptor and inform them of the planned absence. It is the student's responsibility to reschedule the missed experience if possible. If the clinical education site is closed due to bad weather, the student is not required to attend the clinical education experience.

#### Student Travel to Clinical Site that is Closed due to an Outside Threat

In the event a clinical site is closed due to an outside threat, the ATS will not attend the assigned clinical experience at the clinical site. In situations where a clinical site is closed due to an outside threat, and practices/games are still being conducted, the ATS will not attend the assigned clinical experience at the clinical site.

#### Student Transportation of Injured/Ill Patients

Under no circumstance should a student transport an injured/ill patient in any vehicle for off-site emergency care, physician appointments, or any other reason. Preceptors should not ask or expect students to provide such services in their own, a preceptor's, or the institution's vehicle. The issues involved with such actions expose the student, preceptor, and institution to great potential liability. Just as it is the preceptor's responsibility to avoid placing students in such situations, it is also the student's responsibility to inform the program director or coordinator of clinical education of any instance in which the student feels they were placed in a compromising situation.

### **CELLULAR PHONE USE**

Cellular phones should be limited to **professional use only** during clinical education. Coaches and patients should be contacting the preceptor and therefore students should not share their phone numbers. If students are found using cellular phones for non-clinical reasons, the preceptor, much like an in-class instructor, may ask the student to leave the site or confiscate the phone for the remainder of the scheduled experience.

## **INJURY REPORTS AND DOCUMENTATION**

The ATS, during their clinical experiences, will be involved in completing individual injury reports for each patient/athlete. Be sure to include your signature and title (ATS) and give to your preceptor to review and sign. Do not leave any medical record incomplete. Many clinical education settings will utilize computerized injury tracking systems; discuss the use and operation with your preceptor to become familiar with the daily use of such programs. Every treatment received by a patient must be documented. This can be difficult during peak hours of patient care, but all ATs and ATs must be sure to record all treatments. Be sure to familiarize yourself with the documentation system that your clinical education settings utilize to track daily treatments.

## **EMPLOYMENT**

If the student chooses to obtain employment while in the MSAT program, the University of Indianapolis assumes no legal responsibility for the competency of the student engaged in the job duties assigned by their employer. Students must not represent themselves to the public or to their employer as an ATS. This title is reserved for use during assigned clinical experiences. The professional liability insurance purchased through the University only covers the student during official clinical experiences.

Due to the nature of the cohort educational experience (academic and clinical experiences), learning activities outside the normal classroom schedule are to be expected. We recommend that any employment commitments be assumed with caution. Students should not assume that previous course schedules dictate subsequent semester schedules. Each semester schedule is subject to change dependent upon many factors (e.g. classroom availability, faculty availability, course requirements, etc.). Scheduling of classes, and clinical placements are not adjusted around the work schedules of students.

## **VIOLATIONS OF PROGRAM POLICIES**

**Any student in violation of the University's, Program's, Profession's, and/or Clinical Site's policies may be subject to disciplinary action. Athletic training faculty or preceptors may submit a formal written request for student disciplinary action.**

### **Programmatic**

All requirements as outlined on Viewpoint by the posted due dates

### **Legal**

- A. Failing to complete a criminal background check if required by a clinical site

- B. Being found guilty of a felony or misdemeanor
- C. Any conviction must immediately be reported to the Program Director. The Department faculty will review the situation and determine the appropriate action to take regarding the student's standing within the program.

