MASTER OF SCIENCE IN ATHLETIC TRAINING PROGRAM
GRADUATE STUDENT HANDBOOK
2014-2015

Valerie W. Herzog, EdD, LAT, ATC
Graduate Athletic Training Program Director

Jennifer Ostrowski, PhD, LAT, ATC
Undergraduate Athletic Training Program Director

Matt Donahue, PhD, LAT, ATC
Clinical Education Coordinator

Justin Rigby, PhD, LAT, ATC
Assistant Professor of Athletic Training

Weber State University
Ogden, Utah
Table of Contents

History ............................................................................................................................................. 4
Mission .......................................................................................................................................... 5
Overarching Goals ......................................................................................................................... 5
MSAT CURRICULUM .................................................................................................................... 6
  Minimum Admissions Requirements .......................................................................................... 6
  Post-Admission Requirements .................................................................................................. 7
  Additional Admission Requirements for International Students .................................................. 7
Selection Process ............................................................................................................................. 8
Retention Requirements ................................................................................................................ 8
Advisement ....................................................................................................................................... 9
Transfer Credits ............................................................................................................................... 9
Failure of a Course ......................................................................................................................... 9
Leave of Absence ............................................................................................................................ 10
Prerequisite Course Requirements for MSAT ................................................................................ 11
2 Year Curriculum Sequence ......................................................................................................... 12
Graduation Requirements ............................................................................................................. 13
Academic Attendance in MSAT Courses ..................................................................................... 13
Grading Scale .................................................................................................................................. 13
Academic Counseling ................................................................................................................... 13
Scholarships .................................................................................................................................... 14
Academic Integrity .......................................................................................................................... 15
Harassment/Discrimination ......................................................................................................... 15
HPHP Department Student Conduct Policy WSU 1 ...................................................................... 16
  Grounds for Suspension or Dismissal ....................................................................................... 18
  Professional Organizations ....................................................................................................... 18
  Graduate Athletic Training Student Organization (GATSO) ..................................................... 19
MSAT Clinical Education Experience ............................................................................................. 20
  Preceptors (Clinical Instructors) .............................................................................................. 20
  Clinical Attendance .................................................................................................................. 20
  Changing your Clinical Assignment ......................................................................................... 22
  Clinical Education ..................................................................................................................... 22
  Clinical Education Guidelines .................................................................................................. 23
  Clinical Rotation Length and Hours ......................................................................................... 24
  Internships and Summer Camps ............................................................................................... 25
  Clinical Rotation Assignments ................................................................................................. 25
  General Medical Rotation ........................................................................................................ 26
  Liability Insurance .................................................................................................................... 26
  Clinical Rotations in the Summer or during Winter Break ....................................................... 26
  Clinical Rotation Evaluations ................................................................................................... 27
  Mid-rotation Preceptor/Student Meeting ................................................................................... 27
  Transportation to Clinical Education Experience ...................................................................... 28
  Transportation of an Ill or Injured Patient ............................................................................... 28
Cell Phones ................................................................................................................................ 28
Dress Code ............................................................................................................................... 29
Name Tags ............................................................................................................................... 30
Dress Code Violation .............................................................................................................. 31
Clinical Education Penalties (Clinical Probation) ................................................................ 31
Service Learning Hours .......................................................................................................... 32
HIPAA, Confidentiality, Privacy, and Security .................................................................... 33
Romantic Relationships with Athletes .................................................................................... 35
Student Conference Report - Violation of Clinical Education Policies .................................. 35
Grievance Procedure .............................................................................................................. 36
Communicable Diseases ......................................................................................................... 37
Participation in Extracurricular Activities ............................................................................. 38
Policies and Procedures .......................................................................................................... 38
APPENDIX A ............................................................................................................................ 39
  Physical Examination Form ................................................................................................. 39
  Technical Standards Form ..................................................................................................... 39
  Immunization Requirements ................................................................................................. 39
APPENDIX B ............................................................................................................................ 48
  WSU Bloodborne Pathogens Post-Exposure Procedures and Forms .................................... 48
Bloodborne Pathogens Post-Exposure Procedures & Forms .................................................... 49
  Introduction ........................................................................................................................... 49
  What is an occupational bloodborne pathogen exposure? .................................................... 49
  What are the possible exposure methods? ............................................................................ 49
  Post Exposure Procedures ................................................................................................... 49
  What are the exposed bloodborne individual's responsibilities? .......................................... 50
  What are the responsibilities of the department? ................................................................ 51
  What are the responsibilities of the supervisor? .................................................................. 51
  Forms ................................................................................................................................... 51
APPENDIX C ............................................................................................................................ 52
  Criminal Background Check Policy ...................................................................................... 52
  Drug Testing Policy Weber State University ........................................................................ 52
APPENDIX D ............................................................................................................................ 62
  Athletic Training Course Descriptions ................................................................................. 62
APPENDIX E ............................................................................................................................ 67
  Clinical Education Guidelines ............................................................................................... 67
APPENDIX F ............................................................................................................................ 69
  Clinical Evaluation Forms .................................................................................................... 69
APPENDIX G ............................................................................................................................ 95
  Change of Clinical Assignment Form .................................................................................... 95
APPENDIX H ............................................................................................................................ 97
  Confidentiality, Privacy, and Security Agreement ................................................................. 97
APPENDIX I ............................................................................................................................ 100
  Student Conference Report Form ........................................................................................ 100
APPENDIX J ............................................................................................................................ 102
  Varsity/Club Athletic Participation by Athletic Training Students ....................................... 102
Note: The Athletic Training faculty reserve the right to make necessary changes with regard to the student handbook. Students will be notified of any changes or additions. The Graduate Athletic Training Program Director will make final decisions in disputes over interpretations. **Revised 05/29/2014**
MASTER OF SCIENCE IN ATHLETIC TRAINING PROGRAM

