OKLAHOMA STATE UNIVERSITY CENTER FOR HEALTH SCIENCES

Academic Success Handbook

medicine.okstate.edu/athletic-training

ATHLETIC TRAINING
OSU Center for Health Sciences

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OSU Center for Health Sciences

Table of Contents Page 2

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ATHLETIC TRAINING
OSU Center for Health Sciences

Welcome to the OSU-CHS Athletic Training Program. Congratulations on being accepted into a program that has a strong history of producing successful athletic trainers. Our faculty and staff are excited to work with quality students like yourself in the process of your development as a future certified athletic trainer.

Athletic training is a very rewarding and exciting profession that demands dedication and hard work without much public credit. As an Athletic Training Student, you will take part in the prevention, assessment, treatment, and rehabilitation of injuries in a variety of patients in various clinical settings. We challenge you to learn as much as you can each day whether it be in a class or while are at a clinical assignment. For our program to operate efficiently, MATS must work diligently, and assume all responsibilities that are delegated to them in a mature and responsible fashion. MATS' must work together and be part of a team. This is an important step in learning to function as part of an integral member of a healthcare team.

It is extremely important to familiarize yourself with the contents of this manual. This manual provides answers to many of your questions and describes the policies and procedures of our program in detail. Know this manual inside and out.

We believe the best method of learning is to combine the knowledge from your classes and clinical experiences in the learning environment. The opportunities to apply classroom knowledge at your clinical site are there, you just need to take advantage of them. Doing so will enhance your learning process tremendously and make your experience very positive and enjoyable. Like this profession, the program requires many hours of both classroom and clinical time. To succeed as a student, as well as in our program, you must learn to budget your time and prioritize your commitments and activities.

The MAT graduate program at OSU-CHS is unlike any other. You will get to know your fellow classmates better than any area of study on campus. Take advantage of this and treasure these moments together. This should be some of the best times of your life, so enjoy it and have fun!!

Go Pokes!!

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Program Director

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Athletic Training Program
Oklahoma State University Center for Health Sciences

Overview of the Profession

The Certified Athletic Trainer

The Athletic Trainer (AT) is a highly educated and skilled allied healthcare professional specializing in athletic healthcare of physically active people. In cooperation with physicians and other allied health personnel, the Athletic Trainer functions as an integral member of the healthcare team in secondary schools, colleges and universities, sports medicine clinics, industrial settings, professional sports programs and other healthcare settings.

Education

As of 2022, all Athletic Training Programs (ATPs) must be a Master's degree-granting program. The Commission on Accreditation of Athletic Training Education (CAATE) is the recognized accrediting body for our Athletic Training Program. The OSU Athletic Training Program received initial accreditation status in the Fall 2006 and currently has received accreditation through 2026. In 2015, the OSU ATP discontinued the undergraduate degree housed in the College of Education in Stillwater and created a Masters in Athletic Training housed in the School of Allied Health at the Center for Health Sciences in Tulsa.

Professional 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 programs include the acquisition of knowledge, skills and clinical abilities along with a broad scope of foundational behaviors of professional practice. Students complete an extensive clinical learning requirement that is embodied in the clinical integration proficiencies (professional, practice-oriented outcomes) as identified in the Athletic Training Education Competencies.

Students must receive formal instruction in the following specific subject matter areas identified in the Competencies:

- Risk Reduction, Wellness and Health Literacy
- Assessment, Evaluation, and Diagnosis
- Critical Incident Management
- Therapeutic Intervention
- Health Administration and Professional Responsibility

Athletic Training Students also participate in extensive clinical affiliations with the active population under the direct supervision of a BOC Certified Athletic Trainer (ATC®) or appropriate healthcare provider (aka. Preceptor). These five fully immersive clinical rotations provide the student the opportunity to gain experience with a diverse group of patient populations to prepare them for the wide array of career options available following graduation.

Certification

Certified Athletic Trainers have satisfactorily fulfilled the requirements for certification established by the Board of Certification, Inc. (BOC). BOC certification is recognized by the National Commission for Certifying Agencies and is currently the only accredited certification program for Athletic Trainers. The certification examination administered by BOC evaluates a candidate's knowledge, skills and abilities required for competent performance as an entry-level Athletic Trainer. Candidates must complete an accredited Athletic Training Program and pass the BOC certification examination; at which time the BOC will designate the credentials "ATC®" to the successful candidate.

Students become eligible for BOC certification through an athletic training degree program accredited by the Commission on Accreditation of Athletic Training Education (CAATE). Students engage in rigorous classroom study and clinical education in a variety of practice settings such as high schools, colleges/universities, hospitals, emergency departments, physician offices, occupational settings, and healthcare clinics over the course of the degree program. Students enrolled in their final semester are eligible to apply for the BOC exam.

For more information visit the National Athletic Trainers' Association at www.nata.org and the Board of Certification, Inc. at www.bocatc.org.

NATA Code of Ethics

The Code of Ethics of the National Athletic Trainers' Association has been written to make the membership aware of the principles of ethical behavior that should be followed in the practice of Athletic Training. The primary goal of the Code is to ensure the highest quality of healthcare administered. The Code presents standards of behavior that all members should strive to achieve. The principles cannot be expected to cover all specific situations that may be encountered by the practicing Athletic Trainer but should be considered representative of the spirit with which Athletic Trainers should make decisions. The principles are written generally, and the circumstances of a situation will determine the interpretation and application of a given principle and the Code as a whole. Whenever there is a conflict between the Code and legality, the laws prevail. The guidelines set forth in this Code are subject to continual review and revision as the Athletic Training profession develops and changes.

- **Principle 1**: Members shall respect the rights, welfare and dignity of all individuals.
- **Principle 2**: Members shall comply with the laws and regulations governing the practice of Athletic Training.
- **Principle 3**: Members shall maintain and promote high standards in their provision of services.
- **Principle 4**: Members shall not engage in conduct that could be construed as a conflict of interest or that reflects negatively on the profession.

For a complete copy of the ethics and information reporting a violation of ethics, visit the NATA web page.
www.nata.org/sites/default/files/nata_code_of_ethics_2022.pdf

BOC Practice Standards

I. Practice Standards

Preamble- The Practice Standards (Standards) establish essential practice expectations for all athletic trainers. Compliance with the Standards is mandatory.

The Standards are intended to:

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

The Standards are NOT intended to:

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

The BOC does not express an opinion on the competence or warrant job performance of credential holders; however, every athletic trainer and applicant must agree to always comply with the Standards.

Standard 1: Direction

The athletic trainer renders service or treatment under the direction of a physician.

Standard 2: Prevention

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

Standard 3: Immediate Care

The athletic trainer provides standard immediate care procedures used in emergency situations, independent of the setting.

Standard 4: Clinical Evaluation and Diagnosis

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

Standard 5: Treatment, Rehabilitation and Reconditioning

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

Standard 6: Program Discontinuation

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

Standard 7: Organization & Administration

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

II. Code of Professional Responsibility

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

Code 1: Patient Responsibility

The BOC-certified athletic trainer or applicant:

1.1 Renders quality patient care regardless of the patient's race, religion, age, sex, nationality, disability, social, or economic status, or any other characteristic protected by law.

1.2 Protects the patient from harm, acts always in the patient's best interests, and is an advocate for the patient's welfare.

1.3 Takes appropriate action to protect patients from athletic trainers, other healthcare providers or athletic training students who are incompetent, impaired, or engaged in illegal or unethical practice.

1.4 Maintains the confidentiality of patient information in accordance with applicable law.

1.5 Communicates clearly and truthfully with patients and other persons involved in the patient's program, including, but not limited to, appropriate discussion of assessment results, program plans and progress.

1.6 Respects and safeguards his or her relationship of trust and confidence with the patient and does not exploit his or her relationship with the patient for personal or financial gain.

1.7 Exercises reasonable care, skill and judgment in all professional work.

Code 2: Competency

The BOC-certified athletic trainer or applicant:

2.1 Engages in lifelong, professional and continuing educational activities.

2.2 Participates in continuous quality improvement activities.

2.3 Complies with the most current BOC recertification policies and requirements.

Code 3: Professional Responsibility

The BOC-certified athletic trainer or applicant:

3.1 Practices in accordance with the most current BOC Practice Standards.

3.2 Knows and complies with applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training.

3.3 Collaborates and cooperates with other healthcare providers involved in a patient's care.

3.4 Respects the expertise and responsibility of all healthcare providers involved in a patient's care.

3.5 Reports any suspected or known violation of a rule, requirement, regulation or law by him/herself and/or by another athletic trainer that is related to the practice of athletic training, public health, patient care or education.

3.6 Reports any criminal convictions (with the exception of misdemeanor traffic offenses or traffic ordinance violations that do not involve the use of alcohol or drugs) and/or professional suspension, discipline or sanction received by him/herself or by another athletic trainer that is related to athletic training, public health, patient care or education.

3.7 Complies with all BOC exam eligibility requirements and ensures that any information provided to the BOC in connection with any certification application is accurate and truthful.

3.8 Does not, without proper authority, possess, use, copy, access, distribute, or discuss certification examinations, score reports, answer sheets, certificates, certificant or applicant files, documents, or other materials.
3.9 Is candid, responsible and truthful in making any statement to the BOC, and in making any statement in connection with athletic training to the public.
3.10 Complies with all confidentiality and disclosure requirements of the BOC.
3.11 Does not take any action that leads, or may lead, to the conviction, plea of guilty or plea of nolo contendere (no contest) to any felony, or to a misdemeanor related to public health, patient care, athletics, or education. This includes but is not limited to: rape; sexual abuse of a child or patient; actual or threatened use of a weapon of violence; the prohibited sale or distribution of a controlled substance, or its possession with the intent to distribute; or the use of the position of an athletic trainer to improperly influence the outcome or score of an athletic contest or event or in connection with any gambling activity.
3.12 Cooperates with BOC investigations into alleged illegal or unethical activities. This includes but is not limited to, providing factual and non-misleading information and responding to requests for information in a timely fashion.
3.13 Does not endorse or advertise products or services with the use of, or by reference to, the BOC name without proper authorization.

Code 4: Research

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

Code 5: Social Responsibility

The BOC-certified athletic trainer or applicant:
5.1 Uses professional skills and knowledge to positively impact the community.

Code 6: Business Practices

The BOC-certified athletic trainer or applicant:
6.1 Refrains from deceptive or fraudulent business practices.
6.2 Maintains adequate and customary professional liability insurance.
http://www.bocAT.org/images/stories/resources/boc_standards_of_professional_practice_1401bf.pdf

OSU-CHS Athletic Training Curriculum

Center for Health Sciences
School: Allied Health
Department: Athletic Training
Degree: Master of Athletic Training

Athletic Training Program Mission

Prepare individuals to become highly competent and independent clinicians who will enhance the quality of patient healthcare and advance the profession of athletic training through the application of evidence-based practice and translational research. Our MAT program instills critical thinking, problem-solving, ethical reasoning abilities and interpersonal skills promoting lifelong learning and an enrichment in the quality of lives for individuals in diverse settings.

Goals

The charge of the Oklahoma State athletic training curriculum is to provide a comprehensive, multifaceted education coupled with a clinical foundation to prepare future healthcare professionals for a career in athletic training. The program emphasizes evidence-based practice and the application of best practices that can transform healthcare. Graduates of the program possess an understanding of the research process and recognize the importance of applying evidence-based research to clinical practice. Our goals are to prepare graduates to apply a wide variety of specific healthcare skills and knowledge within each of the following domains: Risk Reduction, Wellness and Health Literacy; Assessment, Evaluation and Diagnosis; Critical Incident Management; Therapeutic Intervention; Health Administration and Professional Responsibility.

