

Master of Athletic Training

POLICY AND PROCEDURE MANUAL

2020-2021

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Athletic Training Education Terminology

Athletic Trainer – Health care professional who renders service or treatment, under the direction of or in collaboration with a physician, in accordance with their education and training and the state's statutes, rules, and regulations. Services provided include primary care, injury and illness prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention, and rehabilitation of injuries and medical conditions.

Athletic training clinical experiences – Direct client/patient care guided by a preceptor who is an athletic trainer or physician. Athletic training clinical experiences are used to verify students' abilities to meet the curricular content standards.

Clinical education – A broad umbrella term that includes three types of learning opportunities to prepare students for independent clinical practice: athletic training clinical experiences, simulation, and supplemental clinical experiences.

Clinical site – A facility where a student is engaged in clinical education.

Coordinator of Clinical Education (CCE) – The individual designated by the program as having the primary responsibilities for the coordination of the clinical experience activities associated with the ATP.

Evidence-based practice – The integration of best research evidence with clinical expertise and patient values and circumstances to make decisions about the care of individual patients.

Health care providers – Individuals who hold a current credential to practice the discipline in the state and whose discipline provides direct patient care in a field that has direct relevancy to the practice and discipline of athletic training.

Immersive clinical experience – A practice-intensive experience that allows the student to experience the totality of care provided by athletic trainers.

Medical Director – Licensed allopathic or osteopathic physician who serves as a resource regarding the program's medical content.

Patient-centered care – Care that is respectful of, and responsive to, the preferences, needs, and values of an individual patient, ensuring that patient values guide all clinical decisions.

Physician – Health care provider licensed to practice allopathic or osteopathic medicine.

Preceptor – Preceptors supervise and engage students in clinical education.

Program Director (PD) – The full-time faculty member of the host institution and a BOC Certified Athletic Trainer responsible for the implementation, delivery, and administration of the AT program.

Master of Athletic Training Program Personnel

Program Director William S. Gear, PhD, LAT, ATC

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Medical Director Jeremy Metzler, MD

Prevea Health Sports Medicine and Family Medicine

MAT Mission Statement

The University of Wisconsin-Green Bay's Master of Athletic Training (MAT) program in the Department of Human Biology provides students an education focused on an evidence-based approach to healthcare. In conjunction with our community and clinical partners, graduates of the UW-Green Bay MAT are prepared to practice athletic training as part of an interprofessional healthcare team focused on improving patient outcomes across the life span.

MAT Core Principles

- 1. Excellence Provide a quality healthcare education preparing students for a career in athletic training.
- 2. Collaboration Engage in collaborative research and clinical education experiences with our community and university partners.
- 3. Integrity Demonstrate ethical behavior and accountability in our actions.
- 4. Transparency Present clear rationale and communication to program stakeholders as important decisions are made.
- 5. Scholarship Promote lifelong learning as a continuous process of discovery.
- 6. Leadership Act as advocates for the athletic training profession.

MAT Goals

Goal #1: The UW-Green Bay MAT prepares students who are qualified to provide patient centered care as part of an interprofessional team incorporating evidence best practices and patient values.

Goal #2: The UW-Green Bay MAT will provide students a curriculum, classroom instruction, and clinical education experiences that prepares graduates to practice Athletic Training as part of an interdisciplinary team.

Goal #3: UW-Green Bay MAT Students will demonstrate the knowledge, skills, and abilities necessary for the practice of athletic training.

Goal #4: MAT students will develop the qualities of professionalism expected of an athletic trainer working as part of an interprofessional healthcare team.

Statement of Non-Discrimination

The Master of Athletic Training program at the University of Wisconsin-Green Bay does not discriminate, in the admission of students, in the administration of its educational policies, or in the placement of students at clinical rotations on the basis of race, color, national or ethnic origin, religion, creed, sex, sexual orientation, gender identification, age, disability, or military service.

UW-Green Bay MAT Admission Policy

A limited number of applicants will be admitted to the Master of Athletic Training (MAT) program. A maximum of 20 students will be admitted to the program each year. The following are program admission requirements and required application materials. Applicants must apply for admission to the MAT through the ATCAS (https://atcas.liaisoncas.com/applicant-ux/#/login) portal.

The following items need to be submitted through ATCAS:

- 1. Official transcripts verifying the completion of the following pre-requisite coursework with a grade of C or better:
 - Biology minimum of 4 credits including a lab.
 - Chemistry minimum of 4 credits including a lab.
 - Physics minimum of 4 credits including a lab.
 - Human Anatomy minimum of 4 credits including a lab. *
 - Human Physiology minimum of 4 credits including a lab. *
 - Exercise Physiology minimum of 3 credits
 - Kinesiology or Biomechanics minimum of 3 credits
 - General Psychology minimum of 3 credits
 - Human Nutrition minimum of 3 credits
 - Statistics minimum of 3 credits
- *Applicant must complete a two-semester sequence of anatomy and physiology with a laboratory component. This can be a two-semester combined human anatomy and physiology course, or separate human anatomy and physiology courses.
- 2. Letters of Recommendation
 - Applicants must provide letters of evaluation from two individuals who can speak directly to the applicants' potential success in a professional studies program in athletic training.

- At least one letter from either a healthcare provider or a current or former faculty member from the applicant's undergraduate degree program is preferred.
- 3. Personal Statement describing your professional goals and why you have chosen Athletic Training as a career.
- 4. Technical Standards Form (TSF)
 - Applicants must review and sign the TSF.
 - Applicants must indicate on the TSF if they require accommodations to successfully complete the MAT.
- 5. Observation Hours: Applicants must complete 50 hours of documented observation/job shadowing in athletic training under the supervision of a certified athletic trainer.
- 6. Proof of current certification in Basic Life Support (BLS) from the American Red Cross or the American Heart Association.
- 7. Once all required applications materials have been submitted to ATCAS, qualified applicants will be invited to interview with the admissions committee. Interview can be conducted in person or through Skype.
- 8. After acceptance to the MAT through the ATCAS process, students must also apply for graduate studies admission (https://www.uwgb.edu/admissions/graduate/apply/) at UW-Green Bay. To complete this process, you will need:
 - a. \$56.00 application fee*
 - b. UW System application form (apply.wisconsin.edu/ (https://apply.wisconsin.edu/))
 - c. International students will also need to provide the following documentation:
 - i. A test of English proficiency (TOEFL or IELTS)
 - ii. Course-by-course transcript evaluation from a professional evaluation service currently recognized by NACES (www.naces.org (http://www.naces.org/)).
 - 1. UW-Green Bay recommends one of the following evaluation services:
 - a. Educational Credential Evaluators (ECE) http://www.ece.org/
 - b. World Education Services (WES) http://www.wes.org/
 - iii. Financial Support Statement
 (https://www.uwgb.edu/UWGBCMS/media/graduate/files/pdf/Financial-Support-Statement.pdf) (this form must be submitted to gradstu@uwgb.ed (gradstu@uwgb.edu)
 - iv. Bank Statement: Letter on official bank stationary verifying the amount of readily available funds to support the prospective student while int he U.S.
- * Application fee may be waived. Please contact the MAT Program Director for more information.

Additional required documents for admitted students

Once accepted to the UW-Green Bay MAT program, the following documentation must be submitted to the Program Director prior to starting classes:

- Verification that a Physical Examination has been completed within 12 months of applying to the program by an approved health care provider (MD, DO, PA, CNP).
- The UW-Green Bay Vaccination Verification form indicating the following vaccination have been completed: MMR, Varicella, Hepatitis B, and Tetanus-Diphtheria-Pertussis (Tdap).
- Proof of a Tuberculosis (TB) test completed within the past 12 months.

• Healthcare provider background check. Information on how to complete the healthcare provider background check will be provided by the Program Director after applicants have accepted their admission to the MAT.

MAT Provisional Admissions Policy

- Applicants that do not meet the minimum overall GPA requirement of a 3.0 may be considered for provisional admission to the program if space is available.
- Applicants that meet the following criteria will be considered for provisional admissions:
 - o Overall Undergraduate GPA 2.6-2.9
 - o Pre-requisite GPA of 2.0 or better
 - o Overall recommendation of at least recommend on all 3 letters of evaluation.
 - o MAT selection committee unanimous recommendation of provisional admission
- Students admitted to the MAT on provisional status must complete the first 9 credits of MAT coursework with a GPA of 3.0 or higher. If the student is not able to achieve a GPA of 3.0 or higher following completion of the first 9 credits, they will be removed from the program.

Transfer Policy

The Master of Athletic Training Program at UW-Green Bay does not accept transfer students. Students interested in the MAT will be admitted as a first-year student if they are accepted into the program and will need to complete all course work and program requirements at UW-Green Bay.

MAT Technical Standards Policy

The University of Wisconsin-Green Bay (UWGB) Master of Athletic Training (MAT) Program is committed to the policy that all persons shall have equal access to its programs, facilities and employment without regard to race, color, creed, religion, national origin, sex, age, marital status, disability, public assistance status, veteran status or sexual orientation. Consistent with these requirements the program shall adhere strictly to Wisconsin Board of Regents Policies RPD 14-3 & 14-5. In adhering to this policy, the University abides by the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, Wisconsin Board of Regents Policy RPD 14-10 and other applicable statues and regulations relating to equality of opportunity. In this venue, the College of Education encourages all qualified individuals to apply for admission to the Athletic Training Program.

The MAT at UWGB is a rigorous and intense academic and clinical educational program which places specific requirements and demands upon students enrolled in the program. The objective for the UWGB MAT is to prepare graduates to enter a variety of employment settings in order to render care to a variety of individuals engaged in physical activity. Athletic training students are expected to demonstrate cognitive and physical tasks that may be challenging. The general purpose of the technical standards document is to describe the demands of the MAT in a manner that allows students to compare their own skills and abilities to the cognitive and physical demands they may face as athletic training students.