## **Ethical**

- A. Violating confidentiality
- B. Violating the NATA Code of Ethics and/or UIndy's Student Code of Conduct
- C. Violating the Board of Certification Standards of Professional Practice

## **Academic**

- A. Maintain a cumulative GPA of 3.0
- B. Earn a grade of "C" or higher in each course

## **Clinical**

- A. Failing to fulfill agreed upon responsibilities placed upon the student by a preceptor
- B. Behaving in a manner deemed unprofessional or unacceptable by a preceptor
- C. Failing to wear proper attire
- D. Failing to follow the communicable disease policy
- E. Failing to follow established procedures
- F. Violating established hours. This may include, but is not limited to:
  - a. violation of program established hour requirements
  - b. failure to report clinical hours
  - c. repeated tardiness
  - d. repeated absences
- G. Being dismissed from a clinical experience site for inappropriate conduct or failure to fulfill required responsibilities

All cases of misconduct will be taken on a case by case basis and are dependent on the magnitude of the misconduct and the student's previous history of misconduct if present. If a behavior/action is considered professional misconduct, as identified by a violation of the NATA Code of Ethics or the BOC Standards of Professional Practice, then a student may be immediately removed from clinical education experiences until the incident is investigated.

Violations will be handled in the following manner:

1. Violation occurs
2. Violation is reported to or recognized by the Program Director
3. Faculty schedules a meeting with the ATS to discuss the violation

4. AT Faculty deliberate to determine a corrective course of action and penalties assessed if necessary.

Penalties associated with the violation will be determined case by case based on the severity of the violation. Penalties could include but are not limited to:

- A. Reduction of final grade for the corresponding didactic or practicum course
- B. Written reprimand placed into student folder
- C. Probation for professional misconduct
- D. Suspension from clinical experience
- E. Dismissal from the MSAT

## **STUDENT APPEALS**

Students who have been dismissed from the MSAT program for violation of any of the policies may choose to appeal the dismissal to the MSAT faculty. The student must submit a formal written letter of appeal to the Program Director. This letter needs to include the student's reason and reflection for which the student was dismissed from the program. The letter must outline possible solutions or a plan to improve.

The petition will be considered by the MSAT faculty. A petition for reinstatement is unlikely to be successful unless the former student can demonstrate readiness to succeed academically and professionally. Considerations may also include previous academic and professional performance and availability of space in the class.

Students who believe they have been treated unfairly with respect to either academic or professional standing may appeal adverse decisions of the MSAT faculty first to the College of Health Sciences (CHS) Dean, and then to the Provost's office as outlined in the University of Indianapolis Student Handbook. An appeal to the CHS Dean must be initiated within 5 days of student notification of the MSAT faculty decision. An appeal to the Provost must be initiated within 5 days of student notification of the CHS Dean decision. Detailed information about the process to appeal outside of the MSAT program may be found in the UIndy Student Handbook in Section I: Academic Information.

### **Appeal to Academic Dismissal**

When a student is determined academically ineligible, the following procedures will take place:

- The Program Director will meet with the student to discuss the situation that has placed them as academically ineligible
- The student will be withdrawn from the academic program

- The student will receive a formal written letter to provide written notification of their status. This letter contains the deadline for which the formal written appeal letter is due if the student decides to appeal the decision.
- The appeal letter should include the student's reason and reflection for which the student became academically ineligible and their plan for how they would change and/or modify their performance if granted readmission.
- The student will send this formal written appeal letter to the Program Director
- The appeal letter will be reviewed by the MSAT faculty within one month of receipt.
- The student will be notified of the final decision through a formal written letter. If reinstated, the student may return to the program after an absence to be determined by the MSAT faculty. Any course(s) in which a "C-" or lower was earned must be retaken. For successful completion of the program, students may repeat an AT course no more than one (1) time.
- If not reinstated and the student wishes to appeal the decision, the student may petition to the Dean of the College of Health Sciences within five (5) days after receiving the decision letter from the Program Director
- Appeals to the Provost are outlined in the University Handbook.

**The Athletic Training Program Director and MSAT Faculty/staff reserve the right to deny acceptance to any student or dismiss an athletic training student at any time for failure to comply with the above standards.**

## **Reinstatement**

If an appeal is successful, a student may be readmitted to the MSAT program under conditions specified by the MSAT faculty. The conditions may include but are not limited to: required meetings with faculty, remedial course work, or independent study designed to demonstrate remediation of the identified problems that led to dismissal.