Program Goals

1. Develop proficient, evidence-based student-level clinicians who can contribute to the interdisciplinary team
    a. Annually exceed the national first-time pass rate as well as the overall pass rates for the BOC exam
    b. Examine student clinical education performance as determined by preceptor evaluations
    c. Students demonstrate didactic and clinical proficiency
    d. Demonstrate proficiency in formulating a focused clinical question, surveying scientific literature to gather relevant empirical data, synthesizing outcomes to determine a strength of recommendation taxonomy, and thus a clinical bottom line
    e. Demonstrates clinical application of evidence-based principles
    f. Demonstrates the ability to function effectively within an interdisciplinary healthcare team
    g. Annually exceeds the three-year aggregate graduation rate of 75%
    h. Annually exceed the three-year aggregate initial employment rate of 70%

2. Guide and nurture the inquisitive nature of students in the domains of AT
    a. Students will demonstrate competency in Risk Reduction, Wellness, and Health Literacy
    b. Students will demonstrate competency in Assessment, Evaluation, and Diagnosis
    c. Students will demonstrate competency in Critical Injury Management
    d. Students will demonstrate competency in Therapeutic Intervention
    e. Students will demonstrate competency in Health Administration and Professional Responsibility

3. Assist in the progressive development of the AT skillset using best practices and practical engagement via contemporary clinical opportunities for continuous, immersive student learning
    a. Utilize NATA position and best practices statements to inform best practices within clinical rotations
    b. Demonstrates progressive clinical skill development throughout the injury pathology continuum
    c. Engage in the delivery of interprofessional healthcare in diverse clinical settings and patient populations to transition to autonomous clinical practice
    d. Utilize low and high-fidelity simulations and standardized patients to expose students to a variety of conditions that may or may not be experienced in the clinical setting
    e. Students engage in five 8-16 week uninterrupted, clinically diverse rotations tailored to develop an autonomous clinician

4. Embody the shared professional values and advocacy of AT
    a. Students demonstrate advocacy for the profession for future professionals
    b. Students demonstrate advocacy for the profession with the community
    c. Students demonstrate advocacy for the profession with interdisciplinary teams
    d. Students appreciate the importance of professional advocacy
    e. Students are introduced and gain appreciation for professional values while completing clinical rotations

Structure, Policy, and Procedures of the OSU Athletic Training Program

The OSU-CHS Athletic Training Program is currently accredited by the Commission on Accreditation of Athletic Training Education (*CAATE*). The OSU Athletic Training Program provides valuable experience to students intending on a career in Athletic Training. The experiences and exposure that Oklahoma State University- CHS provides are a solid base for individuals entering the discipline of Athletic Training. Oklahoma State University-CHS provides students with exposure to a variety of clinical settings while preparing them for certification by the Board of Certification (BOC). Oklahoma State University-CHS offers a competitive, two-year educational program that allows all students to obtain clinical experience with a large variety of patient populations and affiliated healthcare organizations. Athletic Training students at OSU-CHS progress through several levels of competency during their academic and practical experience. Students will acquire a diverse variety of clinical experiences during their matriculation at OSU-CHS under the direction of Preceptors, including BOC Certified Athletic Trainers and a variety of other healthcare professionals.

Admission Into the Athletic Training Program

Any individual wishing to pursue formal admission into the Athletic Training Program and meets the requirements (earned bachelor's degree or on track to complete the specified prerequisite course work, in compliance with the grade point criteria, satisfactorily completed the observation hours, and required application paperwork) must submit a formal application to the program. Application review begins after the initial application review deadline of December 15, but all applications must be submitted no later than February 1 of his/her prospective year. Upon review of application materials, all qualified individuals will participate in a formal interview with members of the Athletic Training faculty and staff, either in person or via electronic media. Final selection for admission into the Athletic Training Program is determined by evaluation of all documentation. Students are provided these criteria via the OSU-CHS ATP website. Students are admitted each year as determined by a faculty review of application materials and the interview. Students will be notified of their acceptance/rejection by March 15 or as soon as the selection committee has completed the evaluation process. Student's acceptance is contingent upon the student complying with the curriculum's policies and procedures, meeting the technical standards, successfully completing the physical assessment (more details in the following sections), and obtaining all health-related immunizations required of healthcare professionals. The maximum number of students that will be admitted to each cohort is 25. Students not accepted may reapply with updated application materials the following year. Those not accepted may NOT enroll in any Athletic Training coursework. If the student is planning to reapply to the Professional Master of Athletic Training Program, they are strongly encouraged to improve on general requirements and overall GPA.

Oklahoma State University does not discriminate based upon age, sex, race, nationality, physical handicap, or religious preference. Students are required to physically and mentally be able to perform the tasks necessary to the daily operations of a healthcare facility and duties within the scope of Athletic Training.

Required Pre-Requisite Coursework

Students who wish to apply must have a minimum overall GPA of 2.75, a 3.0 GPA in their final four semesters, and a "B" in all the required coursework. The program will accept up to two "C" grades in biology, chemistry, physics, and statistics.

Pre-requisite Coursework (OSU Course or Equivalent)		
Biology	Biomechanics	General Chemistry
Anatomy	Human Physiology	General Physics
Medical Terminology	Statistics	Principles of Nutrition
Physiology of Exercise	Psychology	

Extracurricular Involvement

Athletic training students involved in extracurricular activities will not receive exceptions to course sequencing. The Athletic Training faculty and staff are committed to encouraging students and assisting them in taking advantage of the rich co-curricular opportunities available on and off campus. However, the first responsibility of the faculty is to ensure the student graduates on time, fulfills all requirements for the Athletic Training Program, and gains sufficient quality clinical experience to develop into a skilled healthcare professional. The following guidelines are designed to help accomplish these purposes.

Technical Standards History and Rationale

The landmark Americans with Disabilities Act of 1990, P.L. 101-336 ("ADA or "the Act"), enacted on July 26, 1990, provides comprehensive civil rights protections to qualified individuals with disabilities. The ADA was modeled after Section 504 of the Rehabilitation Act of 1973, which marked the beginning of equal opportunity for persons with disabilities. As amended, Section 504 "prohibits all programs or activities receiving federal financial assistance from discrimination against individuals with disabilities who are 'otherwise qualified' to participate in those programs." With respect to post-secondary educational services, an "otherwise qualified" individual is a person with a disability who meets the academic and technical standards requisite to admission or participation in the recipient's education program or activity."

Under the Americans with Disabilities Act, Title II and Title III apply to students with disabilities and their requests for accommodations. Title II covers state colleges and universities. Title III pertains to private educational institutions; it prohibits discrimination based on disability in places of "public accommodations," including undergraduate and postgraduate schools.

Given the intent of Section 504 and the ADA, the development of standards of practice for a profession, and the establishment of essential requirements to the student's program of study, or directly related to licensing requirements, is allowable under these laws. In apply Section 504 regulations, which require individuals to meet the "academic and technical standards for admission," the Supreme Court has stated that physical qualification could lawfully be considered "technical standard(s) for admission."

Institutions may not, however, exclude an "otherwise qualified" applicant or student merely because of a disability, if the institution can reasonably modify its program or responsibilities to accommodate the applicant or student with a disability. However, an institution need not provide accommodations or modify its program of study or responsibilities such that (a) would "fundamentally alter" and/or (b) place

an “undue burden on” the educational program or academic requirements and technical standards which are essential to the program of study.

Technical Standards for Admission

The Athletic Training Program at Oklahoma State University- CHS is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The technical standards set forth by the Athletic Training Program establish the essential qualities considered necessary for students admitted to the program to achieve the knowledge, skills, and competencies of an entry-level certified athletic trainer, as well as meet the expectations of the programs’ accrediting agency. The following abilities and expectations must be met by all students admitted to the Athletic Training Program. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not be admitted into the program. Compliance with the program’s technical standards does not guarantee a student’s eligibility for the OSU- CHS Athletic Training Program or BOC® certification exam.

Candidates for selection to the Athletic Training Program must demonstrate:

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

Copies of the Technical Standard form for review and student signature can be found in the “Student Forms” section of the Handbook and on the OSU- CHS Athletic Training Program Website.

*These Technical Standard were adopted from the NATA Education Council.

Physical Capabilities Assessment

Prior to acceptance into the ATP, all Athletic Training Students must complete a health history, physical exam, current immunization, and be determined by a physician that they meet the Technical Standards for Admission. If the physician identifies a student as having actual or potential mental or psychological difficulties in meeting the standards established by the program, the student will have access to a healthcare provider to determine the implication of such difficulties and completing the program. Additional components of the health evaluation will include immunization, prior injuries and current existing conditions. All records will be kept confidential. The original copy will be kept on file at the students' healthcare provider and an electronic verification of health status will be kept in the student's file in the program director's locked office.

Should at any point in the program, a student need to pause or disrupt their matriculation through the program due to a physical condition (i.e. illness, injury, pregnancy), family medical leave, or military leave, the student will be required to complete the physical capabilities assessment prior to resuming the program. The program will evaluate on a case-by-case basis if multiple physical capabilities assessments will be required.

NOTE – Physical capability and health history forms will be provided to all students admitted into the formal portion of the Athletic Training Program.

Academic Progression Through the Master of Athletic Training Degree

The OSU-CHS Athletic Training Program is a two-year progressive curriculum. Each Athletic Training student MUST follow the curricula sequence below (check the website for the most current information). This sequence is based on the idea of learning over time and technical skill acquisition to clinical competency. To help ensure these concepts, students must receive a "B" or better in all Athletic Training classes, and abide by the Program Retention policy, acquire sufficient clinical experience, and demonstrate clinical mastery of specific competencies and proficiencies via standardized patient practical exams before they will be allowed to progress to the next level within the program. Should a student's sequence be interrupted for any reason (illness, injury, military leave, pregnancy, family medical leave, etc), that individual must stop all progression in the program coursework and meet with the Athletic Training Program faculty to determine the course of action. An individualized plan will be created based upon discussions between the faculty, students, medical director, and CHS administration. The student may resume the program and coursework no earlier than the next offering of the course in the next academic year. See the Curriculum GPA Criteria in the Student Form Section. Upon the successful completion of the curriculum and at the recommendation of the program faculty, students will be granted the Master of Athletic Training degree.

Professional Master of Athletic Training Curriculum

Summer I
5103 Emergency Management in Athletic Healthcare
5183 Injury Prevention and Management
5122 Clinical Anatomy for Allied Healthcare

Fall I
5223 Therapeutic Modalities
5233 Clinical Evaluation and Diagnosis of the Lower Extremity
5243 Therapeutic Exercise of the Lower Extremity
5202 Athletic Training Practicum I

Spring I
5315 Clinical Evaluation, Diagnosis, Pathology, and Pharmacology of Non-Orthopedic Medical Conditions
5333 Clinical Evaluation and Diagnosis of the Upper Extremity
5343 Therapeutic Exercise of the Upper Extremity
5302 Athletic Training Practicum II

Summer II
5412 Radiography Evaluation and Assessment
5573 Athletic Healthcare Administration
5402 Athletic Training Practicum III

Fall II
5481 Advanced Athletic Training Techniques
5553 Research Evaluation and Application
5583 Psychosocial Strategies in Athletic Healthcare
5443 Clinical Diagnosis, Evaluation, and Therapeutic Exercise of the Head and Spine
5502 Athletic Training Practicum IV

Spring II
5602 Athletic Training Practicum V
5000 Research & Thesis (3 credit hours)

Tentative In-Class Schedule

Summer I (June – July)					
June	Monday	Tues	Wednesday	Thursday	Friday
8:00-10:00	5103 Emerg Lecture	5103 Emerg Lecture	5103 Emerg Lecture	5103 Emerg Lecture	Open Lab or TBD
10:30-12:30	5103 Emerg Lab	5103 Emerg Lab	5103 Emerg Lab	5103 Emerg Lab	
1:30-4:00	Anatomy	Anatomy	Anatomy	Anatomy	
July					
8:00-10:00	5183 Inj P&M Lecture	5183 Inj P&M Lecture	5183 Inj P&M Lecture	5183 Inj P&M Lecture	Open Lab or TBD
10:30-12:30	5183 Inj P&M Lab	5183 Inj P&M Lab	5183 Inj P&M Lab	5183 Inj P&M Lab	
1:30-4:00	Anatomy	Anatomy	Anatomy	Anatomy	

Fall I (Aug - Oct)					
	Monday	Tues	Wednesday	Thursday	Friday
8:00-10:00	5233 Eval Lecture	5243 Ther Ex Lecture	5233 Eval Lecture	5243 Ther Ex Lecture	Open Lab or TBD
10:30-12:30	5233 Eval Lab	5243 Ther Ex Lab	5233 Eval Lab	5243 Ther Ex Lab	
1:30- 3:30	5223 Modalities	5223 Modalities	5223 Modalities	5223 Modalities	

Spring I (Jan - March)					
	Monday	Tues	Wednesday	Thursday	Friday
8:00-10:00	5333 Eval Lecture	5343 Ther Ex Lecture	5333 Eval Lecture	5343 Ther Ex Lecture	Open Lab or TBD
10:30-12:30	5333 Eval Lab	5343 Ther Ex Lab	5333 Eval Lab	5343 Ther Ex Lab	
1:30-4:30	5315 Non-Ortho	5315 Non-Ortho	5315 Non-Ortho	5315 Non-Ortho	

Summer II (June – July)					
	Monday	Tues	Wednesday	Thursday	Friday
8:00-10:00	Variable times, see syllabus. 5412 Radiology 5573 Athletic Healthcare Administration 5402 AT Practicum				
10:30-12:30					
1:30-4:30					

Fall II (Oct – Dec)					
	Monday	Tues	Wednesday	Thursday	Friday
8:00-9:30	5583 Psychosoc	5583 Psychosoc	5583 Psychosoc	5583 Psychosoc	5481 Advanced
10:00-12:00	5553 Research	5443 Spine Lecture	5553 Research	5443 Spine Lecture	Open Lab or TBD
1:00-3:00		5443 Spine Lab		5443 Spine Lab	

Clinical Experiences in Athletic Training

Once admitted into the Master of Athletic Training Program, all Athletic Training Students must complete clinical experiences. These clinical and supplemental experiences provide a logical progression of increasingly complex and autonomous patient-care and client-care experiences and will be under the direct supervision of a BOC® Certified Athletic Trainer or qualified healthcare provider who is a verified OSU-CHS Athletic Training Program Preceptor. The majority of the student clinical experience will come under the supervision of a Certified Athletic Trainer; however, certain clinical rotations may be supervised by a qualified healthcare provider. Potential sites include high schools, junior colleges, Division I, II, or III colleges, clinics and/or hospitals, and military, industrial and other healthcare settings. Additionally, each student will be assigned a non-orthopedic rotation consisting of several areas within healthcare facilities. During clinical experiences, students are assigned to a preceptor, not a specific sport or patient population, to gain clinical experience; they are not considered workforce. The rotations will be assigned jointly by the Director of Clinical Experience and the Program Director. These rotations will ensure that each student has the opportunity to gain experience with each of the following:

1. Clients/patients throughout the lifespan (i.e., pediatric, adult, elderly)
2. Individuals of different sexes
3. Patients from different socioeconomic statuses
4. Individuals from varying levels of activity (i.e., competitive and recreational, individual and team activities, high- and low-intensity activities)
5. Individuals who participate in non-sport activities (i.e. military, industrial, occupational, leisure activities, performing arts)

Additionally, every effort will be made to ensure that each student gains experience in as many different settings as possible. This helps ensure that students can make intelligent and informed decisions regarding future career plans in Athletic Training.