The technical standards set forth by the Master of Athletic Training Program establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program's accrediting agency (Commission on the Accreditation of Athletic

Training Education [CAATE]). The following abilities and expectations must be met by all students admitted to the Athletic Training Educational 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 Board of Certification for the Athletic Trainer (BOC) examination.

Candidates seeking admission to the MAT program should possess:

- 1. The mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm.
- 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 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.
- 4. Ability to understand and speak the English language at a level consistent with competent professional practice. International students must meet the English proficiency requirement outline on the International Graduate Students Admissions website (https://www.uwgb.edu/admissions/graduate/apply/international-graduate-students/)
- 5. The ability to record the physical examination results and a treatment plan clearly and accurately.
- 6. The capacity to maintain composure and continue to function well during periods of high stress.
- 7. The perseverance, diligence and commitment to complete the athletic training education program as outlined and sequenced.
- 8. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
- 9. Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

Candidates for selection to the Master of 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. If a student states he/she can meet the technical standards with accommodation, The Disability Services Office on the University of Wisconsin-Green Bay campus will consult with the Program Director for the MAT and verify the presence (and impact) of a student's disability based on the documentation that the student provides. The university will then determine whether it agrees that the student can meet the technical standards with reasonable accommodation; this includes a review 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.

Emergency Cardiac Care Policy

- 1. A copy of a current CPR certification card must be submitted as part of the student's application to the MAT through ATCAS. The course must be a Basic Life Support (BLS) for Healthcare Providers classroom course from the American Heart Association (AHA) or American Red Cross (ARC), completed within the last two years. Copy must be front and back of the card & card must be signed. E-cards are also acceptable. Note: Heartsaver and online-only classes without a classroom skills component are not acceptable for health professionals.
- 2. Athletic training students are required to maintain current certification in Emergency Cardiac Care (ECC) during their time enrolled in the MAT.
- 3. A copy of the students ECC will be kept in the student's program file in the program director's office.
- 4. ECC recertification opportunities are offered on an annual basis through Prevea Health. Students in need of recertification will be informed by the Program Director of the availability of the classes offered through Prevea Health.
- 5. ECC verification will be provided to the student's clinical sites when requested.
- 6. Students that do not have current ECC certification will not be able to participate in clinical experiences until proof of certification is provided.

Physical Examination and Vaccination Policy

In order for students to attend their clinical rotations, they must provide the program with the following documentation:

- 1. Verification that a physical examination has been completed within 12 months of applying to the program by an approved health care provider (MD, DO, PA, CNP).
- 2. Vaccination verification form indicating the following vaccination have been completed:
 - a. MMR
 - b. Varicella
 - c. Hepatitis B
 - d. Tetanus-Diphtheria-Pertussis (Tdap).
- 3. Proof of a Tuberculosis (TB) test completed within the past 12 months.
- 4. Proof of antibody titers and/or influenza vaccination.

Caregiver Background Check Policy

The current Wisconsin Caregiver Law prohibits all entities regulated, licensed, or certified by or registered with the Department of Health and Family Services under chapters 48 and 50 of the Wisconsin Statutes from employing or contracting with any individual who has been convicted of certain crimes. To ensure compliance with this restriction, affected entities must have on file the results of caregiver background check (CBC) for all current and prospective employees and contractors who provide direct care or who have access to clients or patients in that facility.

To facilitate placement and allow maximum opportunities for student placement, UW-Green Bay Police can conduct a caregiver background check on students and supervising faculty/staff when required for placement in a facility. All students and faculty/staff requiring a CBC as a UW-Green Bay program or course requirement must complete this process through UW-Green Bay. CBCs that are completed at other facilities may not be accepted as a substitute for this process. A CBC is valid for 4 years.

Caregiver Background Check Application Procedures

- 1. Students accepted into the MAT are informed by the Program Director that they are subject to a caregiver background check, the results of which may affect their eligibility for placement in required clinical education sites.
- 2. Caregiver background checks will be conducted after the student has been admitted to the MAT, during the first summer of coursework prior to any clinical placement.
- 3. Students will be informed of this requirement as part of their admissions letter. Students will be informed in their admission letter that acceptance into the program does not guarantee placement in a required internship, nor does it guarantee licensure.
- 4. Student's will complete the Background Information Form (BIDS), and return it to the Program Director. Caregiver Background Check Packet
- 5. The Program Director will verify information by comparing information on BID with the either the student information in SIS or the student's ID.
- 6. The Program Director will review each BID for any YES answers in Sections A, B, or C. If there are any YES answers, the Program Director shall obtain any additional information that is required because of the yes answer.
- 7. Each student will complete the WI Dept. of Justice Criminal History Individual Name Record Request Form and return it to the Program Director.
- 8. Each student must complete and sign a waiver agreeing to the release of necessary information to those agencies in possession of information to the student's criminal history.
- 9. The MAT Program Director will forward the following to University Police.
 - a. Waiver / release of necessary information completed and signed.
 - b. Background Information Form (BIDS).
 - c. Criminal History Individual Name Record Request Form.
 - d. Payment for the CBC will be transferred from the MAT student fees budget line.
- 10. Upon receipt of the completed CBC packet of information the University Police will:
 - a. Request the Criminal History Background Check from the WI Department of Justice, WI Department of Health and Family Services, and any other state if applicable.
 - b. Process the results of the report and conduct any further investigation of any individuals identified with Records.
 - c. Run a Driver's License Check on each individual, if applicable.
 - d. Provide a report on results of caregiver background checks to the Program Director of the MAT. Report will include a list of applicants with no records and a list of applicants with records.

CBC Maintenance and Information Dissemination Process

- 1. Files of the completed caregiver background checks will be maintained in the student's program file located in a locked file cabinet in the Program Director's office.
- 2. The Program Director will coordinate with each facility what CBC information they require.
- 3. Upon Facility request, the MAT Program Director shall arrange to provide the Facility with a copy of a completed CBC for each student scheduled to provide services at the

- Facility. In addition, upon Facility request, the MAT will provide Facility with access to the information that results from a student's caregiver background check.
- 4. The licensed facility shall make the final determination as to whether a person is acceptable for placement in their facility.

Professional Liability Coverage Policy

- 1. Each athletic training student is covered by a professional and general liability insurance policies provided by UW-Green Bay during clinical experiences associated with the MAT.
- 2. Students professional liability coverage through the university policy is in the amounts of \$1,000,000 for each claim, and \$5,000,000 aggregate.
- 3. Verification of the UW-Green Bay professional and general liability insurance policies are available in the Program Director's office.
- 4. It is recommended that the student also carry his or her own malpractice liability insurance coverage. Estimated cost of professional liability insurance is ~\$38.00 per year. Please see the following website for more information: http://www.hpso.com/

Code of Ethics and Professional Responsibility Policy

The MAT at UW-Green Bay expects all students to follow the National Athletic Trainers' Association (NATA) Code of Ethics, and the Board of Certification (BOC) Code of Professional Responsibility. Any student found to be in violation of these ethical codes will be subject to appropriate disciplinary action as outlined in the UW-Green Bay MAT disciplinary action policy. The NATA Code of Ethics and the BOC Code of Professional Responsibility are provided in appendices A and B respectively.

Program Expectations of the Student

As an athletic training student, you are a part of new tradition of Athletic Training Education at the University of Wisconsin-Green Bay. We are striving to build a reputation for preparing students to become exceptional athletic trainers and for promoting the profession of athletic training. To this end, it is important that athletic training students excel both academically and clinically.

- 1. You are expected to attend all of your classes.
 - a. You cannot gain the knowledge base necessary to perform clinical skills without attending, paying attention, and studying hard.
 - b. Class attendance and academic progress will be monitored throughout the year.
 - c. If you are struggling in a class, it is important that you speak to the instructor and seek extra help early in the semester.
- 2. You must always conduct yourself as a professional.
 - a. All athletic training students are expected to treat each other, the faculty and professional staff, as well as the patient with respect.
 - b. If there is a conflict, it should be dealt with privately and professionally.
 - c. Do not bring personal problems to the classroom or clinical settings.
 - d. Individuals associated with the MAT (Students, faculty/staff, and preceptors) should not speak poorly of each other, or the program to others not involved with the situation.
 - e. Follow the 3 R's
 - i. Respect for self

- ii. Respect for others
- iii. Take Responsibility for all your actions

MAT Educational Policies

- 1. Courses for the didactic and clinical components of the program must be taken in the sequence outline in the two-year education plan (https://www.uwgb.edu/athletic-training/curriculum/) and in Appendix C.
- 2. The clinical education component is a four-semester experience, consisting of:
 - a. Four 7-week rotations during the first year.
 - b. Two 7-week rotations in the fall of year two.
 - c. Clinical immersive experience during the spring semester of the second year
 - d. Determination of the length and location of the immersive experiences will be based on the needs and future career goals of the student.
 - e. Clinical rotations include, but are not limited to, UW-Green Bay Athletics, area high schools, sports medicine clinics, and general medical offices.
 - f. The clinical education framework is available in appendix D.

Appropriate Academic Progress and Program Completion

In order to maintain good standing in the UW-Green Bay MAT the student shall:

- 1. Maintain GPA of 3.0 or better.
- 2. Retake a didactic course if they do not receive a grade of C or better.
- 3. Obtain a grade of B or better in all clinical education courses.
- 4. The student fulfills the degree requirements for the program.
- 5. The student is awarded a Master of Athletic Training degree from UW-Green Bay.

Program Probation and Expulsion

If the student is not able to maintain a GPA of 3.0 or better:

- 1. The student will receive written notification from the program director concerning probationary status.
- 2. The student must meet with the program director to determine a course of action to remedy the problem. The student must follow through with the course of action set by the program director in order to be removed from program probation.
- 3. Students on program probation are not allowed to travel to away events associated with their assigned clinical rotation.
- 4. If the student has not achieved a GPA of 3.0 or higher by the end of the probationary period, they will be removed from the program.
- 5. Students that do not obtain a grade of B or better in clinical education courses will be immediately dismissed from the MAT.