If an appeal is successful, a student may be:

1. Immediately readmitted to the program to the same cohort, with or without conditions specified by the faculty. Conditions may include, but are not limited to: required meetings with faculty, remedial coursework, and/or independent study designed to demonstrate remediation of the identified problems that led to dismissal.
2. Placed on a required leave of absence for a specified amount of time prior to re-enrollment in the program. Cohort and timing of re-enrollment will be determined by faculty based on recognized needs for student academic and/or professional behavior development. During a required leave of absence, the faculty may recommend or require that the student meet additional conditions prior to re-enrollment in the program. Conditions may include, but are not limited to: required meetings with faculty, remedial coursework, and/or independent study designed to demonstrate remediation of the identified problems that led to dismissal. For further information on leave of absence, see the Leave of Absence below.

## Leave of Absence

A leave of absence may be requested by a student in writing or may be required by the Program Director on the recommendation of the faculty following program dismissal. A student who requests a leave of absence for personal reasons must be in good academic and professional behavioral standing at the time the leave of absence is granted. Students must resume enrollment in the curriculum the following academic year. Students placed on a leave of absence are responsible for notifying, in writing, the Program Director of their intention to return to the program no later than the date specified by the Program Director. Failure to do so will impact the student's ability to return to the program.

During a required leave of absence, the faculty may recommend or require that the student meet additional conditions prior to re-enrollment in the program. Conditions may include, but are not limited to: required meetings with faculty, remedial coursework, and/or independent study designed to demonstrate remediation of the identified problems that led to dismissal.

Students returning from a leave of absence must re-submit program required documentation including, but not limited to health records, criminal background checks, and drug screens. Students also must review and acknowledge the contents of the MSAT student handbook and reaffirm their ability to meet the technical standards required of athletic training professionals.

## WITHDRAWAL FROM THE PROGRAM

Students considering a complete withdrawal from the MSAT program should schedule a preliminary meeting with the Program Director. Official withdrawal from the University may be made through the Office of the Registrar. Deadlines for official withdrawal are as follows:

- Semester I or II: Withdrawal permitted up to and including Friday of the 10th week of the semester. No withdrawals are permitted after this deadline.
- Spring Term: Withdrawal permitted up to and including Monday of the second week of Spring Term.
- Summer session: Withdrawal permitted up to and including Friday of the 8th week of the term (for 14 week courses) or Friday of the 4th week of the term (for 7 week courses).

Students who officially withdraw from the University may be eligible for a refund of tuition and other fees (except for nonrefundable fees). When a student financial aid recipient withdraws from the university, their refund is first returned to the federal aid programs and then to the other aid programs and the student as a percentage of the original package. (See University Refund Policy available in the Accounting Office, which is considered the authority on any refunds made). [uindy.edu/registrar/drop-add-withdrawal](http://uindy.edu/registrar/drop-add-withdrawal)

Federal Refund Policies are subject to change at any time. The University of Indianapolis reserves the right to change the refund policies as mandated by federal regulation but will

make every effort to notify students. [uindy.edu/student-billing/refunds](http://uindy.edu/student-billing/refunds)

## APPENDICES

### Appendix A: 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, WELL-BEING, 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 well-being 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 or AT logo in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.
  - 4.3. Members shall not place financial gain above the patient's well-being and shall not participate in any arrangement that exploits the patient.
  - 4.4. Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try and influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.
  - 4.5. Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.

## **Appendix B: Board of Certification (BOC) Standards of Practice**

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

Version 3.4-Published November 2021

Implemented January 2022

## **Appendix C: MSAT Technical Standards**

### **University of Indianapolis**

#### **Master of Science in Athletic Training Program**

#### **American Disabilities Act (ADA)**

Becoming an athletic training student requires the completion of a professional education program that is both intellectually and physically challenging. The purpose of this document is to articulate the demands of this program in a way that will allow students selected for admission into the Masters of Science in Athletic Training Program (MSAT) to compare their own capabilities against these demands. This document meets the requirements outlined by the American Disabilities Act (ADA) of 1990. The ADA makes it unlawful to discriminate against individuals with disabilities.