Information on OSU-CHS Athletic Training Program

56 credit hours of coursework incorporating the AT Educational Competencies in instruction and assessment.

Five full immersion clinical educational rotations will be completed throughout the curriculum. A clinical immersion is a practice-intensive experience that allows the student to experience the totality of care provided by athletic trainers. Students will participate in the day-to-day and week-to-week role of an athletic trainer for a rotation of 8-16 weeks.

OSU CHS AT Program Clinical Education Rotation Guidelines

Practicum Length	Clinical Rotation Focus	Basic Requirements
8 Weeks	**Traditional Athletic Populations** eg. JUCO/ High School *(High Risk/ Equipment Intensive* *eg. Football, hockey, lacrosse, motor cross, skiing, extreme sports suggested)*	• AT Supervision • Multiple Sports • Multiple Genders • High risk for serious injury and emergent situations.
8 weeks	**Non-traditional populations** eg. Rehabilitation facility (AT Based), Military, Performing Arts, Industrial	• AT or physician supervision -Patient population outside of traditional athletic teams.
8 Weeks	**Non-Orthopedic** OSU Medical Center	• Healthcare provider supervision. **Required Experiences** • Osteopathic Manipulative Med • Emergency Department • Family Medicine • Radiology • Surgery • Simulation Center
8 Weeks	Career Exploration	• AT Supervision • Opportunity to experience potential future patient populations
16 Weeks	**Career Track**	• AT Supervision • Should match students desire for career direction.

General Guidelines

- Each rotation should occur in one location, although experience at multiple facilities, such as a college or hospital campus, is possible.
- Clinical rotation schedules are the student's primary responsibility and should take precedence over all other extracurricular activities, including vacations, work, etc. Students in general should be at their clinical education site when their preceptor is engaged in patient and/or healthcare activities.
- Gaining experience with preceptor co-staff and colleagues is encouraged, but the primary focus during rotation is the primary preceptor.
- Although interdisciplinary experiences are encouraged, the primary preceptor in all rotations is responsible for student performance evaluation except for the non-orthopedic rotation. In some instances, a healthcare professional from another field can serve as the primary preceptor in a non-traditional setting.
- It is acceptable for experiences outside of the typical scope of the rotation (ie, clinics, events, surgery, etc.) as long as they remain under the supervision of the primary preceptor.

- Practical “hands-on” experience with patients is expected in all rotations as deemed appropriate by the preceptor. It is understood that some of the experiences with the non-orthopedic rotation may be observational in nature but should not be the focus.
- Scheduled events in practicum courses and online hybrid courses, such as practical exams and online course activities, will be limited but will be mandatory and should be accounted for in rotation scheduling.
- No previous sites that the student experienced, including high school and undergraduate experiences.
- Previous supervisors who are then employed at a different site are considered on a case-by-case basis.
- Clinical site must have a 1:1 preceptor-to-MAT student ratio.
- If two MAT students are at the same site, they must be assigned to different facilities
- All preceptors must have a minimum of 3 years of AT experience.
- No college and professional team rotations with extensive travel will be considered.
- Universities that host their own MAT program will be considered, although they must gain permission.
- No “internships” that occur during curriculum classes will be allowed.

Developing a Clinical Education Plan

MAT students must identify a preceptor two (2) months prior to the beginning of any respective rotation.

1. Draft/ develop your professional resume & letter of interest.
2. Begin to identify potential preceptors and sites as early as possible. Identify at least one alternative option for each rotation in case the initial option does not fit or is not appropriate.
   - https://medicine.okstate.edu/athletic-training/clinical-sites.html
   - https://aated.org/clinical-experience-sites/
   - https://gather.nata.org/volunteeropportunities
3. Meet with the director of clinical education with the plan before sending an interest email to the preceptor (below).
4. Initial contact with any future potential preceptors can occur at any point in the program. Be sure to indicate when the future rotation will take place. Please note that initiating contact with a potential preceptor does not guarantee a rotation; the ATP determines the approval.
5. Preceptor contact information must be provided to the director of clinical education so that affiliation contracts can be completed before rotation.
6. Schedule a meeting with the preceptor 2-3 weeks before the rotation to develop a schedule & review orientation policies.

Sample Email to Potential Preceptor

TIPS:

You can modify this email to fit the preceptor you are contacting. You should add a personal touch if it seems appropriate.

Always research the preceptor and site you contacting so that you have the correct information and it does not seem like a generic "copy and paste" request.

Add completed coursework as each rotation window progresses.

Hello Mr. / Ms./ Dr. _____, ***(double check for appropriate title)***

My name is _____ and I am currently a _____ year graduate student in the professional master's degree in Athletic Training (MAT) at Oklahoma State University Center for Health Sciences. I am hoping to identify a preceptor to supervise a clinical rotation with a certified Athletic Trainer ***(modify if different professional)*** in the high school setting ***(modify to site)*** from ____/____/_____ to ____/____/_____. This rotation is fully immersive allowing me to travel to any location to complete the entire 8 weeks ***(Note that Spring 2= 16 weeks)*** of full daily schedules. My program started in the summer of 202__ and I will have completed the following courses:

- Emergency Management in Athletic Healthcare
- Injury Prevention
- Gross Anatomy
- Therapeutic Modalities
- Clinical Evaluation and Diagnosis of the Lower Extremity
- Therapeutic Exercise of the Lower Extremity
  (Add courses as completed)

Please let me know if you would be interested in discussing this opportunity further or if you have any questions regarding this request.

I can be reached via email or cell _____.

I am including my director of clinical education in this email as you may contact him as well for any specific questions regarding the program.

As a professional courtesy, I will follow up with another email in one week if your schedule does not allow for a conversation at an earlier time.

Thank you for your time and attention,

Student Name
MAT-I

Practicum Length & Theme	Clinical Rotation Possibilities
Fall I- 2nd 8 Weeks OR Fall II 1st 8 weeks **Traditional Athletic Populations OR Equipment Intensive** eg. Football, hockey, lacrosse, motor cross, skiing, extreme sports eg. JUCO/ High School	Option A:_____ Contact: _____ Option B:_____ Contact: _____ Option C:_____ Contact: _____
Spring I- 2nd 8 weeks OR Fall II 1st 8 weeks **Non-traditional populations** eg. Rehabilitation facility, Military, Performing Arts, Industrial (AT or physician supervised)	Option A:_____ Contact: _____ Option B:_____ Contact: _____ Option C:_____ Contact: _____
Summer II- 8 Weeks **Non-Orthopedic** (Physician and healthcare professional supervised)	***OSU Medical Center***
MAT 5502 **Fall II- 1st 8 Weeks** **Traditional Athletic Populations OR Equipment Intensive** (AT Supervised)	Option A:_____ Contact: _____ Option B:_____ Contact: _____ Option C:_____ Contact: _____
Spring II- Weeks 1-15 **Career Track** (AT Supervised)	Option A:_____ Contact: _____ Option B:_____ Contact: _____ Option C:_____ Contact: _____

Practicum Courses

The following practicum courses address competency in skills and knowledge learned in the courses taken in the previous semesters.

MAT 5202

MAT 5103 Emergency Management
MAT 5183 Injury Prevention and Management
MAT 5233 Clinical Examination and Diagnosis of the Lower Extremity
MAT 5243 Therapeutic Exercise of the Lower Extremity
MAT 5223 Therapeutic Modalities
American Heart Association BLS or equivalent skills

MAT 5302

All skills, evidence, and specific theoretical concepts from preceding courses in addition to:
MAT 5333 Clinical Evaluation and Diagnosis of the Upper Extremity
MAT 5343 Therapeutic Exercise of the Upper Extremity
MAT 5315 Clinical Evaluation, Diagnosis, Pathology, and Pharmacology of Non-Orthopedic Conditions

MAT 5402

All skills, evidence, and specific theoretical concepts from preceding courses

MAT 5502

All skills, evidence, and specific theoretical concepts from preceding courses in addition to:
MAT 5412 Radiography Evaluation and Assessment
MAT 5573 Athletic Healthcare Administration

MAT 5602

All skills, evidence, and specific theoretical concepts from preceding courses in addition to:
MAT 5553 Research Evaluation and Assessment
MAT 5583 Psychosocial Strategies in Athletic Healthcare
MAT 5443 Clinical Diagnosis, Evaluation, and Therapeutic Exercise of the Head and Spine
MAT 5481 Advanced Athletic Training Techniques

Practicum Practical Exams

Towards the end of 5202, 5302, 5502, and 5602 courses, students will be assessed for skill competency and contingent on matriculation to the next phase of the program. Students who do not earn a “Pass” or better will be provided one additional opportunity to demonstrate their competency. Second attempts lower than a “Pass” will result in the student retaking that course the following year, and is not allowed to matriculate in the curriculum.

Responsibilities of the MATS

When the MATS is assigned to a Preceptor, all personnel must understand that the MATS is in the clinical education setting to learn under direct supervision, not simply to provide a service to patients and support personnel or act as a replacement for a full-time clinician. The responsibilities of the MATS and Preceptors are as follows:

The MATS should:

1. Communicate with the Preceptor regularly regarding daily clinical experience opportunities.
2. Practice competencies with Preceptor and peers to develop proficiency.
3. Apply critical thinking, communication, and problem-solving skills.
4. Be prepared for proficiency assessments daily.
5. Obtain ATP clinical experiences during scheduled direct patient care supervision by the Preceptor.
6. Perform skills on patients only once assessed on the skill in the didactic course/practicum course/ preceptor instruction or completed relevant competencies.
7. Be willing to learn about variations in applying the same technique or skill, even if it differs from what was instructed in class or a previous rotation.
8. Provide honest feedback on the ATP clinical experience through the Self-Evaluation, Preceptor Evaluation, and Clinical Evaluations.

The Preceptor should:

1. Accept the MATS assigned to his or her facility without discrimination.
2. Schedule MNATS for an appropriate clinical instruction and actual patient care.
3. Provide direct supervision of the MATS in the context of direct patient care, which is defined as direct visual and auditory interaction between the MATS and the Preceptor.
4. Allow the MATS an opportunity to answer his or her own questions using critical thinking and problem-solving skills.
5. Provide supervised clinical opportunities for the MATS to actively participate in patient care related to the clinical course and clinical experience level of the MATS.
6. Allow the MATS to only perform skills on patients once assessed on the skill by the preceptor or in the didactic/clinical course.
7. Guide the MATS in using communication skills and developing professional and ethical behaviors.
8. Assess the MATS on competencies and clinical proficiencies related to the clinical course and clinical experience level of the MATS.
9. Provide ongoing feedback to assist the ATS in developing proficiency in skills related to the clinical course and clinical experience level of the MATS.

Clinical Experience Contract

Prior to the beginning of each clinical experience rotation students are responsible for obtaining a clinical experience contract and scheduling a meeting with their assigned Preceptor. At that time, a schedule will be agreed upon and signed by the student and the Preceptor indicating a common understanding between the two parties. A copy will be delivered to the director of clinical education, the Preceptor and an electronic version will be kept in the student's electronic file. Any deviation from the contractual agreement will be addressed according to OSU-CHS Athletic Training Program Policy. Students are required to schedule an appropriate amount of formal clinical experience per week as defined below in "Clinical Hours". A copy of the contract can be found on the next page.

Documentation of Clinical Experience

Time spent at a clinical site must be recorded on the appropriate links each day. Clinical record links are located online via practicum courses. Clinical experience hours are to be rounded off to fourths and must be verified by either your supervising Preceptor or an appropriate affiliated Preceptor regularly. Students must be specific when referring to the activity engaged in for that specific day. In accordance with OSU-CHS Athletic Training Program policy, travel time to and from an away event may not be included in the documentation of your practical hours.

Clinical experiences in Athletic Training are a required component of the Athletic Training Student's education and will be a scheduling priority; outside work, activities, or obligations, excluding personal or family obligations, will **not** be given priority during the scheduling process. The clinical experience will take place during weekday afternoons, evenings and weekends as required by the preceptor.