Student Leave of Absence

Students may request a leave of absence from the MAT due to personal reasons. The length of the leave of absence granted will be based on the nature of the leave the student is requesting. Students taking a leave of absence will be able to return to the program at the level/semester when their leave began.

Clinical Education Policies

Student Responsibilities

- 1. Students will contact their preceptor prior to start of rotations to set a meeting to schedule an orientation of the clinical site's policies and procedures. Student's will complete the orientation checklist (Appendix E) and return the checklist to the CCE prior to engaging in patient/client care.
- 2. The athletic training student is responsible for knowing the location of and/or familiarizing themselves with the following at each clinical site they are assigned:
 - a. Clinical site location and preceptor contact information.
 - b. Emergency action plan (EAP) for clinical site.
 - c. Location of PPE supplies.
 - d. Location of wash stations.
 - e. Location of cleaning supplies.
 - f. Location of biohazardous waste receptacles.
 - g. Clinical site policies and procedures.
 - h. Paperwork associate with the site (evaluation forms, injury logs, etc.).
 - i. Any other rotation specific requirements.
- 3. It is the student's responsibility to work with their preceptor to develop a schedule for their clinical experience.
- 4. An athletic training student acting under the direct supervision of a preceptor may:
 - a. Provide all athletic training services that have been taught within a previous or concurrent academic course and have been evaluated by a member of the AT faculty or the student's preceptor.
 - b. Write progress notes recording actions of care under the supervision of a preceptor.

Attendance at Clinical Rotations

- 1. The student is expected to respect the time commit the preceptor is making for the student's clinical education.
- 2. The student is responsible for attending all of their clinical rotation assignments.
 - a. If the student cannot be at their clinical rotation during scheduled times due to athletic competition, illness or family emergency, the student must contact their preceptor as soon as possible.
 - b. If the student would like to request an absence from their clinical rotation for any other reason, they must complete and submit the Request of Absence from Clinical Experience form to the CCE at least 2-days prior to the start of your absence (see appendix F).
- 3. Students should use their time in the clinical setting as a learning situation.
 - a. If there is not much to do, students should use this time to practice their clinical skills.
 - b. Don't just put in the required number of hours. Make it a quality experience.

Clinical Experience Hours

1. All clinical hours must be directly supervised by a preceptor associated with the MAT. Students may be supervised by a preceptor other than the one the student has been assigned to if the assigned preceptor needs to be somewhere else (gym, Athletics office, meeting, etc.) during the student's scheduled rotation time so long as the other preceptor has completed UW-Green Bay preceptor training.

2. Students are to be scheduled to an appropriate number of hours based on educational level to ensure a quality clinical education experience.

a. 1st year students

- i. Students will average 14 hours of clinical experience per week.
- ii. Students will complete between *84 and 112 clinical hours per 7-week rotation* in AT 760 and AT 761.
- iii. Fluctuation in the number of hours completed each week is expected, however students are not to be utilized as a replacement for full-time staff.
- iv. 1st year students are to be provided at least one day off a week from their clinical rotations.

b. 2nd year students

- i. Students will complete an average of 14 hours of clinical experience per week in AT 762 and AT 763.
- ii. Students will complete between *84 and 112 clinical hours per 7-week rotation* in AT 762 and AT 763.
- iii. Students will complete an immersive clinical experience during the spring semester in AT 764. Students will participate in the day-to-day and week-to-week role of an athletic trainer during the immersive clinical experience.
 - 1. Students will complete an average of 42 hours of clinical experience per week in AT 764.
 - 2. Students will complete between *144 and 192 clinical hours per month* during the clinical immersive experience in AT 764.
- iv. 2nd year students are to be provided at least one day off a week from their clinical rotations.

Recording of Clinical Experience Hours

It is the student's responsibility to accurately record their clinical experience hours on the timesheet every day.

- 1. Clinical hours must be signed/initialed on a daily basis by your preceptor.
- 2. It is the student's responsibility to take their hour sheet to their assigned preceptor at the end of the day's experience for review of the day's activities and a signature.
- 3. It is the student's responsibility to turn their hour sheets in to the CCE as follows:
 - a. At the midpoint and end of their 7-week rotations for AT 760, 761, 762, and 763.
 - b. At the end of each month during their immersive experience for AT 764.
- 4. Clinical hours will be closely monitored by the CCE.
 - a. If it seems that the student is committing too much time to the clinical aspect of their education, and not enough time to the academic portion the CCE and/or PD will speak with the student and their assigned preceptor to determine a remedy to this problem.
 - b. If the problem continues, each incident will be reviewed and a solution will be determined on a case-by-case basis.
- 5. A record of the student's clinical hours will be maintained in the student's program folder in the Program Director's office.

Clinical Experiences Prior to Start of the Academic Semester

- 1. MAT students are strongly encouraged to be at their clinical rotations prior to the start of the fall and spring semester.
- 2. Pre-semester hours will be included as part of the student's clinical education course grade if the student participates in pre-season clinical experiences.
- 3. Students are covered by the UW-Green Bay professional liability policy during pre-season clinical experiences.

Clinical Experience Dress Code

The MAT at UW-Green Bay is committed to preparing you for a future in health care. Part of this commitment involves professionalism. Professionalism is comprised of many portions, one of which is professional attire. The dress code for the MAT is mandatory and must be followed at all times during your clinical education experience. Preceptors associated with the MAT have the authority to enforce this policy by any means they see fit.

- 1. Students will wear the name tag provided by the program identifying them as MAT students during all clinical rotations.
 - a. If the student loses their name tag, they must report it to the CCE as soon as possible so that a replacement name tag can be ordered.
 - b. In the case of a lost name tag, the student will be provided a temporary name tag until a replacement name tag is ordered.
- 2. Student's should be dressed in a professional manner similar to that of your preceptor.
- 3. Appropriate attire includes, but is not limited to:
 - a. Khaki style pants/slacks
 - b. Khaki style shorts
 - c. UW-Green Bay MAT polo shirts
 - d. Polo shirts provided by clinical site
 - e. Closed toed shoes
 - f. UW-Green Bay MAT t-shirts are acceptable for practices only
 - g. Weather appropriate apparel (jackets, boots, hats, etc...)

Role of the Preceptor

- 1. Provide direct supervision of each athletic training student.
- 2. Accept all AT students assigned to his/her facility or sport without discrimination.
- 3. Assign responsibilities to AT students that are appropriate for their level in the program.
- 4. Assist each AT student by reviewing and critiquing the competencies designated to his/her academic level in the Athletic Training Program.
- 5. Refrain from giving AT students the answers and allowing them to become critical thinkers.
- 6. Assist each AT student in setting and obtaining personal goals throughout the clinical rotation.
- 7. Notify the CCE if you are taking vacation while a student is assigned to you so adjustments to the student's rotation can be made if needed.

Clinical Experience Evaluation

1. Athletic training student's performance in the clinical setting will be evaluated twice during each semester by their preceptor.

- a. Students in AT 760, 761, 762, and 763 will be evaluated at the end of each 7-week clinical rotation.
- b. Students in AT 764 will be evaluated twice during their immersive experience, at the mid-rotation and end of rotation.
- c. Clinical experience evaluations constitute a portion of the student's clinical education grade. It is the student's responsibility to schedule a time to meet with their preceptor to discuss the student's clinical evaluations.
- 2. The athletic training student will evaluate his/her preceptor and the clinical site once, at the end of the rotation.
 - a. Student evaluations of the preceptor and clinical site will be reviewed by the CCE as they are turned in by the student.
 - b. Results of student evaluations of the preceptor and clinical site will be provided to the preceptor during the programs annual meeting.
 - c. If a significant issue is discovered at the time the CCE reviews the evaluation, the CCE will notify the PD and a course of action will be determined.

Athletic Training Student Health and Wellness Policy

The UW-Green Bay MAT takes the physical and mental health of students in the program very seriously. Any student that is experience any health concerns is encouraged to seek the appropriate help. Students should be aware that the MAT faculty are always available to discuss any issues the student feels comfortable talking about with us. UW-Green Bay also provides several services, including the Counseling and Health Center, and Phoenix cares should a student need any health and wellness services. If an athletic training student needs to take a temporary leave of absence from the MAT due to any health issue, the program director will work with the student and the Counseling and Health Center to determine a course of action.

UW-Green Bay Health and Wellness Resources:

Phoenix Cares

UWGB Counseling & Health Center:

UWGB Dean of Students:

https://www.uwgb.edu/phoenix-cares/
https://www.uwgb.edu/counseling-health/
https://www.uwgb.edu/dean-of-students/

Brown County Crisis center https://www.familyservicesnew.org/crisis-center/

Additional Financial Costs

Students accepted into the athletic training program will incur additional costs that may include UW-Green Bay athletic training clothing. Students will be provided 2 polos, 1 T-shirt, and other supplies as part of the program fee. Khaki style slacks, shorts and appropriate shoes and socks may also need to be purchased. In some instances, students are required to wear dress clothes as determined by the dress code of a particular sport team. Athletic Training Students are required to travel to professional meetings as described in the completion of program information. Costs vary by geographical location but involve travel, registration, housing, and food while attending meetings.