Applicants who are offered a position in the MSAT are asked to verify their ability to complete the tasks, with or without reasonable accommodations, associated with performing as an athletic training student. Reasonable accommodation refers to ways in which the University can assist students with disabilities to accomplish these tasks, ie: providing extra time to complete an examination, enhancing the sound system in a classroom or providing a push cart for a student who may not have the strength to carry a cooler full of water.

Reasonable accommodation does not mean that students with disabilities will be exempt from certain tasks; it does mean that we will work with students with disabilities to determine whether there are ways that we can assist the student towards completion of the tasks. The University will provide reasonable accommodation as long as the accommodation does not fundamentally alter the requirements of completing the MSAT.

Students accepting a position in the MSAT who indicate that they can complete these tasks, with or without reasonable accommodation, are not required to disclose the specifics of their disabilities until after acceptance into the program. After acceptance into the program, a student with a disability who wishes reasonable accommodation must make a formal request to the MSAT Program Director. The student must be prepared to provide documentation to the University Disability Coordinator. Students with a disability must register with the Services for Students with Disabilities (SSD) office (Schwitzer Center 206, (317) 788-6153, [uindy.edu/ssd](http://uindy.edu/ssd)) for disability verification and for determination of reasonable academic accommodations. You are responsible for initiating arrangements for accommodations for tests and other assignments in collaboration with the SSD and the faculty. A student may be administratively withdrawn if it becomes apparent that the student cannot complete essential tasks even with accommodation, that the accommodations needed are not reasonable and would cause undue hardship to the institution, or that fulfilling the functions would create a significant risk of harm to the health or safety of others.

Students who have questions about this document or who would like to discuss specific accommodations should make an inquiry with the MSAT Program Director.

### Essential Tasks

1. Students must meet course and clinical education standards.
2. Students must demonstrate 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.
3. Students must complete readings, assignments and other activities outside of class hours.
4. Students must gather decision-making pieces of information during a patient encounter activity in class or in the clinical setting without the use of an intermediary such as a classmate or preceptor.
5. Students must demonstrate sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations, treatment and rehabilitation using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients.
6. Students must apply critical thinking and problem solving to formulate assessment and therapeutic judgments, to be able to distinguish deviations from the norm, and follow safe practice often in stressful situations.
7. Students must maintain professional personal appearance and hygiene in the classroom and clinical setting.
8. Students must annually complete OSHA-regulated Bloodborne Pathogen Exposure Training and complete the Hepatitis B Vaccine series.
9. Demonstrate flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.

### Typical Skills and Physical Demands Needed to Complete These Essential Tasks

1. Students typically sit for 2-10 hours daily in the classroom, stand for 2-4 hours daily at a clinical experience and must be able to ambulate 10 yards at 2 miles per hour indoor or outdoor over rough terrain.
2. Students frequently lift less than 10 pounds and occasionally lift between 10-20 LBS. overhead.
3. Students occasionally carry up to 25-30 LBS while walking up to 10-20 feet.
4. Students frequently exert 25 pounds of push/pull forces to objects up to 50 feet.
5. Students frequently twist, bend, stoop and kneel on the floor up for up to ~15 minutes.
6. Students frequently move from place to place and position to position and must do so at a speed that permits safe handling of classmates and injured patients.
7. Students frequently stand and walk while providing support to a patient.

8. Students frequently coordinate verbal and manual activities with gross motor activities.
9. Students use auditory, tactile, and visual senses to receive classroom instruction and to evaluate and treat patients.
10. Students often will need to have 20/40 vision to correctly see activities across the field, court or mat.
11. Students frequently need basic neurological function to perceive hot, cold, change in contour of surface/body part and to maintain 10 LBS. of grip strength for 30 secs.
12. Students frequently need bladder, bowel and emotion control for 1-2 hours.
13. Students may have to perform CPR, First Aid, and patient transportation procedures.