Clinical Hours Requirements

Each clinical rotation/practicum course has a clinical education hours requirement associated with it. Students in general should be at their clinical education site when their preceptor is there with one day every seven off. Below are the hours requirements for each clinical rotation.

MAT 5202	**MAT 5302**	**MAT 5402**	**MAT 5502**	**MAT 5602**
Minimum 200	Minimum 200	Minimum 100	Minimum 200	Minimum 560
Maximum 750	Maximum 750	Maximum 300	Maximum 750	Maximum 1000

If a student does not meet the minimum number of required hours at their clinical rotation (MAT 5602= 560 hours), we will issue an incomplete for the practicum course and you will be required to extend your clinical rotation until you reach the minimum at which point your grade will be replaced with your actual earned point total. Students will not be allowed to matriculate to the next coursework (didactic or clinical) until the minimum clinical education hours are completed. Should this occur, an individualized continuation contract will be created to delineate when the student will be allowed to resume coursework.

Clinical Rotation Assessment

Evaluations are a crucial part of the academic process, both for the program and the MATS. Students and preceptors are required to complete the following evaluations, which include but are not limited to:

- MATS self-evaluations
- MATS evaluations of the preceptor
- MATS evaluations of the Clinical Site
- Preceptor evaluations of the MATS

Evaluations occur twice during the semester. Once at the mid-term, and at the completion of the semester via online survey media.

Remuneration Policy

No student shall receive payment for clinical hours completed during each practicum course. Any student found receiving a “salary” from a clinical site will receive a clinical hour’s suspension and a program infraction.

SAMPLE COPY
(Actual documents are online practicum site)

Oklahoma State University Center for Health Sciences
Athletic Training Program

Clinical Experience Contract

I, _____ understand that in order to complete the clinical education component of my education within the OSU- CHS Athletic Training Program I must accumulate quality clinical experience during the _____ semester of 20__ to fulfill partial requirements of MAT _____: Athletic Training Practicum.

This contract provides a written agreement and schedule needed to completely fulfill my requirements to remain in the Athletic Training Program and progress to the next phase. I understand that I must complete all clinical experience under the supervision of an OSU-CHS Preceptor before the end of the assignment. At that time, the documented hours and evaluations will be reviewed and upon approval, the letter grade received in this Practicum course will be turned in by the course instructor.

I understand that I am responsible for individually meeting with my assigned Preceptor (approved by the OSU Athletic Training Program) during the week **prior** to beginning my documented hours. At that time, the Preceptor and I will develop a schedule that will serve as my clinical contract. It will be my responsibility to report at my scheduled times and contact the Preceptor immediately if any changes occur. A copy of this schedule must then be approved by the OSU Athletic Training Program Director or Director of Clinical Education **PRIOR** to the beginning of the clinical experience. At the midpoint and completion of the clinical experience, the supervising Preceptor will complete an evaluation of the student's performance. A satisfactory evaluation must be accepted in order for the clinical experience contract to be fulfilled.

If I fail to meet the stipulations set forth in this contract, I understand that I will not be placed in a future clinical rotation thereby discontinuing my progress in the Clinical Education component of the Athletic Training Program and will be subject to other Athletic Training Program regulations including probation or dismissal from the program.

Student's Typical Clinical Experience Site Schedule:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Additional requirements of Preceptor and/ or site:

_____
_____
_____

_____	_____	____ /___ /____
Student Name (Please print)	Student Signature	Date
_____	_____	
Preceptor Name (Please print)	Preceptor Site	
_____	____ /___ /____	
Preceptor Signature	Date	
_____	____ /___ /____	
Director of Clinical Education	Date	

Legal Issues

An athletic trainer is defined as a qualified allied healthcare professional educated and experienced in the management of healthcare problems associated with sports participation. The athletic trainer works in cooperation with the physician and other allied healthcare personnel for the ultimate good of the athlete. The athletic trainer must also work with the other members of the medical team as well as the administrators, parents, patients, and team or organizational personnel in providing efficient and responsive athletic healthcare. The student will learn the applications of the athletic training profession as taught in the classroom as well as the clinical experiences. It is the responsibility of the preceptors to teach the athletic training students.

There are many legal implications in athletic training. You must always be aware of what you are doing and know the consequences if you fail to act as a normal prudent person. You must be willing to accept the responsibilities of your actions and do not do anything that leaves any doubt in your mind as to its soundness. Keep in mind that you will affect more people by your actions in the athletic training profession than any other healthcare team member. You are in continuous contact with coaches, parents, administrators, fans, and most importantly, student-athletes or patients. Your actions will affect the patient in the present and in the future. Therefore, you must keep the patient's welfare uppermost in your mind. The effects of your actions will be lasting. Make every effort possible to help keep the patient mentally and physically healthy so that they can enjoy their current activities as well as being able to continue to be physically active the rest of their lives.

As an athletic training student, you must follow the guidance of the assigned preceptor and Physicians. Do not place yourself in a position of compromise when the patient's well being is at stake. Do not attempt a procedure that has not been approved by the preceptor and physician. Do not attempt a procedure that you have not been declared proficient in by the preceptors. Do not make statements about the condition, injury, treatment, or general physical status to unauthorized personnel. This also includes private information discussed within the facility and private meetings. When present, the Physician makes the final decision if the injured patient can be released. If not, then the preceptor will make the final decision. The decision is made to assure the safety and welfare of the patient.

Legal Terminology

Liability –	The state of being legally responsible for the harm one causes another person.
Negligence –	The failure to use ordinary or reasonable care.
Injury –	An act that damages or hurts.
Assumption of Risk –	The individual, through expressed or implied agreement, assumes that some risk or danger will be involved in the particular undertaking.
Accident –	An act that occurs by chance or without intention.
Tort –	A legal wrong committed against another person.
Act of Omission –	An individual fails to perform a legal duty.
Act of Commission –	An individual commits an act that is not legal to perform.
Statute of Limitations –	A specific length of time that individuals may sue for damages from negligence.

Academic Integrity Complaints

Oklahoma State University is committed to the maintenance of the highest standards of integrity and ethical conduct of its members. This level of ethical behavior and integrity will be maintained in this course. Participating in a behavior that violates academic integrity (e.g., unauthorized collaboration, plagiarism including the inappropriate use of AI, multiple submissions, cheating on examinations, fabricating information, helping another person cheat, unauthorized advance access to examinations, altering or destroying the work of others, and fraudulently altering academic records) will result in your being sanctioned. Violations may subject you to disciplinary action including the following: receiving a failing grade on an assignment, examination or course, receiving a notation of a violation of academic integrity on your transcript (F!), and being suspended from the University. The academic integrity complaint is to be filed with the Program Director. The student is then required to meet with the Program Director to determine any further action regarding the matter. At the Program Director's request, the matter may be referred to the ***CHS Advisory Board*** for handling of the matter. You have the right to appeal the charge. Contact the Office of Academic Affairs, 101 Whitehurst, 405-744-5627, http://academicintegrity.okstate.edu.

Absence From Academic Responsibilities

Attendance of class is the basis of the University concept and imperative for understanding the course material. All class sessions are mandatory. Students who know of a specific date (a wedding, family reunion, etc.) that they are unable to attend their class or clinical experience must submit an "Absence Request Form" to the DCE or Program Director. This form must be submitted to the student's professor one week prior to missing class. Requests will be handled on an individual basis. An example is available in the Student Forms section.

Sudden Absence Due to Illness or Emergency

Situations may inevitably arise, and a student might have to miss class. It is the student's responsibility to notify the instructor before this absence OR as soon as possible in the event of an illness, accident, etc. It is also the student's responsibility to make up any work missed.

Tardiness

Habitual lateness will not be tolerated. Your clinical start time is set between your Preceptor and yourself. Be there at their assigned times. If a situation arises where you will be late, it is your responsibility to notify your Preceptor know you will be late and when to expect you.

Infraction Policy – Clinical Education

DISCIPLINARY ACTIONS / REPORTING VIOLATIONS

All Athletic Training Students are expected to adhere to all Athletic Training Program and clinical experience institutional policies. In the event, a faculty member Preceptor finds a student acting outside the policies of OSU Athletic Training Program or ethical guidelines, he/she may reprimand the student, file an ***Incident Report*** with the Program Director. A student has one week from the date of the infraction offense to submit a written grievance detailing their explanation of the event to the OSU Athletic Training Program Director and CHS director of clinical education.

Preceptors may remove a student from the clinical rotation, at any time, if the preceptor feels that the student has: (a) behaved in an inappropriate manner; (b) placed a patient in a potentially harmful situation as a result of the Athletic Training Student unsafe clinical practice; (c) violated the site's guidelines (d) violated the guidelines included in this handbook. An ***incident report*** is to be filled out by the involved Preceptor. The incident report is to be filed with the Program Director. The student is then required to meet with the Program Director to determine any further action regarding the matter. At the Program Director's request, the matter may be referred to the ***CHS Advisory Board*** for handling of the matter.

Official Procedure for Incident Report (s)

Preceptors are to file an incident report with the Program Director within 48 hours of when an infraction occurred. The Athletic Training Student will meet with the Program Director and Preceptor to discuss said infraction(s). This meeting is to occur within seven (7) days of the infraction. The group will determine any restrictions and/or disciplinary actions at this time or referral to the Advisory Board for adjudication. The following actions will be carried out:

- 1st infraction – Warning from Athletic Training Program with disciplinary action(s) determined by the Program Director and/or Advisory Board.
- 2nd infraction – Disciplinary action(s), which may include suspension, as determined by the Program Director and/or Advisory Board.
- 3rd infraction – Removal from Athletic Training Program.

Infraction numbers are not based on type. Infractions are cumulative. The student may appeal any decision as defined by CHS policy. The MATS is to follow the appeals process governed by the Program Director.

Students may or may not be reinstated to the clinical rotation depending on the severity of the violation. This determination will be made by the Program Director and/or Advisory Board. Students suspended from clinical rotation will NOT progress to the next semester's coursework and clinical rotation, and will be required to resume the program at the next practicum course offering.

Students will be removed from the program as a result of three academic integrity complaints and/or infractions of OSU Policy and Procedures. Behaviors that violate University guidelines or state, local, or federal laws will be reported to the appropriate authorities.

Any member of the ATP may file a written complaint alleging that a student has violated a policy or procedure contained in this handbook. Complaints must be filed with the Program Director of the ATP. The Program Director will attempt to address the complaint with the student. If the complaint cannot be addressed on a one-on-one basis, it will be forwarded to the Advisory Board for resolution.

Behavior Policies

The following policies cover specific areas of concern regarding professional behaviors; however, it is not an all-inclusive list. Therefore, students' behaviors and actions will be evaluated for their appropriateness as warranted. Clinical sites off-campus may have specific policies regarding expected behaviors for Athletic Training Students. If these policies differ from the policies listed below, the Athletic Training Students should follow the policies of that particular clinical site.

Inappropriate actions include but are not limited to: (1) breech of patient confidentiality; (2) harassment or discrimination in any form (3) absenteeism and /or tardiness; (4) unsafe clinical practice, including omission, commission, negligence, and malpractice; (5) neglect of clinical responsibilities (6) inappropriate interaction with patients, coaches, administrators, and medical staff and faculty members (includes staff athletic trainers, educational faculty members, physicians and other medical professionals), etc. (7) or any other action that the supervisor deems unsafe or inappropriate.

1. Compliance with HIPAA patient confidentiality rules is mandatory. Students are NOT to discuss patient information with anyone. Conversation regarding patient care shall be with no one other than the healthcare providers who are directly involved with that patient's care. This includes but is not limited to: coaches, other patients, administrators, press/ media, fans, scouts, friends, family (unless the athlete is under 18 years of age), social networks, discussion boards, etc. If a student is approached by someone requesting information on an athlete, the student is to follow these steps:
    a. Remain polite.
    b. Inform the person that you are legally prohibited from sharing any medical information on the athlete.
    c. Refer the person to your clinical supervisor.

2. Disclosing any patient/client issues, conversations, and/or occurrences that are considered to be private and confidential in person with anyone, or posting such information/comments on any electronic social media (blogs, World Wide Web, Facebook, Twitter, etc.)

3. Harassment and/or discrimination of any kind will not be tolerated. This includes actions against peers, athletes, patients, staff, administrators, etc. Types of harassment and discrimination include, but are not limited to, inappropriate actions or comments based on the patient's sex/gender, sexual preference, race/ethnicity, religion, and the patient's sport or status.

4. Absenteeism and tardiness will not be tolerated. Punctuality and attendance of classes, in-services, clinical rotations, meetings, and appointments are mandatory. Students must notify the appropriate instructor or supervisor of any absences and tardiness. Notification of absence should be done before the absence date. Emergencies arise that will preclude you from proper notice. If an emergency occurs, you must notify your instructor or supervisor as soon as possible.

5. The preceptor is responsible for ensuring the safety of patients at their site, especially those being observed by an Athletic Training Student. Students are not to perform any procedures or render any care for which they have not proven competence and proficiency. In addition, students are not allowed to provide any services without supervision. Clinical supervisors must be able to provide immediate intervention in any situation in which the student is demonstrating unsafe clinical practice.