Additional Program Costs:

1. MAT program fee: \$600.00. This fee is divided and charged over the course of two years (\$300.00 per year). More information concerning the MAT differential tuition rate is available on the Bursar's Office web page (https://www.uwgb.edu/bursar/tuition-fees/special-tuition-rate-programs/). The MAT program fee is used to pay for the following items:

- a. Healthcare provider background check
- b. UW-Green Bay MAT clothing
- c. Medical kits
- d. Professional liability insurance
- e. BOC Certification practice exams
- 2. Physical examination, immunizations, titers. Cost will vary based on insurance plan.
- 3. Khaki style pants and shorts. Cost will vary.
- 4. Travel to off-site clinical experience sites. Cost will vary based on location of clinical site.
- 5. MAT students are responsible for purchasing required textbooks. Cost will vary. MAT faculty attempt to keep this cost as minimal as possible to the student.
- 6. NATA student membership: \sim \$100.00 per year. NATA membership is strongly recommended, but not required.
- 7. Registration, travel, housing, and meals for conference attendance
 - a. Costs vary depending on conference and location
 - b. Students may apply for travel grants through graduate studies (\$250.00 per event, \$500.00 annual maximum)

Travel Policy

- 1. Athletic training student opportunities to travel as part of their clinical education are determined by the student's assigned preceptor.
- 2. Athletic Training Students are not allowed to travel for athletic events unless their preceptor is also traveling to the event.
- 3. Students will need to provide their own transportation when their clinical experience is at an off-campus clinical site.
 - a. Students are responsible for all costs incurred during travel to off-campus clinical sites.
 - b. Students who drive to their clinical rotations must have a valid driver's license and insurance.
 - c. There is an assumption of risk by you and the other people in your vehicle if you carpool and an accident occurs.

Assumption of Risk

In signing the Assumption of Risk form (See Appendix G), I understand that while I am participating in clinical rotations as part of my education in Athletic Training, there is an inherent risk of injury. I understand that such an injury can range from a minor injury to a major injury. Participation in your clinical rotation could result in death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to all internal organs, serious injury to all bones, joints, ligaments, muscles, tendons and other aspects of the musculoskeletal system, and serious injury or impairment to other aspects of your body, general health and well-being. Such injuries could cause permanent disability such as paralysis, permanent bone or joint injury, permanent scars, or other chronic disabling conditions.

HIPAA/FERPA Policy

All students will undergo HIPAA and FERPA training, annually as provided by the MAT program. All students must sign the Confidentiality Statement prior to their initial clinical experience rotation and annually, as training is provided. (See Appendix H).

Discussion of medical information must be done on a professional basis. The athletic training student shall not discuss the medical condition of any patient/client unless it is with Athletic Trainers, Physicians and/or assigned Preceptors and in an approved clinical environment. Authority to discuss patient/client related injuries with coach(s) and/or parent(s)/guardian(s) is strictly limited to information generated from and approved by the supervising Preceptor. Athletic training students are not permitted to discuss patient/client related injuries or care with the media, family and/or friends. Students should be aware that while this policy is always in effect, when assigned to high profile sports, there may be increased pressure to divulge confidential information. This will not be tolerated. Violation of confidentiality is grounds for disciplinary action.

Social Networking Policy

Athletic Training students are cautioned against the expression of negative, malicious and/or unprofessional postings regarding UW-Green Bay, the UW-Green Bay MAT, and/or UW-Green Bay faculty, staff and program preceptors in social networking forums. Additionally, the posting of confidential information (e.g. photos of injuries, patient information, photos of therapeutic interventions, etc..) falls under the Confidentiality Policy, and may be subject to disciplinary action. Students are also strongly encouraged to refrain from "friending or following" patients on social media as this may constitute a conflict of interest for the student.

The purpose of this policy is to promote high standards within the MAT, as well as to protect the student. Employers increasingly utilize search strategies on social media sites to research potential employees, and unprofessional postings of any kind may negatively affect future career and employment opportunities.

Student Employment Policy

The MAT at UW-Green Bay does not prohibit students from holding outside jobs. Student's needing/choosing to have outside employment will need to work with their preceptor to develop a schedule for their clinical assignment that ensures the student is meeting the program's clinical education policies outlined on pages 11-13. The student needs to be aware that the ATP is a very time intensive educational program. If a student's job is interfering with their performance in either classroom or clinical assignments, it is the student's responsibility to address the problem. Paid internship opportunities are not available for Athletic Training Students enrolled in the Athletic Training Program. Work-study opportunities may be available in a variety of areas at UW-Green Bay. Students in a work-study program are held to the same standard as students seeking employment off-campus.

Athletics Participation Policy

The UW-Green Bay MAT is committed to allowing students the opportunity to participate in both athletics and athletic training. Students will be permitted to play one collegiate sport at UW-Green Bay per academic year. athletic training students' needs to complete a minimum of 50 clinical experience hours each month. The difficulty with student athletes is that athletic practices are generally held during the same hours as clinical experience opportunities, which can make it challenging (but not impossible) to balance both.

When the sport is "in-season", the student's first priority is their athletic team and second is clinical experience. Athletic Training Students participating in athletics will still need to

complete the required clinical education hours required of all students. This means that the MAT and the preceptor will be as flexible as possible, in order that sport responsibilities are not missed. However, when the sport is "out-of-season", the priority is the clinical experience. This means that a student participating in a sport may have to miss off-season practices in order to attend their clinical rotation.

Athletic Training Students as First Responders

- 1. Students enrolled in the MAT at UW-Green Bay are not to serve as first responders during their clinical rotations.
- 2. The MAT at UW-Green Bay does not require, nor recognize, student experiences that are not conducted under the supervision of a UW-Green Bay trained preceptor.
- 3. If an outside entity hires an ATS to serve as a first responder, the programs blanket professional and general liability insurance policies **do not** cover the student in these situations. It is the responsibility of the student to either obtain professional liability insurance coverage, or to ensure that liability coverage is provided by the hiring agency.
- 4. Any paid or volunteer first responder experience may not interfere with, nor replace the students assigned clinical education experience.
- 5. Athletic Training Students hired as first responders are not to call or refer to themselves as an Athletic Trainer (AT), Student Athletic Trainer, (SAT) Athletic Training Student (ATS), Licensed Athletic Trainer (LAT) or Certified Athletic Trainer (ATC).
- 6. Students found to have violated point 4 and/or 5 above, will be immediately dismissed from the MAT program.

MAT Disciplinary Policy

Students not adhering to UW-Green Bay MAT Policies and Procedures can and will be assessed demerits based on the infraction by program faculty and preceptors.

Reprimand Procedures

Demerit notices are used to provide a tool for documenting inappropriate behavior and subsequent discussions regarding the behavior. Preceptors are encouraged to handle any disciplinary issues with at least one warning for minor or moderate infractions. Severe infractions need to be written up at all times.

- 1. Demerit notices must be completed within 3 weekdays of a violation and be given directly to the Program Director (PD) by the faculty or preceptor.
- 2. The PD will meet with the student, and if necessary, the faculty member or preceptor.
- 3. The PD will make a final decision on the matter and inform the parties of his decision.
- 4. If a student feels he/she has been treated unfairly in this process, he/she can submit an appeal in writing to the PD within 5 days of the PDs decision. The PD will then follow the appeal/grievance process outlined on page 18.
- 5. Violations will be ranked as follows:

Minor Infractions (up to 3 demerits)

Dress code violation

Tardiness

Unprofessional behavior (Cussing, cell phones, attitude, etc....)

Unexcused absence from meeting

Insubordination (at faculty/preceptor discretion)

Moderate Infractions (up to 8 demerits)

Unexcused absence from clinical rotation assignment (games) Insubordination (at faculty/preceptor discretion)
Academic Dishonesty (Lying, Cheating, Stealing, Plagiarism)

Severe Infractions (up to 16 demerits)

Harassment
Intoxicated during clinical rotations
Academic Dishonesty (Lying, Cheating, Stealing, Plagiarism)
Breech of medical confidentiality
NATA Code of Ethics violation
BOC Code of Professional Practice Violation

The following disciplinary actions will be taken based on the number of demerits the ATS has received during their 2 years in the program. Students should be aware that these penalties are cumulative and that the actions will be repeated in each level if the student continues to receive demerits.

	Total number of	
Level	Demerits	Disciplinary Action
I	1 -5	No disciplinary action
II	6 – 10	Community service project/disciplinary actions assigned by PD/CCE
		• Reduction of clinical experience hours by ½ for 30 academic calendar days*
III	11 – 15	 Community service project/disciplinary actions assigned by PD/CCE Reduction of clinical experience hours by ½ for 60 academic calendar days*
IV	16	Expulsion from program

^{*} Reduction of clinical experience hours may lead to a reduction in the student's clinical education course grade.

Appeal of Disciplinary Action

Students may appeal admissions decisions, transfer course equivalencies, retention decisions, or disciplinary actions by contacting the Program Director in writing within 48 hours after the incident being grieved occurred. The Program Director will confer with the Human Biology (HUB) Governance Chair on the issue. The HUB Chair and PD will hear the student's appeal and investigate the matter. The Program Director will notify the student of the decision in writing. If the student issue involves the PD, the HUB Chair will hear the student's appeal and determine a resolution to the issue. The HUB Chair will notify the student and the Program Director of his/her decision in writing. If the student does not feel the issue was handled appropriately, the student may seek remediation through the formal University of Wisconsin-Green Bay appeal process. Information on the UW-Green Bay student grievance process can be found in the UW-Green Bay graduate student handbook.

Communicable Disease Policy

The following policy and procedures are designed to address appropriate notification and control of communicable diseases. This policy is designed to minimize risk to athletic training students, patients, the UW-Green Bay campus community, and the Green Bay and surrounding communities.

Any Athletic Training Student that is diagnosed with having a communicable disease must notify the Athletic Training Program Director (PD) and the UW-Green Bay Counseling & Health Center immediately. Once notified, the PD and the Health Center will follow the University of Wisconsin Regent Policy regarding communicable disease surveillance/prevention. Information provided by the student will be directed to the appropriate officials (e.g. University Emergency Response Team, Wisconsin Department of Health, and Center for Disease Control) if it is determined there is a risk to others. The student's name will remain confidential when reporting the incident.

Students who acquire a communicable disease while engaging in clinical rotations are required to follow the guidelines given by his/her physician and the recommendations of the UW-Green Bay Counseling & Health Center. Students must notify their preceptor, PD, and the Coordinator of Clinical Education (CCE) immediately.

Students may not participate in clinical rotations while they are affected by a communicable disease, which may pose a threat to those they come into contact with. Students may return to clinical rotations once they are cleared by their treating physician, and they have notified the UW-Green Bay Counseling & Health Center, PD and CCE they have been cleared by their physician to return.