Examples of Physical Demands needed to complete Essential Tasks include:

1. Transporting injured patients from the field.
2. Carrying heavy 10-gallon water containers.
3. Carrying heavy medical kits.
4. Completing physical testing procedures of muscles and ligaments to all body joints, etc.
5. Completing taping procedures.
6. Running across uneven field surfaces in a reasonable amount of time to care for emergency situations.
7. Assist in lifting patients and transporting for a short distance.

Candidates for selection to the MSAT will be required to verify they understand and meet these technical standards or that they believe that, with certain accommodations, they can meet the standards.

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

If a student states he/she can meet the technical standards with accommodation, then the University will determine whether it agrees that the student can meet the technical standards with reasonable accommodation; this includes a review to determine whether the accommodations requested are reasonable, taking into account whether the 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.

I certify that I have read and understand the technical standards listed above, and I believe to the best of my knowledge that I meet each of these standards with or without accommodation. I understand that if I am unable to meet these standards, I will not be admitted into the Athletic Training Program.

---

Signature of Applicant

---

Date

## Appendix D: Blood borne Pathogen Policy

### University of Indianapolis Athletic Training Program

#### Bloodborne Pathogen Policy and Exposure Protocol

The University of Indianapolis Athletic Training Program's Bloodborne Pathogen Policy is intended to prevent transmission of bloodborne diseases within the clinical environment. Training and education will be provided on a yearly basis for all students prior to beginning clinical experiences. Documentation of training will be recorded and kept on file electronically. Each athletic training student must have the Hepatitis B vaccine or be in the process of attaining the series at the time of acceptance into the MSAT. Documentation of the vaccine will be kept in the student's personal file. **Full participation in clinical education will NOT begin until the above proof has been presented.**

#### Standard Precautions

1. All students must follow Standard Precautions in the care of ALL patients. Following the Center for Disease Control (CDC) Guidelines, Standard Precautions apply to blood, ALL body fluids, non-intact skin, and mucous membranes. This includes secretions, excretions, and contaminated items regardless of whether or not they contain visible blood.
2. When exposure is anticipated, all students must assume responsibility for wearing personal protective equipment such as gloves, gowns, masks, and protective eyewear. Standard Precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in hospitals (CDC).
3. Hands must be washed before and after patient contact, after exposure to a contaminated article, and after removing gloves.
4. Gloves must be worn for contact with blood, body fluids, mucous membranes and non-intact skin, including during vascular access. Gloves must be worn for contact with surfaces contaminated with blood and other potentially infectious materials.
5. Students must assume responsibility for reporting all accidental exposures to blood or body fluids to their preceptor(s) and to the program director and coordinator of clinical education at the time of the incident. Students will be expected to comply with program and clinical site protocol.
6. Students are required to pass a Bloodborne Pathogen Exam each year prior to patient care experiences. The exam is not a part of the course grade. Students may take the exam as many times as necessary to obtain a passing grade.

7. All students must assume responsibility for follow-up care associated with any unprotected exposure.

**Be aware of this important information when engaging in clinical education:**

- The most serious infections spread through blood and body fluids are HBV, HCV and HIV (the virus that causes AIDS).
- These infections are caused by exposure to blood or other body fluids.
- The most common exposure for athletic training students is treating bleeding and/or open wounds without protective barriers.
- The use of personal protective equipment (PPE), such as gloves, gowns, masks, and protective eyewear, is the best way to avoid exposure to blood borne pathogens.
- Immediately and thoroughly wash hands and other skin surfaces that are contaminated with blood, body fluids containing visible blood, or other body fluids to which universal precautions apply. Use antibacterial sanitizer if hand washing is not available.
- Clinical education sites (e.g., athletic training facilities) have various PPE and other engineering controls available for student use such as: Gloves, masks, protective eyewear, gowns, gauze pads, biohazard bags, sharps containers, biohazard containers, absorbent materials, and approved disinfectant/cleaning supplies.
- Disposable articles contaminated with blood or other body fluids should be placed in a suitable biohazard container for storage. Tables and other surfaces should be washed immediately with an appropriate disinfectant.
- All sharp objects such as scalpel blades and razor blades should be disposed of in the designated disposal containers (Sharp's Box)
- Hepatitis B vaccine will protect you from contracting Hepatitis B. There is no known vaccine for HCV or HIV
- Bloodborne Pathogen Guidelines and Exposure Protocols are posted as appropriate in clinical education sites. These procedures must be strictly followed.