6. The student's clinical responsibilities vary with the clinical site and level of the student. Students are required to meet with the clinical supervisor to discuss their specific responsibilities before the first day of the clinical rotation.

7. Inappropriate interactions with patients, coaches, administrators, fellow MATS, staff, etc. will not be tolerated.

    a. Students must keep the rapport and relationship with patients at a professional level at all times. Students are expected to report any problems or concerns with patients, coaches, administrators, fellow Athletic Training Students, staff, etc., especially those of a hostile or inappropriate nature, to the Program Director and preceptor immediately.

Students should be especially mindful of their social interactions with patients, coaches, administrators, fellow Athletic Training Students, staff, etc. Social and romantic relationships are highly discouraged. If a relationship develops, the Athletic Training Student must notify the Program Director of the relationship as soon as a serious relationship begins. This is to avoid a potential conflict of interest or distraction in the clinical environment. Students may be immediately reassigned to another clinical site if they develop a relationship with a patient at that current rotation.

    b. Professional relationships between students are a very important aspect of the Athletic Training Program and clinical rotations due to daily interaction with one another. These interactions are expected to remain professional regardless of personal likes or dislikes of one another. Open criticism of fellow students, regardless of class standing, will not be tolerated. Students are expected to treat others with courtesy and respect. No abuse of fellow students will be tolerated. Romantic relationships between students are discouraged. If a relationship develops, the Athletic Training Student must notify the Program Director of the relationship as soon as a serious relationship begins. This is to avoid potential distractions in the clinical environment. Students are expected to report any problems or concerns with a fellow student, especially those of a hostile or inappropriate nature, to the Program Director and Preceptor immediately.

    c. Students are to maintain a professional approach to their interactions with faculty and staff. Students are to show the staff and faculty an appropriate amount of respect, regardless of personal likes or dislikes. Students must not criticize or openly disagree with a staff or faculty member's decision or action, particularly when it concerns the care of a patient / athlete. Students are to approach the staff or faculty member first in order to resolve any matter the student has a question. The student must do so in a respectful manner, away from others, to ask their question or voice their concern. The student may then go to the Program Director or Head Athletic Trainer if the situation is unable to be resolved. Students are

expected to report any problems or concerns with faculty of staff, especially those of a hostile or inappropriate nature, to the Program Director, Head Athletic Trainer, and Preceptor immediately.

It is the responsibility of the staff and faculty to prepare the students to be successful professionals. This often requires direct corrective criticism and guidance from the staff and faculty. As up-and-coming professionals, students must learn that criticism is a part of the professional world, and it should not be taken as a personal attack. However, if a student feels that he/she is being mistreated by a staff or faculty member, they are expected to bring their concerns to the attention of the offending staff or faculty member. The student should bring their concerns to the faculty member's or staff attention first. If the problem persists, the student is expected to inform the Program Director of their concerns. The above information regarding interactions with clinical staff and faculty members also pertains to interactions with other medical and allied medical professionals.

d. Students are expected to maintain a professional interaction with the coaches and act according to the guidelines set forth by the clinical supervisor. Details on how and when to address coaches, how to respond to questions from coaches, and how to handle potential conflicts should be addressed with the clinical supervisor early in the rotation. At no time should a student criticize or question a coach on issues related to the coaching of the team. Students are expected to report any problems or concerns with a coach, especially those of a hostile or inappropriate nature, to the Program Director and Preceptor immediately.

e. Typically, students have very limited interaction with administrators. However, if a student does have an opportunity to interact with an administrator, the interaction must be professional. Students are expected to be respectful and cordial. Students are expected to report any problems or concerns with an administrator, especially those of a hostile or inappropriate nature, to the Program Director and Preceptor immediately.

8. The following actions will also result in a student violating the policies and procedures of conduct:
   a. Report for clinical assignment in inappropriate attire and appearance.
   b. Inappropriate behavior of an OSU Athletic Training Program student during any Athletic Training Program-related event
   c. Engaging in promiscuity.
   d. Engaging in Sports gambling.
   e. Drinking to excess or engaging in other inappropriate behavior on school-sponsored trips.
   f. Reporting to ANY academic, clinical rotation, or Athletic Training program-sponsored event under the influence of drugs or alcohol.
   g. Conviction of a felony (i.e., DUI or assault) by outside law enforcement while in the OSU Athletic Training Program. Students will be allowed to remain in the OSU Athletic Training Program until due process is carried out.
   h. Breach of any confidentiality (medical matters, injury updates, team issues, etc.)

Examples of Clinical Education Infractions

- Report late for clinical assignment or meeting (without notification)
- Report for clinical assignment in inappropriate attire. Presenting yourself with an unprofessional appearance, as stated in the Athletic Training Student Handbook.
- Using a personal electronic device during your clinical experience.
- Missing a required meeting.
- Failure to report for a clinical assignment or event as stated in the Athletic Training Student Handbook.
- Inappropriate behavior during clinical assignment.
- Complaints from a preceptor and/or administrator.
- Talking back to a supervisor or administrator.
- Gambling or other violations of policies as stated in the Athletic Training Student Handbook.
- Drinking or other inappropriate behavior on school-sponsored road trips.
- Reporting to ANY school-sponsored event or Athletic Training function under the influence of drugs or alcohol
- Being convicted of Driving Under the Influence (DUI).
- Inappropriate behavior of an Athletic Training student as stated in the Athletic Training Student Handbook
- Posting inappropriate information on a social media forum
- Breach of confidentiality

Athletic Training Program Grievance Policy:

A student with an academic grievance must follow the procedures outlined in the current OSU catalog. Whenever a misunderstanding or problem exists, students are expected to address the misunderstanding or issue immediately with the person(s) directly involved. Students with a grievance concerning the Athletic Training Program should address the issue(s) with their faculty instructor or preceptor/ supervisor first. If the situation is not resolved through direct discussion at this level, the student may discuss clinical matters with the Clinical Education Coordinator. If the discussion with the CEC does not resolve the matter, the complaint may be brought to the Program Director. If conversations with the Program Director do not provide a satisfactory solution, the student may address the matter with the Center for Health Sciences Provost.

Appeal Process

Any Athletic Training student in the Athletic Training Program has the right to appeal or petition any decision made by the Program Director.

The appropriate appeal process is as follows:

- The student must submit a written appeal to the Athletic Training Program Director/Department Head.
- The student may then appeal to the Center for Health Sciences Provost.
- The student may then appeal to the Graduate College Dean.
- The student may then appeal to the Provost or President of the University.

Retention Policy

Athletic Training students must maintain an overall grade point average of 3.0 or above in order to continue within the Athletic Training Program. If one should fail to meet these criteria, the following actions will be taken.

Athletic Training students must maintain an overall grade point average of 3.0 or above in order to continue within the Athletic Training Program. If one should fail to meet these criteria, the following actions will be taken.

To help prevent any academic causality, mid-term grade checks will be required of all Athletic Training students. The purpose of these evaluations is to assess the academic progress of Athletic Training students. In the event that a student is having academic difficulty, the Athletic Training Program Director will identify and direct the involved student to seek academic assistance. For Athletic Training students who have previously been on probation, grade checks will be required more frequently.

An Athletic Training student already accepted into the clinical program who fails to achieve an overall GPA of 3.0 at the end of the probation semester, will be suspended from the Athletic Training Program.

Should a student not achieve the grade of a "B" in a didactic course within the athletic training program, they will have the option to complete a course remediation to achieve the required "B". Only "C" grades will be remediated. Students initially achieving less than a "C" will need to retake the entire course without remediation thereby pausing their matriculation in the program. Students are unable to remediate a practicum course and should a grade of "B" not be achieved in a practicum course the student will follow the program retention policy. Remediation can occur ONCE within the curriculum. The student and faculty member will work together to address identified deficiencies in both lecture and lab through readings, assignments, and assessments as dictated by the remediation contract. Students will not be remediating every activity throughout the course, only areas identified as deficient. Upon the contract agreement, the student will receive an "I" grade and if he or she is successful in the remediation, the grade will be changed to a "B".

Upon the completion of the remediation, a grade earned below that of a of "B" in required Athletic Training courses will result in probation. The course must be retaken at the next course offering. If a grade of B is not earned at the second attempt, dismissal from the program will result. Only one core didactic course retake is allowed during the program. Students earning a grade lower than a "B" for the second time in the curriculum will result in dismissal.

If the minimum grade of "B" is not met in a Practicum course, the student must retake that course the following year and is not allowed to matriculate in the curriculum (take any other AT courses, including core courses) until the satisfactory grade and proficiency in the AT Practicum skills have been successfully demonstrated. Additionally, in order for students to continue with curriculum progression, a minimum score of 80% must be achieved on the practical exams given in the AT Practicum courses. Second attempts lower than 80% will result in the student retaking that course the following year and is not allowed to matriculate in the curriculum.

Vacation Periods

As the clinical experience is associated with an academic course, students are NOT required to participate in the clinical experience during University Holidays, however, there are clinical rotations that will take place throughout the entire calendar year. However, interested students may be allowed to gain experience during this time. The MATS should discuss with his/her Preceptor the possibility of this and predetermine a schedule for such times.

Adverse Weather Policy

In the event of bad weather or hazardous road conditions, each student must determine if they feel they can safely travel to the clinical site. If a student determines it is unsafe, they need to contact their Preceptor and let them know. Please inform the Preceptor /faculty as much in advance as possible. In a nutshell, if YOU can arrive and return safely, then do. If YOU are unsure of your safety, then DO NOT drive — ride with a safe driver or call the Preceptor/faculty to tell them, you will not be able to be there. It is your responsibility to reschedule the missed experience or class work.

Outside Employment

The MATS has many responsibilities and duties that he/she must perform. A MATS should be dedicated to his/her roles as a student and as an ATS. The MATS clinical experience and class work should be given top priority. If a student wishes to hold a part-time job and/or participate in other activities, these interests should be scheduled secondary to his/her athletic training responsibilities.

SAMPLE COPY

Oklahoma State University Center for Health Sciences
Athletic Training Program

INCIDENT REPORT

Date: _____ Student: _____

Preceptor/Instructor: _____ Phone: _____

Facility: _____ Incident Date: _____

Preceptor/Instructor Account of Incident:

Student Account of Incident:

Immediate Action Taken by PRECEPTOR/Instructor:

Upon submission of this document, it is understood that the Athletic Training Student was reprimanded for behavior or actions unbefitting a representative of the OSU-CHS Athletic Training Program as detailed in the OSU Athletic Training Program Handbook. The student was properly informed of the Preceptor's decision and immediately dismissed from clinical experience for the specified date of occurrence unless another plan of action was detailed.

Athletic Training Student Signature: _____ Date: _____

PRECEPTOR/Instructor Signature: _____ Date: _____

DCE Signature: _____ Date: _____

Program Director Signature: _____ Date: _____

Upon submission of this document, it is understood that the Athletic Training student was reprimanded for **behavior or actions unbefitting a representative of the OSU Athletic Training Program** ***as detailed in the OSU Athletic Training Program Handbook. The student was properly informed of the Preceptor's decision and immediately dismissed from clinical experience for the specified date of occurrence unless another plan of action was detailed.***

SAMPLE COPY

Oklahoma State University
Athletic Training Program
INCIDENT REPORT FOLLOW-UP

Meeting Date: _____ Infraction # _____

Meeting Notes:

Action Taken:

Student Input/Compliance:

Athletic Training Student Signature: _____ Date: _____

Program Director Signature: _____ Date: _____

Attitude and Values

The profession of Athletic Training is an allied healthcare profession devoted to the health and welfare of the physically active patient. The Athletic Trainer should keep the basic principle in view and be guided by it at all times.

1. Athletic Training Students should develop a relationship with each patient that encourages him/her to trust the student with personal information.
2. Athletic Training Students should develop a professional relationship with fellow clinicians, administrators, and patients so that they respect the students' opinions and know the information will be objective.
   Those who serve as members of the profession of Athletic Training commit themselves to upholding professional ideals and standards. Each Athletic Trainer acts as a representative of the whole profession and as such should conduct him/herself with honor and integrity.
3. Athletic Training Students should develop a sense of loyalty to each member of the organization. **Do not** second-guess or belittle decisions made by preceptors. In particular, do not discuss controversial subjects concerning the organization outside the organization. Learn what information needs to be shared and with whom it is to be shared. For the most part, this includes your fellow athletic trainers and the Team Physician.
4. The Athletic Training Student must act professionally at times, understanding that they are a direct reflection of the instructors, the university, and the OSU Athletic Training Program.
   The student's willingness to accept responsibilities and carry them through completion, the way he/she performs those duties that are unpopular and distasteful, his/her appearance, and the tone of voice and the caliber or his/her language, are all qualities which will make you and our program more successful. Athletic Training is an integral part of sports medicine. The Athletic Trainer Student should carry out the techniques of the profession only with appropriate and specific medical direction, either the Certified Athletic Trainer or the preceptor.

Personal Qualities

DEPENDABILITY – Dependability includes punctuality, following directions, completion of tasks as assigned, asking for help if needed, and showing initiative.