COVID-19 Policies and Procedures

Statement on Self-Assessment and Testing

All faculty and students are required to self-assess and self-report accurately on a daily basis before coming to campus for work or classes.

If you have any symptoms related to COVID-19, contact your medical provider or use the <u>UW-Green Bay Counseling and Health Center</u> services, and do not come to class. if the <u>daily</u> <u>assessment tool</u> alerts you to take action, you should contact one of the following immediately:

- 1. the Wellness Center at 920-465-2380
- 2. Prevea Virtual Care (\$0 for COVID-19 related concerns) using the following website: www.Prevea.com\virtualcare
- 3. Prevea Health Nurse Triage at 888-277-3832 free of charge 24-hours a day/7-days a week.

Please see the <u>Phoenix Forward</u> webpage for up-to-date information on COVID-19, including testing options and university policy on returning to campus.

Statement on Face Covering

In response to COVID-19, and in alignment with the <u>UW Green Bay Building Access Policy OP</u> <u>15-17-01-c</u>, the Center for Disease Control and Prevention <u>guidelines</u>, and the established requirements of the Board of Regents of the University of Wisconsin System; face coverings are required at all times while on campus. This includes the classroom, laboratory, studio, creative

space, or any type of in-person instructional activity, and public spaces." Face coverings shall satisfy the stated recommendation in the <u>Phoenix Forward: Return to Campus Plan</u>. Students that cannot wear a face covering due to a medical condition or disability, or who are unable to remove a mask without assistance may seek an accommodation through the Office of COVID-19 Response.

Statement on Social Distancing

As instructors, we cherish our interactions with students. As citizens in these peculiar times, we must acknowledge that face coverings are not a substitute for social distancing. Students shall observe current social distancing guidelines where possible in accordance while in the classroom, laboratory, studio, creative space (hereafter referred to as instructional space) setting and in public spaces. Students should avoid congregating around instructional space entrances before or after class sessions. If the instructional space has designated entrance and exit doors students are required to use them. Students should exit the instructional space immediately after the end of instruction to help ensure social distancing and allow for the persons attending the next scheduled class session to enter.

In accordance with <u>UWS 17</u> and <u>UWS 21 Wis.Admin.Code</u> a student may be subject to disciplinary sanctions for failure to comply with policy, including this syllabus, for failure to comply with the directions of a University Official, for disruptive behavior in the classroom, or any other prohibited action. This prohibited behavior includes but not limited to failure to follow course, laboratory, or safety rules, or endangering the health of others. A student may be dropped from class at any time for misconduct or disruptive behavior in the classroom upon recommendation of the instructor and subject to the procedure established in UWS 17. A student may also receive disciplinary sanctions through the Office of Judicial Conduct for misconduct or disruptive behavior, including endangering the health of others, in the classroom.

Reporting Infected, Suspected or Exposed-Close Contact Cases

The University requests that any community member who is infected, suspected or exposed-close contact under the below definitions self-report utilizing the <u>COVID-19 Case Report</u> to the Office of Covid-19 Response. Upon receipt of the report, the Office of COVID-19 Response will monitor the Active Case to ensure compliance with the procedures listed below.

If any member of the University receives a firsthand report from an infected, suspected or exposed-close contact individual the individual should be referred immediately to the Office of COVID-19 verbally and the recipient of the report should complete the COVID-19 Case Report. For further information on the decision-making process for knowledge of a student with a positive test or suspected exposure, see this <u>flow chart</u>.

Guidelines for Contact with University Buildings

Individual Status	As of September 1, 2020
Confirmed Infection	 May not return until not less than ten (10) days from first experiencing symptoms and At least twenty-four (24) hours have passed since the resolution of fever without the use of fever reducing medication and

Individual Status	As of September 1, 2020		
	 All other symptoms have improved or Not less than ten (10) days have passed since test and is asymptomatic 		
	Any employee or student who is infected, suspected or exposed-close contact should follow CDC-recommended steps to help prevent the spread of COVID-19, and should not return to campus until they have met the criteria to discontinue home isolation and have consulted with a healthcare provider.		
Suspected Case	 Can return to campus after three days with no fever and Respiratory symptoms have improved (e.g., cough, shortness of breath) and Not less than 10 days since symptoms first appeared 		
	Any employee or student who is infected, suspected or exposed-close contact should follow CDC-recommended steps to help prevent the spread of COVID-19, and should not return to work until they have met the criteria to discontinue home isolation and have consulted with a healthcare provider.		
Exposure to Person with COVID-19	• Restricted from campus for not less than 14 days from exposure Any employee or student who is infected, suspected or exposed-close contact should follow CDC-recommended steps to help prevent the spread of COVID-19, and should not return to work until they have met the criteria to discontinue home isolation and have consulted with a healthcare provider.		
Institutional Obligations	When a community member is restricted from campus as set forth above, facilitation of the following will be made available:		
	 If possible, the employee shall be allowed to perform remote work If the employee is too ill to perform work or unable to perform work remotely the employee will be referred to Human Resources for assessment of options for applying COVID-19 Leave, vacation/personal holiday, sick or unpaid leave. Should an employee be absent for more than five days in a row for medical reasons, they should contact Human Resources to discuss their need for continued time away from work. 		

Individual Status	As of September 1, 2020			
	Student			
	 The Dean of Students will work with instructors to facilitate remote learning. If the student is too ill to participate in classes, the Dean of Students will work with student and instructor applying the Extended Absence Policy. 			

MAT Specific COVID-19 Policies and Procedures

In addition to university policy and procedures related to COVID-19, we have put in to place the following policies and procedures for the MAT:

1. Entering the AT Lab (LS 307)

- a. Everyone will enter the lab (LS 307) through the attached storage area (LS 308).
- b. You will enter LS 308 one at a time.
- c. Everyone's temperature will be assessed prior to entering the lab.
- d. Once entering LS 308, you will put on a new level 2 face mask and other PPE as needed.
- e. You will then be able to enter LS 307.

2. Once in AT Lab

- a. You will sit at separate table as much as possible maintaining appropriate social distance (6 ft.).
- b. Faculty will maintain an appropriate social distance of 6 feet from students during lecture.
- c. For hands-on activities you will be in close proximity to other students and faculty. Students and faculty will wear appropriate PPE (masks, face shields, gloves, etc.) as needed for these activities.
- d. Multiple hand washing stations, and hand sanitizing station are located throughout the lab and in LS 308. Individual bottles of hand sanitizer are also available to students.
- e. Hand washing or the use of hand sanitizer will be done after every interaction between/with students and faculty.
- f. Surfaces and equipment will be cleaned and disinfected following each use.

3. Leaving the AT lab (LS 307)

- a. At the end of class, we will clean and disinfect all surfaces and equipment used during class.
- b. Everyone will exit through LS 308 one at a time.
- c. Hand sanitizer and lotion are available at the door between LS 307 and LS308.

COVID-19 Resources:

- UWGB Coronavirus Information page: https://www.uwgb.edu/phoenix-forward/
- Wisconsin Department of Health Services COVID-19: Avoid Illness page: https://www.dhs.wisconsin.gov/covid-19/protect.htm#:~:text=wash%20your%20hands.-, https://www.dhs.wisconsin.gov/covid-19/protect.htm#:~:text=wash%20your%20hands.-, <a href="https://www.dhs.wisconsin.gov/covid-19/protect.htm#:~:text=wash%20your%20hands.-, <a href="https://www.dhs.wisconsin.gov/covid-19/protect.htm#://www.dhs.wisconsin.gov/covid-19/protec
- CDC Coronavirus page: https://www.cdc.gov/coronavirus/2019-ncov/index.html

Blood-borne Pathogens Policy

Blood-borne pathogens are disease-causing microorganisms that can be potentially transmitted through blood contact. The blood borne pathogens of concern include (but are not limited to) the hepatitis B virus (HBV), hepatitis C virus (HCV) and the human immunodeficiency virus (HIV). These diseases have potential for catastrophic health consequences. Knowledge and awareness of appropriate preventive strategies are essential for all members of society. MAT students will participate in annual training related to blood-borne pathogens prior to providing patient/client care.

Administrative Issues

The identity of individuals infected with a blood-borne pathogen must remain confidential. Only those persons in whom the infected student- athlete chooses to confide have a right to know about this aspect of the student-athletes medical history. This confidentiality must be respected in every case and at all times by all college officials, including coaches, unless the student-athlete chooses to make the fact public.

<u>BBP Exposure Pl</u>an

The following recommendations are designed to further minimize risk of blood-borne pathogens and other potentially infectious organism transmission in the context of athletics events and to provide treatment guidelines for caregivers. In the past, these guidelines were referred to as "Universal (blood and body fluid) Precautions." Over time, the recognition of "Body Substance Isolation," or that infectious diseases may also be transmitted from moist body substances, has led to a blending of terms now referred to as "Universal Precautions." universal precautions, applies to blood, body fluids, secretions and excretions except sweat, regardless of whether or not they contain visible blood. These guidelines, originally developed for healthcare, have additions or modifications relevant to athletics. They are divided into two sections; the care of the student-athlete, and cleaning and disinfection of environmental surfaces.

Care of the Patient/Client

- 1. All personnel involved in sports who care for injured or bleeding student-athletes should be properly trained in first aid, and standard universal precautions.
- 2. Assemble and maintain equipment and/or supplies for treating injured/bleeding athletes. Items may include: Personal Protective Equipment (PPE) [minimal protection includes gloves; goggles, mask, fluid resistant gown if chance of splash or splatter]; antiseptics; antimicrobial wipes; bandages or dressings; medical equipment needed for treatment; appropriately labeled "sharps" container for disposal of needles, syringes, scalpels; and waste receptacles appropriate for soiled equipment, uniforms, towels and other waste.