**Wound Care Procedure**

1. Apply disposable gloves, inspect for rips or holes.
2. Place sterile gauze pad over wound - apply direct pressure.
3. Elevate wound site above heart level 5-10 minutes.
4. Clean wound with approved cleaner
5. Use a circular outward spiral pattern to remove debris/bacteria.

6. Apply appropriate wound dressing/closure (e.g. Band-Aid, non-adherent pad, Steri-strips). Ensure dressing is securely applied.
7. Dispose of all contaminated materials in a biohazard container.
8. Wash the work surface with an approved cleaner.
9. Remove gloves - pull inside out.
10. Wash hands with soap and water for 15 seconds or use antibacterial sanitizer if hand washing is not available.

#### Universal Precautions-Procedures for Handling Spilled Blood and Body Fluids

1. Apply disposable gloves.
2. Use a paper towel or other absorbent material to absorb the spill.
3. Place used towel/absorbent material in a biohazard container or leak-proof plastic bag.
4. Flood area with 1:9 bleach solution, alcohol or sanitary absorbent agent, or other approved cleaning solution.
5. Clean area with paper towels, vacuum (dry or wet), or broom and dustpan.
6. Place used towel, vacuum cleaner bag, or waste in a biohazard container or a leak proof plastic bag.
7. Remove gloves - pull inside out.
8. Place gloves in a biohazard container or biohazard bag and tie.
9. Wash hands with soap and water for at least 15 seconds or use antibacterial sanitizer if hand washing is not available.

#### Blood borne Pathogen Exposure Protocol

- Upon exposure to blood borne pathogen proceed as follows:
- Exposure incident means that blood or other potentially infectious materials made contact with:
  - A. Eye, mouth, or other mucous membrane
  - B. Non-intact skin or parenteral contact
    - a. Wash exposed skin with soap and water. Flush eye or other mucous membranes with water for 15 minutes. Provide immediate first aid to the area, clean and dress as necessary. Provide immediate first aid to the area, clean and dress as necessary.
    - b. Inform clinical site preceptor and complete all necessary documentation for the clinical site.
    - c. Contact the Program Director and the Coordinator of Clinical Education as soon as possible but no longer than 24 hours after exposure.
    - d. The student should report to the University of Indianapolis Student Health Center as soon as possible. A Student Bloodborne Pathogen Exposure form will be completed. The Student Exposure Checklist Form will also be completed and filed in the student's health record



- e. If the University of Indianapolis Student Health Center is closed, the checklist and Student Bloodborne Pathogen Exposure Forms are available in the Athletic Training Program Student Handbook. Blood testing is best if done within 72 hours of exposure.
- f. The student is then responsible to follow through with the recommended procedure.

## University of Indianapolis

### Bloodborne Pathogen Exposure Policy Acknowledgement

I understand that if I have a bloodborne exposure incident that it would be best for me to follow the same procedure that employees do as documented in the Federal Register Vol. 56, No. 235 Bloodborne Pathogens Rules and Regulations. Exposure incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials. The post exposure follow up includes:

- documentation at clinical site of exposure (this includes route of exposure, how happened, where happened, etc.);
- identification and documentation of the source individual if possible; and with consent of the individual, the source should be tested to determine HIV and HBV status unless it is already known (this will be determined by each clinical area's guidelines);
- Hepatitis B immunization status and documentation should be taken to my healthcare provider;
- HBV and HIV testing;
- my blood needs to be tested as soon as possible through my healthcare provider; and
- any post-exposure treatment recommended by my healthcare provider.