DEDICATION – Athletic Training Students must be dedicated to their success in the Athletic Training Program.

SINCERITY, HONESTY, LOYALTY, AND INTEGRITY: Athletic Trainers work in an environment governed by many rules and requirements. Each student is responsible for ensuring that the rules are followed.

PROFESSIONALISM – Please keep in mind that as an Athletic Training Student you are a representative of the OSU Athletic Training Program. Your words and actions will have a direct reflection on the entire program. As an Athletic Training Student it is expected that all actions and demeanor will reflect professionalism while in attendance at any site.

There will be NO TOLERANCE for any Athletic Training Student caught using or in possession of illegal drugs, nor will there be any consumption of alcoholic beverages while performing the duties of an Athletic Training Student.

Attire and Appearance

The Oklahoma State University- CHS Athletic Training Program strives to create a professional image that is consistent with the public's expectation of an allied health professional. The level and quality of care a patient can expect to receive can be directly related to the personal appearance of the individual providing that care. Professional appearance includes grooming, hygiene, and dress. Individual dress should reflect a professional appearance at all times in order to foster a professional atmosphere. Students are expected to wear OSU-approved attire while in clinical settings.
Any student who is inappropriately dressed or groomed will be sent home for the day. The infraction policy will be initiated. An incident report will be filed with the Program Director. Consequences for missing your assigned duties will be determined by the Program Director.

Clothing Attire

Unless the site supervisor specifies a higher dress code, the items below are acceptable components of the uniform for on-campus clinical rotations. The student is expected to dress professionally and functionally while at their clinical assignments. Students should also note that all clothing is expected to be clean, wrinkle-free, and void of holes, patches, or frayed edges. Students should note the guidelines listed under each item.

a. Site appropriate colored collared/ t-shirts
    i. OSU or site-approved attire.
    ii. Shirts must not have holes, tears, or cuts in them.
    iii. Shirts must not be excessively tight or form-fitting.
    iv. Shirts must have sleeves.
    v. Shirts must be tucked in.
    vi. Shirts should not have an excessively low-cutting V-neck.
    vii. Site-sponsored t-shirts should be professionally presentable and only worn when deemed appropriate by the preceptor.
b. Site appropriate color and fabric pants
    i. Pants must be worn no lower than waist high.
    ii. Pants are not to have holes, frays, cuts, or tears.
    iii. Pants are not to have lettering across the buttock region.
c. Site appropriate color and fabric shorts
    i. Shorts must be at least mid-thigh in length.
    ii. Shorts should be worn with a belt.
    iii. Shorts must be worn no lower than waist high.
    iv. Excessively tight or baggy shorts are not appropriate.
    v. "Bell-bottom" or "flared" pants are not appropriate.
    vi. Jeans are not appropriate at any time.
d. Site appropriate colored sweatshirts
    i. If a logo is visible, it should be a TEAM SPONSORSHIP LOGO or the OSU logo.
    ii. Sweatshirts must not have holes, frays, cuts, or tears.
    iii. Sweatshirts should not be excessively tight or form-fitting.
    iv. Sweatshirts must have sleeves.
    v. Excessively tight or baggy sweatshirts are not appropriate.
e. Site appropriate colored sweaters and jackets
    i. If a logo is visible, it must be a TEAM SPONSORSHIP LOGO or the OSU logo.
    ii. Sweaters and jackets are not to have holes, frays, cuts, or tears.
    iii. Sweaters and jackets must not be excessively tight or form-fitting.
    iv. Excessively baggy sweaters and jackets are not appropriate.
    v. Sweaters must not have a low-cut neckline.
f. Formal footwear
    i. Shoes must comply with OSHA standards (i.e., closed toe, non-slip tread).
    ii. No more than a 1" heel for ladies' shoes.

iii. Shoes must not interfere with your ability to perform your assigned duties effectively.

g. "Tennis" shoes or athletic-type shoes
    i. Shoes must not have holes, frays, cuts, or tears.
    ii. The soles of your shoes are to be in good working order. No torn or loose soles are allowed.
    iii. Sandals, including "flip-flops" and "slides" (Crocs) are not appropriate and do not comply with OSHA standards.
h. Site appropriate colored baseball-style hats
    i. If a logo is visible, it must be an OSU or site logo.
    ii. Hats are not to be worn indoors.
    iii. Hats are to be worn evenly on the head with the bill facing forward.
i. Site appropriate colored stocking caps or ear warmers
    i. If a logo is visible, it must be an OSU or site logo.
    ii. Stocking caps and ear warmers are not to be worn indoors.

Students participating in clinical rotations should consult with the site's supervisor for details on appropriate clothing and uniforms before their first day at that site, but at a minimum, must meet the OSU standards for dress. Students may be asked to wear professional dress clothes. Students are responsible for the costs associated with the clothing/uniform if the items are not provided by the site. If the clinical supervisor does not require a specific uniform, students should follow the on-campus uniform guidelines.

Students participating in formal Athletic Training Program-sponsored and/or related events, formal university functions, and off-campus conferences should wear attire to provide a respectable impression of themselves, OSU, the Athletic Training Program, and the athletic training profession. Your attire should be conservative. The minimal attire of a collared polo shirt, slacks/ pants, and dress shoes is expected. A preference for more formal or conservative business-appropriate attire is desired. Students should also note that all clothing is expected to be clean, wrinkle-free, and void of holes, patches, or frayed edges. Students should note the guidelines listed under each item for the minimal expectation for appropriate attire.

Name Tags

You must wear your OSU-CHS Athletic Training Student name tag at all sites. Your nametag should be worn so that the student's name is visibly recognized. Some rotation facilities will require other identification badges, etc.

Appearance

a. Hair, beards, and sideburns must be neatly groomed and clean.
b. Hair, beards, and sideburns must present a professional appearance and not interfere with your ability to perform all duties.
c. Fragrances (colognes, perfumes, and lotions) should be kept to a minimum or not worn to not offend those you come in contact with.
d. Visible body piercing jewelry (such as eye, nose, lip, or tongue) should be non-obtrusive while representing the OSU Athletic Training Program. An exception is made for pierced ears. Earrings shall be conservative. The Athletic Training Student should not wear earrings that have the potential to cause personal injury or interfere with functions that need to be performed.

Personal Electronic Devices

The use of a personal electronic device such as a cell phone, iPod®, and portable gaming system, which includes games on cell phones, is not appropriate during your clinical experience. If you are caught using any of the above devices during your clinical experience the following actions will be taken:

a. First offense – you will be given a verbal warning not to use your personal electronic device during your clinical experience. Additionally, you will be reminded of the infraction policy stated in the Athletic Training Program student handbook.
a. Second offense – your electronic device will be confiscated during your clinical experience.
b. Third offense – you will be sent home; you will not be allowed to participate in any sanctioned events, and you will be required to meet with the Program Director

Confidentiality – Health Insurance Portability and Accountability ACT (HIPAA)

Athletic Training Students are in a unique situation in which the student may, at times, have access to confidential information regarding a patient's medical condition. At no time should an Athletic Training Student discuss any information concerning the status of an injured or ill patient with any party outside of those directly responsible for the patient's care. All questions or comments regarding the status of a patient should be directed to the preceptor. Each Athletic Training Student is required to sign and return the "Confidentiality Agreement", located in the Student Forms section of this handbook, to the Program Director.

Sexual Harassment

Sexual harassment is the unwanted imposition of sexual attention. It usually occurs in the form of repeated or unwanted verbal or physical sexual advances, or sexually implicit or derogatory statements made by someone in your classroom or workplace, which cause you discomfort or humiliation and interfere with your academic or work performance. Sexual harassment can be committed against men or women.

Some examples include:

- Sexually oriented jokes and derogatory language in a sexual nature
- Obscene gestures
- Displays of sexually suggestive pictures
- Unnecessary touching
- Direct physical advances of a sexual nature that are inappropriate and unwanted
    a. Requests for sex in exchange for grades
    b. Letters of recommendation or employment opportunities
    c. Demands for sexual favors accompanied by implied or overt threats

If at any time an Athletic Training Student feels as though they have been the victim or witness to an act of sexual harassment, they are encouraged to report the incident to either the preceptor, faculty member, or the Program Director.

Gambling

As a member of the OSU Athletic Training Program, you have knowledge that is of great value to gamblers and game enthusiasts. Any of the following activities may result in severe disciplinary action or termination.

- Providing any information (e.g., reports concerning team morale, game plans, injuries to patients) to any individual who could assist anyone involved in organized gambling activities.
- Making a bet or wager on any intercollegiate athletic contest.
- Accepting a bet or a bribe or agreeing to fix or influence illegally the outcome of any intercollegiate contest.
- Failing to report any bribe offer or any knowledge of any attempts to "throw", "fix", or otherwise influence the outcome of a game

Hazardous Waste and Infection Control Policy

The OSU Athletic Training Program requires students to have a passing score on the OSHA training quiz each year prior to clinical assignments. The OSHA quiz can be found online at http://centernet.okstate.edu/safety/bloodborne.php It is also the responsibility of the student to report exposure to hazardous substances to his/her clinical supervisor immediately. Oklahoma State University's entire Bloodborne Pathogen Control Plan can be found online at http://www.ehs.okstate.edu/manuals/Bloodbrn.htm

Reporting an Incident

In the event of an exposure to blood or other potentially infectious materials, Athletic Training students are required to report such an incident to the preceptor and OSU CHS Safety officer. Necessary actions will be taken to ensure the safety and well-being of the student.

Universal Body Substance Isolation Policy and Procedure

The OSU Athletic Training Program believes Athletic Training students and staff/faculty deserve to be protected from all foreseeable hazards in the clinical setting. The Athletic Training Program has made efforts to ensure that the best information concerning the growing threat of infectious disease is provided to our students and that an effective policy and procedure have been developed. Direct exposure of Athletic Training students and/ or staff/faculty to blood or other potentially infectious materials represents a hazard for transmission of blood-borne pathogens and other infections. To decrease the likelihood of transmission of those infections and to minimize student and faculty contact with blood and bodily fluids, the following policy is in effect.

Since medical history and examination cannot reliably identify all patients infected with HIV, Hepatitis B, or other blood-borne pathogens, blood and bodily fluid precautions will be consistently used for all patients. This approach, recommended by the Centers for Disease Control (CDC) and referred to as "universal blood and body fluid precautions" will be used in the care of all patients, especially those in emergency care settings in which the risk of blood exposure is increased and the infection of the patient is usually unknown. All patients' blood, body fluids, tissues, or infected materials will be considered to be potentially infectious, and universal precautions will be used on all patients.

Oklahoma State University Center for Health Sciences

Exposure to Blood Borne Pathogens and Other Potentially Infectious Materials (OPIM) Policies and Procedures

Purpose

Employees and Students face a significant health risk as the result of occupational exposure to blood and other potentially infectious materials because they may contain bloodborne pathogens or other communicable disease agents.

Policy

All Oklahoma State University Center for Health Sciences (OSU-CHS) and Oklahoma State University - Tulsa employees with occupational exposure to known or suspected communicable diseases will adhere to this plan.

Definitions

Bloodborne Pathogens are pathogenic microorganisms that are present in human blood or other potentially infectious material (OPIM) and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV).

Occupational Exposure means reasonably anticipated skin, eye, mucous membrane, or percutaneous contact with blood or other potentially infectious materials that may result from the performance of an employee's duties. For example, when a nurse is stuck with the needle used to draw blood on a client. Testing the blood of both the source client and the exposed person for hepatitis B, hepatitis C and human immunodeficiency virus helps decide the best medical follow-up for the exposed person.

Other Potentially Infectious Material (OPIM) include body fluids such as blood, semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid and amniotic fluid. Feces, nasal secretions, saliva, sputum, sweat, tears, urine and vomitus are not considered potentially infectious unless they contain visible blood.

Percutaneous and non-intact skin exposures mean piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.

Per mucosal route means a path via entry of the mucosal membranes of the eyes, nose or mouth.

Source Individual means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee.

Procedure

Emergency First-Aid: Percutaneous Injury: Vigorously scrub the injury site or non-intact skin with soap and water. Mucous Membrane: Flush with water (i.e., eyes, nose or mouth).

1. **Treatment of the Exposure Site**
   Employees who sustain occupational exposure should immediately address the exposure site**.**
   - Wound and skin sites that have been in contact with blood or body fluids should be washed with soap and water.
   - Mucous membranes that have been in contact with blood or body fluids should be flushed using an eye wash station.
   - No evidence exists that using antiseptics for wound care or expressing fluid by squeezing the wound further reduces the risk of BBP transmission; however, the use of antiseptics is not contraindicated. The application of caustics or disinfectants into the wound is not recommended.