- 3. Pre-event preparation includes proper care for wounds, abrasions, or cuts that may serve as a source of bleeding or as a port of entry for blood-borne pathogens or other potentially infectious organisms. These wounds should be covered with an occlusive dressing that will withstand the demands of competition. Likewise, care providers with healing wounds or dermatitis should have these areas adequately covered to prevent transmission to or from a participant. Student-athletes may be advised to wear more protective equipment on high-risk areas, such as elbows and hands.
- 4. The necessary equipment and/or supplies important for compliance with universal precautions should be available to caregivers. These supplies include appropriate gloves, disinfectant bleach, antiseptics, designated receptacles for soiled equipment and uniforms, bandages and/or dressings and a container for appropriate disposal of needles, syringes or scalpels.
- 5. When a student-athlete is bleeding, the bleeding must be stopped and the open wound covered with a dressing sturdy enough to withstand the demands of activity before the student-athlete may continue participation in practice or competition. Current NCAA policy mandates the immediate, aggressive treatment of open wounds or skin lesions that are deemed potential risks for transmission of disease. Participants with active bleeding should be removed from the event as soon as is practical. Return to play is determined by appropriate medical staff personnel and/or sport officials. Any participant whose uniform is saturated with blood must change their uniform before return to participation.
- 6. During an event, early recognition of uncontrolled bleeding is the responsibility of officials, student athletes, coaches and medical personnel. In particular, student-athletes should be aware of their responsibility to report a bleeding wound to the proper medical personnel.
- 7. Personnel managing an acute blood exposure must follow the guidelines for universal precaution. Gloves and other PPE if necessary, should be worn for direct contact with blood or other body fluids. Gloves should be changed after treating each individual participant. After removing gloves, hands should be washed.
- 8. If blood or body fluids are transferred from an injured or bleeding student-athlete to the intact skin of another athlete, the event must be stopped, the skin cleaned with antimicrobials wipes to remove gross contaminate, and the athlete instructed to wash with soap and water as soon as possible. NOTE: Chemical germicides intended for use on environmental surfaces should never be used on student-athletes.
- 9. Any needles, syringes, or scalpels should be carefully disposed of in an appropriately labeled "sharps" container. Medical equipment, bandages, dressings, and other waste should be disposed of according to facility protocol. During events, uniforms or other contaminated linens should be disposed of in a designated container to prevent contamination of other items or personnel. At the end of competition, the linen should be laundered and dried according to facility protocol; hot water at temperatures of 71°C (160°F) for 25 minutes cycles may be used.

Care of Environmental Surfaces

- 1. All individuals responsible for cleaning and disinfection of blood spills or other potentially infectious materials (OPIM) should be properly trained on procedures and the use of standard precautions.
- 2. Assemble and maintain supplies for cleaning and disinfection of hard surfaces contaminated by blood or OPIM. PPE include: gloves, goggles, mask, fluid resistant gown if chance of

splash or splatter; supply of absorbent paper towels or disposable cloths; red plastic bag with the biohazard symbol on it or other waste receptacle according to facility protocol, properly diluted tuberculocidal disinfectant or freshly prepared bleach solution diluted (1:10 bleach/water ratio).

- 3. Put on disposable gloves.
- 4. Remove visible organic material by covering with paper towels or disposable cloths. Place soiled towels or cloths in red bag or other waste receptacle according to facility protocol. (Use additional towels or cloths to remove as much organic material as possible from the surface and place in the waste receptacle.)
- 5. Spray the surface with a properly diluted chemical germicide used according to manufacturer's label recommendations for disinfection, and wipe clean. Place soiled towels in waste receptacle.
- 6. Spray the surface with either a properly diluted tuberculocidal chemical germicide or a freshly prepared bleach solution diluted 1:10, and follow manufacturer's label directions for disinfection; wipe clean. Place towels in waste receptacle.
- 7. Remove gloves and wash hands.
- 8. Dispose of waste according to facility protocol.

AT Student Exposure Procedure

- 1. In the event the student is exposed to blood during patient/client care they should clean the area of exposure and report the incident to their preceptor.
- 2. In the event a student is potentially exposed to a blood-borne pathogen, they need to follow the procedures in the MAT communicable disease policy.

Calibration and Maintenance of Equipment Policy

The UW-Green Bay MAT conducts maintenance and calibration of therapeutic modalities and equipment located in the AT classroom/laboratory on an annual basis in accordance with manufacturer guidelines. Each clinical site associated with the UW-Green Bay MAT is required to calibrate and maintain all necessary therapeutic exercise and modality equipment and submit their annual calibration reports to the Coordinator of Clinical Education, to ensure compliance and safe application on behalf of the patient and MAT student. All sites must follow at least the minimum safety protocols and maintenance for each therapeutic modality or piece of equipment located at the affiliated clinical site. Failure to meet this minimum standard will result in athletic training students being withdrawn from the affiliated clinical site.

Appendices

Appendix A

National Athletic Trainers' Association Code of Ethics

Preamble

The National Athletic Trainers' Association Code of Ethics states the principles of ethical behavior that should be followed in the practice of athletic training. It is intended to establish and maintain high standards and professionalism for the athletic training profession.

The principles do not cover every situation encountered by the practicing athletic trainer, but are representative of the spirit with which athletic trainers should make decisions. The principles are written generally; the circumstances of a situation will determine the interpretation and application of a given principle and of the Code as a whole. When a conflict exists between the Code and the law, the law prevails.

Principle 1:

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

- 1.1 Members shall not discriminate against any legally protected class.
- 1.2 Members shall be committed to providing competent care.
- 1.3 Members shall preserve the confidentiality of privileged information and shall not release such information to a third party not involved in the patient's care without a release unless required by law.

Principle 2:

Members shall comply with the laws and regulations governing the practice of athletic training.

- 2.1 Members shall comply with applicable local, state, and federal laws and institutional guidelines.
- 2.2 Members shall be familiar with and abide by all National Athletic Trainers' Association standards, rules and regulations.
- 2.3 Members shall report illegal or unethical practices related to athletic training to the appropriate person or authority.
- 2.4 Members shall avoid substance abuse and, when necessary, seek rehabilitation for chemical dependency.

Principle 3:

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

- 3.1 Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity or services.
- 3.2 Members shall provide only those services for which they are qualified through education or experience and which are allowed by their practice acts and other pertinent regulation.
- 3.3 Members shall provide services, make referrals, and seek compensation only for those services that are necessary.
- 3.4 Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge.
- 3.5 Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.

3.6 Members who are researchers or educators should maintain and promote ethical conduct in research and educational activities.

Principle 4:

Members shall not engage in conduct that could be construed as a conflict of interest or that reflects negatively on the profession.

- 4.1 Members should conduct themselves personally and professionally in a manner that does not compromise their professional responsibilities or the practice of athletic training.
- 4.2 National Athletic Trainers' Association current or past volunteer leaders shall not use the NATA logo in the endorsement of products or services or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.
- 4.3 Members shall not place financial gain above the patient's welfare and shall not participate in any arrangement that exploits the patient.
- 4.4 Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try to influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.

Appendix B

Board of Certification Code of Professional Responsibility

Preamble

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

Code 1: Patient Responsibility

The Athletic Trainer or applicant:

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

Code 2: Competency

The Athletic Trainer or applicant:

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

Code 3: Professional Responsibility

The Athletic Trainer or applicant:

- 3.1 Practices in accordance with the most current BOC Practice Standards
- 3.2 Knows and complies with applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training
- 3.3 Collaborates and cooperates with other healthcare providers involved in a patient's care
- 3.4 Respects the expertise and responsibility of all healthcare providers involved in a patient's care
- 3.5 Reports any suspected or known violation of a rule, requirement, regulation or law by him/herself and/or by another Athletic Trainer that is related to the practice of athletic training, public health, patient care or education
- 3.6 Reports any criminal convictions (with the exception of misdemeanor traffic offenses or

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

Code 4: Research

The Athletic Trainer or applicant who engages in research:

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

Code 5: Social Responsibility

The Athletic Trainer or applicant:

5.1 Uses professional skills and knowledge to positively impact the community

Code 6: Business Practices

The Athletic Trainer or applicant:

- 6.1 Refrains from deceptive or fraudulent business practices
- 6.2 Maintains adequate and customary professional liability insurance

Appendix C

UW-Green Bay MAT Course Sequence (2020-2021)