I understand that my insurance may or may not cover these expenses, but it is for my benefit to follow through with these recommended procedures.

I have read and understood the above.

Electronic Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved 05/02/02 Revised 04/20/14; Reviewed 4/9/18

**From the University of Indianapolis Health and Wellness Center**

Phone (317)-788-3437; Fax: (317)-788-3371

**Bloodborne Pathogen Exposure Incident Form**

Name: \_\_\_\_\_ Date of Incident: \_\_\_\_\_

Time of Incident: \_\_\_\_\_ Location: \_\_\_\_\_

Potentially infectious materials involved: \_\_\_\_\_

What happened? (work being performed, etc.): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Personal protective equipment being used: \_\_\_\_\_

\_\_\_\_\_

Actions taken (first aid, clean-up, reporting, etc.): \_\_\_\_\_

\_\_\_\_\_

Recommendations for avoiding repetition: \_\_\_\_\_

\_\_\_\_\_

Department: \_\_\_\_\_ Supervisor signature: \_\_\_\_\_

Provider Advice: \_\_\_\_\_

\_\_\_\_\_

**This report is to be kept in student's Student Health Record in the University of Indianapolis Health and Wellness Center. Copy may be given to the student or his/her department as requested and consent given.**

**This form is to be filled out only in the case of a bloodborne pathogen exposure**

### **Student Exposure Checklist Form**

Print name of student: \_\_\_\_\_

Date the following items when done:

\_\_\_\_\_ If exposure happened during a clinical experience, first aid was completed and proper documentation was done according to the clinical site's and program's procedures.

\_\_\_\_\_ If exposure happened on campus, first aid was started and the student was sent to the Student Health Center. If the Student Health Center was closed, first aid was completed along with a checklist, and the student was sent to the Student Health Center as soon as possible.

\_\_\_\_\_ Briefly describe the incident and state what protection was worn (if any):

\_\_\_\_\_ What measures can be taken to keep this from happening again?

\_\_\_\_\_ Student given the Student Bloodborne Pathogen Exposure Form, has read it, will contact own physician, and has no further questions.

This report is to be kept in this student's Health Record in the University of Indianapolis Student Health Center

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Witness: \_\_\_\_\_ Date: \_\_\_\_\_

Approved 05/02/02 Revised 4/20/14 Reviewed 4/9/18

## Appendix E: Communicable Disease Policy

In order to protect the health and safety of all ATs the following Communicable Disease Guidelines were designed according to Centers for Disease Control and Prevention's (CDC) Guideline For Infection Control In Health Care Personnel, 1998. For the full report go to

[cdc.gov/infectioncontrol/guidelines/healthcare-personnel](http://cdc.gov/infectioncontrol/guidelines/healthcare-personnel)

Follow the guidelines below:

1. Hand washing and good personal hygiene techniques are two of the best measures to prevent communicable diseases. Hand washing should occur after contact with each patient. Additionally, hand washing is encouraged at all times when in contact with a patient or not. In the absence of immediate hand washing with soap and water, antibacterial hand sanitizer may be used. Hand washing with soap and water should occur as soon as possible, however.
2. If you become ill and suspect that you have a communicable disease (influenza, cold, chicken pox, etc....) please contact your Preceptor, Program Director, and Coordinator of Clinical Education. A good guideline to follow is if you have a fever you probably have a communicable disease.
3. If you are ill and are absent from class or your clinical assignment, you will need to report to the Student Health Center or to another licensed healthcare provider (MD, DO) for evaluation and treatment.
4. Notify other course instructors of your illness and anticipated date of return.

I have read and understand the Communicable Disease Policy.