2. **Reporting**
   - Employee/Student shall report exposures to their supervisor, complete an Employee injury report form, and fax the report to the OSU CHS/Tulsa Safety Officer; (918)561-1256. Contact the Occupational Health Nurse to schedule an appointment: (918)-561-1256.
   - The source client's attending physician will determine if the exposure is a **high-risk** exposure using the Risk Factor Assessment- Appendix A.
   - If the source patient is still present in the clinic, request the client remain until a determination is made regarding the need for a blood sample for testing.
   - When the source individual is already known to be infected with HBV, HCV, or HIV, additional testing for HBC, HCV, or HIV status need not be repeated.
3. **Testing**
   - Testing of the exposed employee is based on source client results for HIV, Hepatitis B, and Hepatitis C. **If the source is considered high-risk or the rapid test results for the source are positive, then the exposed employee testing is needed**.
   - Regardless of the potential risk, any exposed employee has the right to request or decline testing. If an employee declines testing after an exposure, that needs to be documented on the Injury Report.
   - The Oklahoma Public Health and Safety Code, 63 O.S., 1992, Section 1-502.3 allows for testing available blood of the source client and release of the results without the client's consent when a written report of an exposure has been made. However, the source client should be informed of the intent to test and the rationale for testing. Source Client Information located in Appendix B should be reviewed with the source client during the post-exposure counseling session.
   - If source blood has not been drawn and the source client refuses to allow blood to be drawn, contact the Safety Officer at (918) 561-8391 for consultation. If indicated, a court order can be obtained to allow blood to be drawn. However, before going to that extent, a careful review of the circumstances would need to be made by the Safety Officer, State Health Officer, or designee, and Legal Services.
   - When employee's/students are in the Tulsa area they will bring the injury report form to the OSU Healthcare Center (HCC), 2345 Southwest Boulevard, Tulsa, OK 74107, (918)561-1256 during weekdays (8 am to 5 pm) to be evaluated by the attending the Occupational Health Nurse. A blood sample may be requested at that time.
   - OSU currently has a contract in place with a lab for HIV, Hepatitis B & Hepatitis C testing. The lab requisition must be marked identifying the specimens as "Occupational Health" when submitting the specimens. The ICD-9 code: V15.85 is the code for exposure to potentially hazardous body fluids. One tube separator for Hepatitis testing and one tube for HIV testing is sufficient.
   - A separate Specimen Referral Log should be kept in a folder in the same locked file cabinet as the Employee Medical Records. Only the persons with authorized access to the Employee Medical Records should have access to and document on this form.
   - Any specimens taken will be stored appropriately by the lab and processed as soon as possible (no less than 24 hr).
   - If the employee/student consents to baseline blood collection, but does not give consent at that time for HIV serological testing, the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident, the employee/student elects to have baseline sample testing, such testing will be done as soon as feasible.
4. **After Hours Testing**
   - If an exposure occurs when the HCC is closed, the employee is to call the Oklahoma State University Medical Center (918) 587-2561 and request the Family Medicine Resident On-call. The Family Medicine Resident On-call will determine if an emergency room visit is necessary or if the employee's exposure can wait until the HCC is open. The employee may be requested to come into the Oklahoma State University Medical Center (OSUMC), (918)599-5373, Emergency Room for testing and treatment.
   - If the employee/student is outside the Tulsa area, they will follow the policies of the host facility and contact the OSU-Tulsa Safety Officer at (918)561-8391. All documentation will need to be faxed to (918)561-1261, including the injury report.
     1. EMPLOYEES, all medical bills related to an exposure will be paid by Broadspire (OSU's third-party administrator) after a report has been made to the OSU Safety Officer.

- If prophylaxis is recommended, contact a local pharmacy to ensure they carry the medications and accept workers' compensation claims, and contact OSU Safety for authorization.

2. STUDENTS, all medical bills related to exposure will be paid by the OSU-CFS Student Health Account, 2345 Southwest Boulevard, Tulsa, OK 74107.
   - If prophylaxis is recommended, contact a local pharmacy to ensure they carry the medications and they are willing to bill OSU, contact the OSU Safety Officer for authorization.

5. Prophylaxis for Bloodborne Pathogen Exposure:

If prophylaxis is recommended, the attending physician will call in a prescription, whereby reimbursement will be made. Contact the OSU Safety Officer for payment authorization (918) 561-8391.

Post-exposure prophylaxis shall be as per the CDC's guidelines for Infectious Control in Healthcare Personnel. When prophylactic treatment with drugs, vaccines, or immune globulins is deemed necessary and is offered, personnel should be informed of:

- " alternative means of prophylaxis,
- " the risk (if known) of infection if treatment is not accepted,
- " the degree of protection provided by the therapy, and,
- " the potential side effects.

- Hepatitis A:
  1. Immune globulin (I.G.) should be considered for personnel with close personal contact with a person who has confirmed hepatitis A.
  2. Prophylaxis with immune globulin (IG) for all personnel who take care of patients with Hepatitis A (other than above) should not be given.
- Hepatitis B:
  1. For prophylaxis against Hepatitis B after percutaneous, mucous membrane, nonintact skin exposure to blood that might be infective, should follow the recommendations as outlined by the U.S. Public Health Service.
- Hepatitis C, or Non-A/Non-B:
  1. Prophylaxis for percutaneous, mucous membrane or non-intact skin exposure is not recommended.
- HIV/AIDS
  1. Exposures to the blood or certain body fluids as defined above, of known HIV/AIDS patients will be managed according to recommendations outlined by the U.S. Public Health Service.
  2. Employee's/Students may opt to receive chemoprophylaxis according to protocol.

❖ **Prophylaxis for other Communicable Disease exposures**;

- Meningococcal Disease
  1. Antimicrobial prophylaxis against meningococcal disease should be offered immediately to personnel who have had prolonged intimate contact (i.e., mouth-to-mouth resuscitation or suctioning without a mask) with the respiratory secretions of an infected patient without using proper precautions.
  2. If prophylaxis is deemed necessary, treatment should not await the results of antimicrobial sensitivity testing.
- Pertussis
  1. Antimicrobial prophylaxis against pertussis should be offered to personnel who have had intensive contact with an infected patient without using proper precautions.
- Rabies
  1. Hospital personnel should receive a full course of anti-rabies treatment if they have either:
     1. been bitten by a human or animal with rabies.
     2. have scratches, abrasions, open wounds, or mucous membranes contaminated with saliva or other potentially infective material from a human with rabies.

- Tuberculosis
    1. Hospital personnel who have had unprotected exposure to patients with tuberculosis shall be managed according to the Tuberculosis Control Plan.
    2. All other exposures to diseases not listed should be reported to an HCC attending physician for further guidance.

6. Healthcare Professional's Written Opinion:

- The employer shall obtain and provide the employee/student with a copy of the evaluating a healthcare professional's written opinion within 15 days of the completion of the evaluation.
- The healthcare professional's written opinion for Hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for an employee, and if the employee/student has received such a vaccination.
- The HCC or OSUMC-ER shall make immediately available to the exposed employee/student a confidential medical evaluation and follow-up that shall include the following elements:
    1. Documentation of the routes of exposure and the circumstances under where the exposure incident occurred.
    2. Identification and documentation of the source individual, unless it can be established that identification is infeasible or prohibited by state or local law.
    3. The source individual's blood shall be drawn and tested at the site where the exposure occurred.
- The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:
    1. The employee/student has been informed of the results of the evaluation.
    2. That the employee/student has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment. Information included in Appendix C, D & E will be provided to the exposed worker.
    3. All other findings or diagnoses shall remain confidential and shall not be included in the written report.

7. Release of Test Results/Confidentiality

- Results of the source individual's testing shall be made available to the exposed employee/student and the employee/student shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
- Health Insurance Portability and Accountability Act of 1996 (.HIPAA.) applies to all parties in an exposure testing situation. Only those persons directly involved in the exposure incident are to be informed of test results. This normally would include only the source client, the exposed employee and whomever the employee designates such as the Safety Officer or designee.
- Source client test results may be released to the exposed employee, the Safety Officer, the designee and the Occupational Health Nurse without the expressed written consent of the source client per Oklahoma state law requiring documentation of occupational exposures.
- Exposed employee test results are not to be released to any person or facility, other than the Occupational Health Nurse, Safety Officer, or designee without the expressed written consent of the employee (OSHA: CFR 1910.1030 h. Medical Records).
- It is not necessary for source client name, code number or test results to be released on worker's compensation claims in order for the claim to be processed. Claims related to seroconversion of the exposed employee would necessitate the release of source client test results, but not source client name.
- These records shall be maintained for at least the duration of the employment plus 30 years in accordance with 29 CFR 1910-20

8. Medical Record Keeping:
An accurate record for each employee/student with occupational exposure shall be maintained by OSU Medical Records for the length of employment plus 30 years. This record shall include:

- Name and Campus Wide Identification (CWID) of the employee/student.
- A copy of the employee's/student's Hepatitis B vaccination status including the dates of all the Hepatitis B vaccinations and any medical records relative to the employee's/student's ability to receive vaccinations.
- A copy of all results of examinations, medical testing, and follow-up procedures.
- The employer's/student's copy of the healthcare professional's written opinion as indicated above.
- A copy of the Employee Incident Report which includes a description of the exposed employee's/student's duties as they relate to the exposure incident and documentation of the route(s) of exposure and circumstances under which exposure occurred.
- Results of the source individual's blood testing, if available.

The completed employee injury report and follow-up testing provide evidence of compliance with this OSU-Tulsa policy, Oklahoma Public Health and Safety Code, 63 O.S., 1992, SECTION 1-502 and OSHA Standard.

References:

- "Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendation for Postexposure Propyhlaxis," Nov. 15, 2005.
- CDC's guideline for infection control in Healthcare Personnel, June 25, 2003.
- Oklahoma Public Health and Safety Code, 63 O.S., 1992, SECTION 1-502
- Oklahoma State Department of Health, OAC 310:555, Notification of Communicable Disease Risk Exposure, 2001
- Oklahoma State Department of Health, Infection Prevention and Control Manual, 2011

Hepatitis B Vaccination

Athletic Training students must present sufficient documentation of having received the HBV vaccination or sign a waiver of the procedure prior to the start of their academic program. The vaccination is a three-step process. The student should receive the second shot one month after the initial shot. The final shot is given 4-6 months after the first dose. The student must present a valid shot record, sign a waiver, or begin the series of shots before involvement in clinical rotations. Students should talk to the Center for Health Sciences safety officer about paperwork, referral procedures, and the scheduling of shots. A Copy of a consent form and declination waiver can be found in the Student Forms section.

Flu Vaccination

Athletic training students are recommended to receive the flu vaccination at a minimum of once per year. Students may receive this vaccination at no cost from the occupational health nurse for the Center for Health Sciences.

Professional Organization Membership

NATA Membership/OATA Membership

Students are required to become a student member of the Oklahoma Athletic Trainers' Association (OATA) and the National Athletic Trainers' Association (NATA). These professional organizations provide the student with valuable information, contacts, and opportunities.

Students are also urged to attend as many professional and educational meetings as possible. It is a great way to meet people and network, as well as learn from a variety of different professionals.

Scholarships

There are opportunities for Athletic Training students to obtain scholarships and other monies to assist with educational costs. Scholarships are offered through the NATA, OATA, Mid-America Athletic Trainers Association (MAATA). Faculty and other Athletic Trainers will assist students in any way they can to secure these funds.

Program Costs for MATS

(The following are averages based on previous years)

Tuition and Fees	$233.80 plus fees per credit hour (OK residents) $364.00 plus fees per credit hour (non-residents)
Application	$50
Background check	$50
Hepatitis B series (3 shots at $85 each)	$255 (one-time cost and occurs prior to acceptance)
Physical and immunizations	$100 (one-time cost and occurs prior to acceptance)
Student NATA membership	$92/year - (Summer of 1st yr through Spring of 2nd yr)
Books	$300/semester
Housing	$250-550/month
Yearly TB and flu shots	$50
Clothing	$150
Sports Medicine Pack	$275.00
American Heart Association professional rescuer certification	$65 (Second Year Only)
Liability insurance	$60- 120/year
Graduation	$40 (graduating semester)
Miscellaneous items (optional)	$10-$100
Travel	Varies for off-campus site travel. Students are responsible for travel, housing, and other living expenses.

OSU-CHS
Athletic Training Program

STUDENT FORMS

Students: Sign both copies of all forms, keep the Student Copy in your program notebook/portfolio, and turn the File Copy into the Program Director.

ATHLETIC TRAINING
OSU Center for Health Sciences

Student Recognition of Clinical Site Emergency Action Plan

I, _____ have been given the Emergency Action Plan for _____
(Student Name) **(Clinical Site)**
prior to beginning my clinical education rotation and have thoroughly read the document. I have discussed the emergency action team with my preceptor and understand my role if an emergency was to occur.