Semester Semester	Year 1						
Summer S	Semester						
Summer 6-week 4.Week 3 AT-601: Foundational Practices in AT (2cr) AT-620: Eval/Manage of Acute/Emergent Conditions (3cr) 10 Fall 14-week 3 AT-700: Evidence Based Patient Care (2cr) AT-700: Evidence Based Patient Care (2cr) 13 Fall 14-week 1 AT-760: Clinical Education I (2cr) AT-551: Clinical Kincsiology (3cr) AT-551: Clinical Kincsiology (3cr) 13 Spring AT-745: IPE Seminar (1cr) AT-761: Clinical Education II (2cr) AT-761: Clinical Education II (2cr) AT-761: Clinical Education II (2cr) AT-730: Eval/Manage of Ms injury II (4cr) 12 Semester Courses Total Credit Hours Summer 4-week 1 AT-709: Nutritional and Pharmacological Interventions (2cr) AT-709: Nutritional and Pharmacological Interventions (2cr) AT-700: AT Admin. (2cr) AT-700: AT Admin. (2cr) AT-700: AT Admin. (2cr) AT-700: AT Admin. (2cr) AT-700: AT-700: AT Admin. (2cr) AT-700: AT-700: AT Admin. (2cr) AT-700: AT-700		8-week	AT-541: Gross Human Anatomy (3cr)				
Summer 6-week AT-620: Eval/Manage of Acute/Emergent Conditions (3cr)							
4-Week 3	Summer	6-week	. ,	10			
Total Credit Hours Hours AT-709: Nutritional and Pharmacological Interventions (2cr) AT-709: Nutritional and Pharmacological Interventions (2cr) AT-740: Eval/Manage GM Conditions (3cr) Parent Provect Parent Parent Parent Provect Parent		4-Week 3					
Tower AT-705: Therapeutic Interventions (4cr) AT-551: Clinical Kinesiology (3cr) AT-710: Eval/Manage of MS injury I (4cr) AT-710: Eval/Manage of MS injury I (4cr) AT-745: IPE Seminar (1cr) AT-780: Research Methods and Statistics (3cr) AT-761: Clinical Education II (2cr) AT-700: Eval/Manage of MS injury II (4cr) Tower AT-730: Eval/Manage of MS injury II (4cr) Tower AT-730: Eval/Manage of Head Injuries (2cr) Total Credit Hours			, ,				
Total Credit Hours Fall AT-750: AT-709: Nutritional and Pharmacological Interventions (2cr) AT-760: Psychosocial Aspects of Injury and Healing (2cr) AT-740: Eval/Manage GM Conditions (3cr) AT-740: Eval/Manage GM Conditions (3cr) AT-760: AT-780: AT-780: AT-780: AT-780: AT-780: Eval/Manage of MS injury II (4cr) Total Credit Hours AT-709: Nutritional and Pharmacological Interventions (2cr) AT-750: AT Admin. (2cr) 9 AT-750: AT Admin. (2cr) AT-740: Eval/Manage GM Conditions (3cr) AT-750: Health Promotion Through the Lifespan (2cr) AT-761: Health Promotion Through the Lifespan (2cr) AT-762: Clinical Education III (2cr) 7-week 2 AT-763: Clinical Education IV (2cr) AT-764: Clinical Education V (6cr) 9 AT-764: Clinical Education V (6cr) 9		14-week	AT-760: Clinical Education I (2cr)				
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7-week 2 AT-710: Eval/Manage of MS injury I (4cr)	Fall	/-week l	AT-551: Clinical Kinesiology (3cr)	13			
Spring AT-780: Research Methods and Statistics (3cr) AT-761: Clinical Education II (2cr) 12		7-week 2					
Spring AT-780: Research Methods and Statistics (3cr) AT-761: Clinical Education II (2cr) 12							
Spring AT-761: Clinical Education II (2cr) 12			AT-745: IPE Seminar (1cr)				
7-week 1 AT-720: Eval/Manage of MS injury II (4cr) 7-week 2 AT-730: Eval/Manage of Head Injuries (2cr) Year 2 Semester		14-week	AT-780: Research Methods and Statistics (3cr)				
7-week 2 AT-730: Eval/Manage of Head Injuries (2cr)	Spring		AT-761: Clinical Education II (2cr)	12			
Year 2 Semester Courses Total Credit Hours 4-week 1 AT-709: Nutritional and Pharmacological Interventions (2cr) 9 4-week 2 AT-610: Psychosocial Aspects of Injury and Healing (2cr) 9 6-week AT-750: AT Admin. (2cr) 9 AT-740: Eval/Manage GM Conditions (3cr) AT-789: AT Research Seminar (2cr) 9 AT-755: Healthcare Comm. (1cr) AT-561: Health Promotion Through the Lifespan (2cr) 9 AT-762: Clinical Education III (2cr) 9 7-week 2 AT-763: Clinical Education IV (2cr) 9 Spring 14-week AT-790: AT Capstone (3cr) 9 AT-764: Clinical Education V (6cr) 9		7-week 1	AT-720: Eval/Manage of MS injury II (4cr)				
SemesterCoursesTotal Credit HoursSummer 4-week 1 AT-709: Nutritional and Pharmacological Interventions (2cr) 4-week 2 AT-610: Psychosocial Aspects of Injury and Healing (2cr) 9 6-week AT-750: AT Admin. (2cr) AT-740: Eval/Manage GM Conditions (3cr) 4-week 2 AT-789: AT Research Seminar (2cr) AT-755: Healthcare Comm. (1cr) AT-561: Health Promotion Through the Lifespan (2cr) AT-762: Clinical Education III (2cr) 9 Spring 14-week AT-790: AT Capstone (3cr) AT-764: Clinical Education V (6cr) 9		7-week 2					
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7-week 2 AT-763: Clinical Education IV (2cr) Spring 14-week AT-790: AT Capstone (3cr) AT-764: Clinical Education V (6cr) 9	Fall		AT-561: Health Promotion Through the Lifespan (2cr)	9			
Spring 14-week AT-790: AT Capstone (3cr) 9 AT-764: Clinical Education V (6cr) 9			AT-762: Clinical Education III (2cr)				
Spring 14-week AT-764: Clinical Education V (6cr)		7-week 2	AT-763: Clinical Education IV (2cr)				
Spring 14-week AT-764: Clinical Education V (6cr)							
AT-764: Clinical Education V (6cr)	Spring	14_week	AT-790: AT Capstone (3cr)	Q			
Total Credits 62	Spring	17-WCCK	AT-764: Clinical Education V (6cr)	,			
			Total Credits	62			

UW-Green Bay Master of Athletic Training Clinical Education Framework

	Year 1 – Fall: Clinical Skills Assessed in AT 760			
Students can perform the following skills on a patient once assessed in AT 760 or with preceptor approval				
Student must be supervised dur	Student must be supervised during performance of clinical skills			
	FIRST SEVEN			
	Foundationa			
Taping	Equipment Fitting	Physical exam skills		
Wrapping	SOAP Notes	- Pulse		
Bracing	Assessing and managing environmental conditions	- Blood pressure		
Padding	- Heat index	- Pulse oximetry		
Splinting	- Lightning	- Respiration rate		
Casting				
	Acute & Emergence	cy Care Skills		
Universal precautions	Use of supplemental oxygen Use of inhaler	Emergency response		
Wound care	Use of glucometer	- Taking charge of situation		
Wound closure	Immediate injury care - Maintaining appropriate c-spine position			
Rectal temperature	Management of bleeding	- Application of cervical collar		
Vacuum splinting	- Direct pressure	- Equipment removal		
Administration of EpiPen	- Pressure dressings	- Selection of appropriate spine board maneuver		
Airway management	- Tourniquet use	- Safe and effective maneuvering of patient onto spine board		
- Suction		- Use of emergency medications		
- Nasopharyngeal		- Naloxone administration		
- Oropharyngeal				
SECOND SEVEN WEEKS				
	Therapeutic M	I odalities		
Cryotherapy	E-Stim	Light therapy		
Thermotherapy	Ultrasound	Traction		
Hydrotherapy	Soft tissue mobilization	Compression devices		
Evaluation of Lower Extremity Injuries				
Foot/Toes	History	Joint play		
Ankle	Inspection skills	Special testing		
Lower Leg	Girth measurement	Neurological screening		
Knee	Palpation	Functional assessment		
Pelvis/Thigh	ROM assessment	Postural assessment		
Lumbar Spine	MMT			

UW-Green Bay Master of Athletic Training Clinical Education Framework

Perform concussion testing

BESS

Students should continue to perform skills assessed in AT 760

Students can perform the following skills on a patient once assessed in AT 761 or with preceptor approval

Student must be supervised during performance of clinical skills

FIRST SEVEN WEEKS **Evaluation and Management of Lower Extremity Injuries** Perform full evaluation and develop treatment plan for Injuries to the: Perform on-field evaluation: Foot/Toe Foot/Toe Lower Leg/Ankle Lower Leg/Ankle Knee/Patellofemoral Knee/Patellofemoral Hip/Pelvis Hip/Pelvis Lumbosacral Lumbosacral Student makes diagnostic decision Student makes diagnostic decision Includes differential diagnosis Includes differential diagnosis Treatment plan Develops injury prevention plan for: Short term goals Lower Leg/Ankle Knee/Patellofemoral Long term goals Plan developed for each phase of healing process Injury prevention plan includes the following elements: Develops written plan Selects appropriate modalities Selects appropriate treatment interventions Plan addresses various risk factors Implements written plan

SECOND SEVEN WEEKS			
	Evaluation of Upper Ex	tremity Injuries	
Cervical Spine/Neck History Joint play			
Shoulder Complex/Arm Inspection skills Special testing		Special testing	
Elbow/Forearm Girth measurement Neurological screening		Neurological screening	
Wrist	Palpation Functional assessment		
Hand/Fingers	ROM assessment Postural assessment		
MMT			
Evaluation of Head Injuries			
Palpation of facial structures	- SCAT 5	- Function of cranial nerve	
Assessment of PEARL/PEARLA	- Appropriate test procedure for cranial nerve		
Assessment of eye mobility	- VOMS	Concussion treatment	

Revised 12/15/20

Type of nerve (sensory, motor, mixed)

Matches treatment to symptoms

Appropriate implementation of plan

Cranial nerve assessment (I-XII)

UW-Green Bay Master of Athletic Training Clinical Education Framework

V. 2 F.H. Cl. 1 ISL'II. A. 11 AT 7/2				
	Year 2 – Fall: Clinical Skills Assessed in AT 762			
Students should continue to perform skills assessed in AT 760 & AT 761 Students should perform the following skills on a patient with preceptor approval and supervision				
Students should perform the following skills on a patie				
D C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		nd Emergent Care		
Performs emergency evaluation, provides appropriate t	reatment and manageme	ent, and makes appropriate transf	er/referral of patient to other healthcare provider(s) for	
the following scenarios:	3.6		26 (10 1 1 1 1	
- Environmental emergency		of traumatic injuries to the face	- Management of life-threatening metabolic	
- Immediate management of bleeding	and head	6	emergencies	
- Management of musculoskeletal emergencies		of traumatic spine injuries	- Management of exertional sickling	
- Emergency management of injuries to the		of life-threatening cardiac	- Management of drug overdose	
abdominopelvic region	conditions			
	- 136		•	
		ment of Upper Extremity Injur		
Perform full evaluation for Injuries to the:	Develops treatment pl		Perform on-field evaluation (may be simulated as	
- Cervical Spine/Neck	- Short term goa		needed):	
- Shoulder complex/Arm	- Long term goa		- Cervical Spine/Neck	
- Elbow/Forearm	-	d for each phase of healing	- Shoulder complex/Arm	
- Wrist	process		- Elbow/Forearm	
- Hand/Fingers	1 1	oriate modalities	- Wrist	
Student makes diagnostic decision	Selects appropriate tre	eatment interventions	- Hand/Fingers	
Includes differential diagnosis			Performs abbreviated evaluation	
Evaluations may be simulated as needed			Performs appropriate removal from field	
			Provides appropriate immediate care	
		ment of Lower Extremity Injur		
Demonstrates ability to perform on-field evaluation and	l management of	Demonstrates ability to develop and implement long-term and post-surgical		
lower extremity injuries		rehabilitation plan for lower extremity conditions		
 Performs abbreviated injury evaluation 		- Identifies modifiable risk factors		
- Performs appropriate removal from field		- Utilizes patient-centered care concepts		
- Provides appropriate immediate care		- Develops and implements comprehensive treatment plan		
Demonstrates ability to perform clinical evaluation and management of lower				
extremity injuries		prevention/sport performance in	mprovement plan	
- Performs in-depth evaluation process				
- Develops and implements appropriate treatment plan				