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## **Appendix F: CHS Immunization Policy for Clinical Experiences, Practicums, Internships and Fieldwork**

Within the College of Health Sciences (CHS), many majors and programs include designated courses such as clinical experiences, internships, practicums, or fieldwork. These designated clinical experiences are a critical component of each academic program and may be a requirement of each program's accrediting body. These courses stand as independent courses and are typically either full-time or regularly scheduled part-time experiences within an outside organization. The organizations that host these activities may have very specific requirements for immunizations in place for individuals who are on their premises or working with their employees or customers/patients/clients, particularly if the site is part of a health care organization. Students are expected to follow the immunization policies that are in place at the assigned site. These requirements may include use of personal protective equipment and/or vaccination against infectious disease.

In order to participate in these experiences, students are obligated to meet the requirements of the assigned site including requirements for vaccinations. While clinical sites may provide opportunities to seek an exemption from vaccines and other requirements within their organization, there is no guarantee of the opportunity to seek an exemption or that an exemption request will be approved by the site. If an exemption request is not granted by the site, the student placement may be denied by the site. In this event, the University will work with the students to identify alternative placements or activities for the student that meet the required learning expectations of the academic program; however, this may result in a delay of the placement, slowing progression through the curriculum. Please note that when a vaccination requirement becomes standard and typical across clinical sites and the community, we may not be able to provide students with an alternate experience. If after three attempts to identify an alternate experience, a placement is not secured due to the student's inability to meet facility vaccination requirements, further placements will not be sought and the student will be unable to complete that experience.

In this case, students should discuss options with their course instructor, program director/chair or faculty advisor. Students taking this course as elective may be able to withdraw per University guidelines. Students for whom this is a required course may not be able to progress academically. There is no reasonable alternative for these designated, required learning experiences.

Date: 6-29-2021; 8-4-2021; 4-27-2022

## **Appendix G: Photo Release Form**

### **Photo Release Form**

I understand that the activities organized by the University of Indianapolis in which I participate may be documented in photos or digital recordings (audio or video).

I give my permission for the University to use these records for publicity, recruitment or educational purposes.

Printed name of participant: \_\_\_\_\_

Signature of participant: \_\_\_\_\_

## Appendix H: MSAT Program Policies Annual Agreement

By signing below I indicate that I have read, understand, and agree to abide by all of the policies and requirements of the University of Indianapolis MSAT outlined in the student handbook. My questions about these policies and requirements have been answered and I understand that the Program Director and/or Coordinator of Clinical Education can answer additional questions should they arise.

I am specifically aware of the program's requirements for graduation, retention and good standing.

- Maintain 3.0 GPA and earn a grade of "C" or higher in each course
- Proof of Health Insurance
- Bloodborne pathogen and HIPAA training
- NATA Membership by the end of the first week of classes, maintenance of membership
- Attendance at one professional conference over the course of the program
- Meet program Professional Development Units requirement

I am specifically aware of the program's policies about clinical education

- Clinical Education Attendance
- Dress code- at a minimum the UINDY policy applies to all clinical sites
- Name Tags must be worn during all clinical experiences
- Completion of Clinical Experience Projects in every practicum course
- Earn the minimum number of clinical hours for each clinical rotation
- Communicable Disease Policy and Blood Borne Pathogen Exposure procedures
- Cell phones should be limited to professional use only during clinical education

I am specifically aware of program's professionalism requirements and violation of the standards of professional practice will result in disciplinary action.

- I will behave in a manner that is professional in and out of the classroom
- I am expected to adhere to the BOC Standards of Professional Practice

I understand that any violation of the University's, Program's, Profession's and/or Clinical Site's policies may be subject to disciplinary action that may include suspension, probation or program dismissal.



#### Information Release

I authorize the ATP to provide information about me including my name, likeness, demographic and educational information to the Commission on Accreditation of Athletic Training Education (CAATE) and/or The Board of Certification as part of the program reporting requirements and/or credentialing eligibility verification requirements.

#### Photo & Video Release

I give my permission for the University of Indianapolis to record, publish or distribute for publication, my photograph, and/or biographical information for the purposes of University advertising and promotion.