_____	_____	____ /___ /____
Student Last, First Name (Please print)	Student Signature	Date

_____	___ /___ /____
Preceptor Signature	Date

Active Communicable Disease Policy

In accordance with the Oklahoma Department of Health and Environment and the Student Health Center at Oklahoma State University, the following policies and procedures have been developed for the attainment and control of communicable diseases. Any student who is diagnosed with having a communicable disease of any form is required to be reported to the Oklahoma Department of Health and Environment. Students who contract a communicable disease are required to obey prescribed guidelines by his/her attending physician and the recommendations of the university-affiliated physicians at the Student Health Center. Students may not participate in clinical rotations and field experiences during the time they are affected by the communicable disease and shall not return to clinical participation until allowed by the attending physician. The following communicable diseases that pertain to this policy are as follows:

AIDS	Hepatitis A	Poliomyelitis
Amebiasis	Hepatitis B	Psittacosis
Antrax	Hepatitis C	Rabies (animal, human)
Botulism	Herpes	Ringworm
Brucellosis	Hantavirus	Rocky Mountain Spotted Fever
Campylobacter infections	HIV	Rubella
Chancroid	Influenza	Salmonellosis (typhoid fever)
Chlamydia trachomatis infection	H1N1 virus	Scabies
Cholera	Legionellosis	Shigellosis
COVID-19	Leprosy (Hansen disease)	Shingles (Herpes Zoster)
Cryptosporidiosis	Lyme disease	Streptococcus pneumoniae
Diphtheria	Malaria	Syphilis
Infectious encephalitis	Measles	Tetanus
Escherichia coli	Meningitis (bacterial)	Toxic shock syndrome
Giardiasis	Meningococcemia	Trichinosis
Gonorrhea	Mumps	Tuberculosis
Haemophilus influenza	Pertussis (whooping cough)	Tularemia
Hand, foot and mouth syndrome	Pinworms	Yellow Fever
Viral and acute hepatitis	Plague	

For more information on communicable diseases visit http://www.cdc.gov/ncidod/dhqp/pdf/guidelines

I, _____ have reviewed the OSU ATP Communicable Disease Policy prior to beginning my clinical education rotation and understand its contents. I furthermore agree to adhere to this policy, and will not return to my clinical assignment until I have been cleared by my attending physician.

_____	_____	_____
Student name (printed)	Student Signature	Date

FILE COPY

OSU Athletic Training Program Retention Policy

Athletic Training students must maintain an overall grade point average of 3.0 or above in order to continue within the Athletic Training Program. If one should fail to meet these criteria, the following actions will be taken.

Athletic Training students must maintain an overall grade point average of 3.0 or above in order to continue within the Athletic Training Program. If one should fail to meet these criteria, the following actions will be taken.

To help prevent any academic causality, mid-term grade checks will be required of all Athletic Training students. The purpose of these evaluations is to assess the academic progress of Athletic Training students. In the event that a student is having academic difficulty, the Athletic Training Program Director will identify and direct the involved student to seek academic assistance. For Athletic Training students who have previously been on probation, grade checks will be required more frequently.

An Athletic Training student already accepted into the clinical program who fails to achieve an overall GPA of 3.0 at the end of the probation semester, will be suspended from the Athletic Training Program.

Should a student not achieve the grade of a “B” in a didactic course within the athletic training program, they will have the option to complete a course remediation to achieve the required “B”. Only “C” grades will be remediated. Students initially achieving less than a “C” will need to retake the entire course without remediation thereby pausing their matriculation in the program. Students are unable to remediate a practicum course and should a grade of “B” not be achieved in a practicum course the student will follow the program retention policy. Remediation can occur ONCE within the curriculum. The student and faculty member will work together to address identified deficiencies in both lecture and lab through readings, assignments, and assessments as dictated by the remediation contract. Students will not be remediating every activity throughout the course, only areas identified as deficient. Upon the contract agreement, the student will receive an “I” grade and if he or she is successful in the remediation, the grade will be changed to a “B”.

Upon the completion of the remediation, a grade earned below that of a of “B” in required Athletic Training courses will result in probation. The course must be retaken at the next course offering. If a grade of B is not earned at the second attempt, dismissal from the program will result. Only <u>one</u> core didactic course retake is allowed during the program. Students earning a grade lower than a “B” for the second time in the curriculum will result in dismissal.

If the minimum grade of “B” is not met in a Practicum course, the student must retake that course the following year and is not allowed to matriculate in the curriculum (take any other AT courses, including core courses) until the satisfactory grade and proficiency in the AT Practicum skills have been successfully demonstrated. Additionally, in order for students to continue with curriculum progression, a minimum score of 80% must be achieved on the practical exams given in the AT Practicum courses. Second attempts lower than 80% will result in the student retaking that course the following year and is not allowed to matriculate in the curriculum.

_____ _____

Athletic Training Student Signature Date

_____ _____

Witness Signature Date

EXAMPLE COPY

OSU Athletic Training Program
Remediation Policy

Should a student not achieve the grade of a “B” in a didactic course within the athletic training program, they will have the option to complete a course remediation to achieve the required “B”. Only initial “C” grades will be remediated, should a student have below a “C”, the student must retake the entire course thereby pausing matriculation in the program. Students are unable to remediate a practicum course, and should a grade of “B” is not achieved in a practicum course, the student will follow the program retention policy.

Remediation can occur ONCE within the curriculum. The student and faculty member will work together to address identified deficiencies through readings, assignments, and assessments as dictated by the remediation contract. Upon the contract agreement, the student will receive an “I” grade and if he or she is successful in the remediation, the grade will be changed to a “B”. Should the student not be successful in the remediation, he or she will receive the grade that was initially earned, and the student will abide by the program retention policy.

I _____ have read and understand the above remediation policy and by signing agree to the terms provided.

_____ _____

Athletic Training Student Signature Date

_____ _____

Witness Date

OSU Athletic Training Program
Remediation Contract

Student Name _____ Current Grade _____

Course MAT _____ Course Instructor _____

Dates for Remediation _____

Deficiencies Identified:

Remediation Plan (include meeting dates, assessment dates, and assignment due dates):

Benchmarks required to meet to successfully complete remediation:

_____ _____
Student Signature Date

_____ _____
Faculty Signature Date

_____ _____
Program Director Signature Date

OSU Athletic Training Program
Absence Request Form

Additional copies can be found in the Athletic Training Lab
or the OSU Athletic Training Program website.

Name: _____

Date (s) and time requesting off: _____

_____

Reason for requesting time off: _____

_____

_____

_____

_____

_____

_____

Approved by: _____ (Preceptor)

Denied by: _____(Preceptor)

Reason denied: _____

_____

_____

_____

Signed by: _____ Date: _____

EXAMPLE COPY

FILE COPY

OSU Athletic Training Program
Technical Standards Form

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

The OSU Student Disability Services office 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 of whether the accommodations requested are reasonable, taking into account whether accommodation would jeopardize clinician/patient safety, or the educational process of the student or the institution, including all coursework, clinical experiences and internships deemed essential to graduation.

I certify that I have read and understand the technical standards for selection, and I believe to the best of my knowledge that I meet each of these standards without accommodation. I understand that if I am unable to meet these standards I will not be admitted into the program.

_____ _____

Applicant Signature Date

Alternative statement for students requesting accommodations.

I certify that I have read and understand the technical standards of selection and I believe to the best of my knowledge that I can meet each of these standards with certain accommodations. I will contact the OSU Student Disability Service office to determine what accommodations may be available. I understand that if I am unable to meet these standards with or without

accommodations, I will not be admitted into the program.

_____ _____

Applicant Signature Date

FILE COPY

OSU-CHS Athletic Training Program
Athletic Training Competency Criteria

In order to protect the healthcare of the patient, Athletic Training students must be proficient in specific Athletic Training competencies. For each level of the program, there will be competencies for which the student must demonstrate proficiency. The practicum instructor and/or Preceptor that the student is assigned to will clinically test the student on each competency during the assignment period. In addition, Athletic Training students will be evaluated on their performance in the clinical setting by their Preceptor. Failure to perform adequately during clinical rotations and/or failure to show progression in proficiency in required competencies may result in dismissal from the program.

1. At any time during the semester, if a student does not uphold the requirement set forth by a particular competency, the student will be required to spend additional time with a Preceptor in order to become more proficient in that particular competency area.

2. If a student continues to have difficulties with either clinical applications and/or competencies, further consideration will be given to the advisability of placement in the Athletic Training Program.

3. At any time during the semester, a student may be placed on academic or clinical probation or completely dismissed from the Athletic Training clinical and/or academic program if the student does not uphold the expected criteria set forth for performance. Examples of unacceptable performance include but are not limited to: a) noncompliance with Athletic Training Room policies and procedures relating to safety issues, b) irresponsibility with assignments or c) failure to complete assigned competencies.

4. Admission to a clinical setting does not guarantee continued placement, which is dependent upon periodic testing and other evaluations as indicated above.

Oklahoma State University Athletic Training Program Certified Athletic Trainers are willing to meet the academic and clinical application needs of our Athletic Training students. However, it is the responsibility of the student to seek the assistance of a staff or faculty Certified Athletic Trainer should additional assistance be needed.

_____ _____

Athletic Training Student Signature Date

_____ _____

Witness Signature Date

FILE COPY

OSU Athletic Training Program
Hepatitis B Immunization Consent Form

I have been informed about the Hepatitis B vaccine. I have had the opportunity to ask questions, which were answered to my satisfaction. I request that the Hepatitis B vaccine be given to me, and I understand that there is a possibility that no immunity from Hepatitis B will result subsequent to the vaccine. I further acknowledge that I do not have any of the conditions that would preclude me from being vaccinated.

_____ _____

Athletic Training Student Signature Date

_____ _____

Witness Signature Date

Record of shots

1st Dose _____

Date Student signature Nurse/Physician/PA

2nd Dose _____

Date Student signature Nurse/Physician/PA

3rd Dose _____

Date Student signature Nurse/Physician/PA

Document shots above, and a copy of a completed shot record from the health center should also be given to the program director.

Hepatitis B Immunization Declination Form

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring Hepatitis B Virus (HBV) infections. I have been given the opportunity to be vaccinated with Hepatitis B vaccine. However, I decline Hepatitis B vaccination at this time. I understand that by declining the vaccine, I continue to be at risk of acquiring Hepatitis B. If during my time at OSU in the Athletic Training Program, I want to be vaccinated with Hepatitis B, I can begin this vaccination series at my own expense.

_____ _____

Athletic Training Student Signature Date

_____ _____

Witness Signature Date

FILE COPY

OSU Athletic Training Program Confidentiality Agreement

As part of your experiences as an Athletic Training student at Oklahoma State University, you will have access to information that is protected by various federal and state privacy laws. This information is known as ***not public data***. Unauthorized disclosure of ***non-public data*** includes releasing information over the telephone and text messaging, in verbal conversations and written form, without consent.

Types of ***non-public data*** include: patient addresses, phone numbers and email addresses, patient social security or ID numbers, patient medical information or family history information, patient injury history and status, financial or insurance information, and faculty or AT phone numbers, addresses, or ID numbers.

I, _____ (Printed Name) accept responsibility for maintaining the confidentiality of all patient information. I acknowledge that during the course of my clinical experience and work I many have access to confidential patient records, business, and financial information that should only be viewed as necessary for the performance of my responsibilities as an MATS, and only disclosed according to the OSU Athletic Training policies and procedures.

I will maintain and store documents and computer media in such a way as to ensure there is no intentional or inadvertent access by others (lock information in desks, file cabinets, or other secure areas)

I acknowledge that oral conversations may be overheard and thereby violate the privacy of patients. Conversations in patient care areas, hallways, stairwells, elevators, eating areas, classrooms, and other places of public gathering should be kept to a minimum in order to ensure confidentiality is not violated.

I acknowledge that documents containing patient information shall not be recycled or thrown in the trash. Information on paper should be shredded before it is discarded.

I, understand and agree that in the performance of my clinical experiences as an athletic training student, I must hold medical, physician, volunteer, and employee information in confidence. This includes information that I may come across in performing my duties regardless of how it is presented to me (printed, written, spoken, computerized, facsimile, etc.). I also understand and agree that I will only access information that is required to perform my duties or for express educational purposes as approved by a Preceptor or Clinical Site Supervisor.

I will not remove patient data/forms from the clinical site. I will keep patient private information concealed, and I agree to follow established documentation procedures for all paperwork.

I understand violation of the confidentiality laws may result in federal action (imprisonment and fines), as well as removal from the OSU Athletic Training Program.

I further understand that any violation of the confidentiality of personal and private information of patients, physicians, volunteers or other employees may result in disciplinary proceedings up to and including dismissal from the program and/or legal action.

_____ _____

Athletic Training Student Signature Date

_____ _____

Witness Signature Date

FILE COPY

Oklahoma State University
Athletic Training Program

Contractual Agreement

I, _____, accept the position of *Athletic Training Student* at Oklahoma State University. I have carefully and completely read the **Oklahoma State University Athletic Training Program Policy and Procedure Manual** and understand all the information contained within. I have had all my questions satisfactorily answered. I understand that by my signature, I agree to abide by all terms, policies, and procedures contained therein.

I accept this contract with the understanding that I am representing the OSU Athletic Training Program at all times. In accepting the terms of this contractual agreement, I understand that being an Athletic Training Student is a commitment with is preparing me to be a certified athletic trainer. I understand that I will be closely supervised by the OSU Preceptors of this program. I understand that my progress will be monitored and evaluated according to the criteria in the practicum course syllabi and the policies set forth in the Program Policy and Procedure Manual. I furthermore understand that my evaluation will become part of my personal records and my performance / personal actions will partially determine my continuance in the program.

Student's Name _____
(print)

Student's Signature _____ Date _____