Evaluation and M	anagement of Head Injuries	
Demonstrates ability to perform comprehensive head injury evaluation and immediate treatment - Perform an in-depth injury evaluation process - Provide appropriate immediate treatment	Demonstrates ability to develop and implement a head injury treatment plan - Develops treatment plan according to symptom manifestation - Includes return to play criteria - Includes return to learn criteria - Appropriate pacing of activities	
Psychosocial As	pects of Injury and healing	
Demonstrates ability to implement relaxation techniques into rehabilitation plan - Selects appropriate relaxation technique - Implements technique into rehabilitation plan Demonstrates ability to identify red flags related to mental health issues - Describes signs and symptoms of mental health conditions Demonstrates ability to document implement appropriate referral - Appropriate documentation of signs and symptoms - Makes appropriate referral to mental health care provider	Demonstrates ability to evaluate a patient with mental health concerns and make appropriate referral - Conducts thorough evaluation - Demonstrates empathy for the patient - Correctly identifies red flags - Provide appropriate communication to the patient and other healthcare providers - Makes appropriate referral	
Evaluation and Managen	nent of General Medical Conditions	
Demonstrates ability to perform a medical examination incorporating the following elements as appropriate: - Medical history - Chief complaint - Course of present illness - Personal medical history - Family medical history - Review of systems - Physical examination - Inspection - Vital signs - Percussion - Palpation - Smell/odor - Auscultation - Neurological exam	- Appropriate use of the following instruments	

Nutritional and Pharmacological interventions

Able to identify nutritional red flags for eating disorder referral

Demonstrates ability to make appropriate referral for nutritional consultation

- Appropriate documentation of signs & symptoms
- Makes appropriate referral

Demonstrates ability to provide appropriate nutritional guidelines

- Identifies patient/client needs
- Develops plan with the patient/client

Demonstrates appropriate use and documentation of pharmacological agents

- Identifies needs of patient/client
- Develops plan in consultation with the patient/client and supervising physician
- Appropriate documentation of any medications/drugs

Year 2 – Fall: AT 763 Clinical Immersive Experience I

Students will participate in a practice-intensive experience that allows the student to experience the totality of care provided by an athletic trainer. Students will demonstrate holistic proficiency on the skills below.

Preceptors will provide feedback to the student on their performance and make a recommendation to the MAT Coordinator of Clinical Education regarding the student's preparedness to function autonomously.

Injury Prevention

Demonstrates ability to appropriately the following skills in the prevention and management of injuries:

Taping Casting Wrapping Bracing Padding Splinting

Health Promotion and Wellness

Advocate for the health needs of clients, patients, communities, and populations.

Identify health care delivery strategies that account for health literacy and a variety of social determinants of health.

Incorporate patient education and self-care programs to engage patients and their families and friends to participate in their care and recovery.

Acute and Emergent Care

Performs emergency evaluation, provides appropriate treatment and management, and makes appropriate transfer/referral of patient to other healthcare provider(s).

Evaluation and Management of Musculoskeletal Injuries

Demonstrates ability to perform on-field evaluation and management of musculoskeletal injuries commonly seen in AT practice

Demonstrates ability to perform clinical evaluation and management of musculoskeletal injuries commonly seen in AT practice

Demonstrates ability to develop and implement long-term and post-surgical rehabilitation plan for musculoskeletal injuries

Demonstrates ability to develop and implement a comprehensive injury prevention/sport performance improvement plan

Evaluation and Management of Head Injuries

Demonstrates ability to perform comprehensive head injury evaluation and immediate treatment

Demonstrates ability to develop and implement a head injury treatment plan

- Includes return to play criteria
- Includes return to learn criteria

Psychosocial Aspects of Injury and healing

Demonstrates ability to implement relaxation techniques into rehabilitation plan

Demonstrates ability to evaluate a patient with mental health concerns and make appropriate referral

Evaluation and Management of General Medical Conditions

Demonstrates ability to perform a medical examination for conditions commonly seen in AT practice

Demonstrates ability to make proper referral for further evaluation of medical condition

Demonstrates ability to provide appropriate treatment of medical conditions in consultation with supervising physician

Nutritional and Pharmacological interventions

Demonstrates ability to identify signs & symptoms of eating disorder and make appropriate referral

Demonstrates ability to provide appropriate nutritional guidelines based on patient/client needs

Demonstrates ability to make appropriate referral for nutritional consultation

Healthcare Administration

Performs administrative duties related to the management of physical, human, and financial resources in the delivery of health care services
Uses a comprehensive patient-file management system (including diagnostic and procedural codes) for documentation of patient care and health insurance management

Develops, implements, and revises policies and procedures to guide the daily operation of athletic training services

Develops, implements, and revises policies that pertain to prevention, preparedness, and response to medical emergencies and other critical incidents Communicates effectively and appropriately with clients/patients, family members, coaches, administrators, other health care professionals, consumers, payors, policy makers, and others.

UW-Green Bay Master of Athletic Training Clinical Education Framework

Year 2 – Spring: AT 764 Clinical Immersive Experience II

Students will participate in a practice-intensive experience that allows the student to experience the totality of care provided by an athletic trainer.

Student will participate in the day-to-day and week-to-week role of an athletic trainer

Students will demonstrate holistic proficiency on the skills below.

Preceptors will provide feedback to the student on their performance and make a recommendation to the MAT Coordinator of Clinical Education regarding the student's preparedness to function autonomously.

Clinical Site Orientation Checklist

ATS:	
Preceptor Name:	
Clinical Site:	
By checking each of these boxes, I acknowledge my preceptor and I d procedures and where I can access them in the future.	iscussed each of these policies and
 □ Emergency Action Plan Review □ Institutional Blood-borne pathogen exposure plan □ Institutional Communicable and infectious disease policies □ Institutional Documentation policies and procedures □ Patient privacy and confidentiality protections □ Plan for patients to be able to differentiate practitioners from 	
Please collaboratively develop three measurable goals you want to a the goals below.	achieve during this rotation. List
1	
2.	
3.	
Preceptor Signature:	Date
ATS Signature:	Date

Request of Absence from Clinical Experience

Ι,	(print name), am requesting advance
approval for absence from my assigned below. I have received approval from	I clinical experience on the dates and times as listed my clinical instructor, and in anticipation of my absence I
have suggested a replacement if needed	d to complete my responsibilities/duties while I am gone.
Date Submitted:	(mm/dd/yyyy)
From:	
From: (time, date)	
To:	
To:(time, date)	
Assigned Clinical Experience (including etc. that you are responsible for.):	ng specific schedule for event(s), practice(s), treatments,
Reason for Absence:	
	_
Requesting ATS signature	Date
Preceptor Signature	Date
CCE Signature	Approval Date

ASSUMPTION OF RISK

I understand that while I am participating in clinical rotations as part of my education in Athletic Training, there is an inherent risk of injury. I understand that such an injury can range from a minor injury to a major injury. Participation in your clinical rotation could result in death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to all internal organs, serious injury to all bones, joints, ligaments, muscles, tendons and other aspects of the musculoskeletal system, and serious injury or impairment to other aspects of your body, general health and well-being. Such injuries could cause permanent disability such as paralysis, permanent bone or joint injury, permanent scars, or other chronic disabling conditions.

I hereby accept and assume the risk of injury and un injury.	derstand the possible consequences of such
Print your Name	-
Student Signature	Date

CONFIDENTIALITY AGREEMENT

I,	, agree that any information acquired
regarding stud	dent athletes or patients during clinical experiences is to be held in the strictest of
confidence. I	nformation regarding the patients' overall health will be used solely for the purpose
of education a	and treatment.
The above na	med further agrees to hold any information including playing status due to
injury/illness	in confidence and shall not disclose any information to a third party, e.g. coaches,
friends, team	mates, social media, etc.
The above na the demerit po	med student understands that any violation of this policy will result in activation of olicy.
I have read th access to.	e above and agree to maintain the confidentiality of all information that I have
ATS Signatur	re Date

COMMUNICABLE DISEASE POLICY

I,	, have read, understand and agree to abide
by the MAT Communicable Disease P	olicy as stated in the MAT Policy and Procedure Manual.
I agree to notify the appropriate person	nnel if I am diagnosed with a potentially infectious disease
(all names will remain confidential). I	understand that I may not be able to attend clinical
rotations while affected by a communic	cable disease that could pose a threat to those I come in
contact with.	
A TTO G	
ATS Signature	Date

University of Wisconsin-Green Bay MASTER OF ATHLETIC TRAINING PROGRAM

POLICY AND PROCEDURE MANUAL STATEMENT OF UNDERSTANDING

I,	have read, understand and agree to abide
by all policies in the UW-Green Bay Mas	ter of Athletic Training Program's Policy and
Procedure Manual. I am aware of the repo	ercussions that accompany any violations.
ATS Signature	 Date