History
The Weber State University Master of Science in Athletic Training Education Program (MSAT) was approved by the State of Utah Board of Regents in July 2007. The first class of graduate students began in the Fall 2008 semester. The program was awarded national accreditation by the Commission on Accreditation of Athletic Training Education (CAATE) in March of 2010. Graduates are eligible for the Board of Certification (BOC) examination and an athletic training license in Utah. The program is specifically designed for those students who have already obtained a bachelor’s degree in an allied health or exercise science field. Students with bachelor’s degrees in other fields may enter the program after satisfying prerequisite course work.

The Master of Science in Athletic Training Program provides students with knowledge and skills in the prevention, evaluation, treatment, and rehabilitation of musculoskeletal injuries and general medical conditions. The program covers the educational competencies and clinical proficiencies established by the National Athletic Trainers' Association (NATA) Education Council. Students will be prepared for a variety of career settings at the secondary school, college, university and private/clinical settings. The Master of Science in Athletic Training Program at Weber State University is housed in the Department of Health Promotion and Human Performance (HPHP) in the Jerry & Vickie Moyes College of Education.
Mission
The mission of the Weber State University Master of Science in Athletic Training Program is to provide a quality educational and research experience for students. Graduate students are presented with didactic and psychomotor experiences that will lead them to being able to exercise sound ethical judgment, achieve satisfying careers, and make positive contributions to their communities. In addition, the MSAT guides the student on the journey to become a lifelong learner through obligatory professional continuing education.

Overarching Goals

The MSAT curriculum is designed to:

- Prepare the student to meet the educational competencies and clinical proficiencies necessary to be eligible to sit for the Board of Certification (BOC) examination.
- Provide a research experience for the students to create both graduates that can conduct research as well as be consumers of published research.
- Prepare students to seek entrance into doctoral programs such as athletic training, sports psychology, kinesiology, and exercise physiology.
- Provide an individualized clinical plan for each student based on:
  - the student’s personal and professional interests
  - providing the students with a variety of experiences and preceptors
  - the accreditation clinical education standards
**MSAT CURRICULUM**

The WSU Master of Science in Athletic Training (MSAT) degree is designed to enable students with a bachelor’s degree in an area other than athletic training to obtain eligibility for the Board of Certification (BOC) examination. This program is accredited by the Commission on Accreditation of Athletic Training Education (CAATE). Graduates of the MSAT are eligible for the Board of Certification (BOC) examination.

The program provides students with knowledge and skills in the prevention, evaluation, treatment, and rehabilitation of musculoskeletal injuries and general medical conditions. The Master of Science in Athletic Training program is specifically designed to prepare students for a career in allied health care as a certified athletic trainer. Athletic trainers are currently employed in colleges and universities, public and private high schools, corporations, physical therapy clinics, professional organizations, the military, factories, and hospitals (www.nata.org - National Athletic Trainers’ Association).

**Minimum Admissions Requirements**

Bachelor’s degree  
Admission to Weber State University (Students apply only to the MSAT and will be admitted to WSU and the MSAT concurrently. Students do NOT need to apply for WSU general admissions)  
GRE scores (only required if GPA is below a 3.0)  
Minimum 3.0 GPA*  
Submit Graduate Athletic Training Student Application (found online at: weber.edu/athletictraining/graduateadmissions.html)  
Submit Application Essay (see online application for details)  
Two References - at least one reference must be a college-level instructor  
Grade of C or better in all prerequisite courses (all prerequisites must have been completed within the last 10 years prior to application)**  
Program Interview - in person or over the phone  
Completed Technical Standards Form  
Official Transcripts from other colleges/universities attended  
Physical examination and proof of immunizations  
Hepatitis-B vaccination (can be completed in first semester if deficient)  
Current Emergency Medical Response and CPR for Professional Rescuers and Healthcare Providers certification cards (can be completed in first semester if deficient)  
Pay Application fee

* Grade point averages between 2.75 and 2.99 will be considered if GRE scores are above average.
** Students who are deficient in one or more prerequisite courses may be admitted on a conditional basis if the courses can be added to the schedule while still meeting the prerequisites prior to each graduate course.

The application deadline is February 1 for the following summer semester. Applications received after the deadline will be considered on a rolling admissions basis if available slots still exist. Students are encouraged to apply by the February 1st deadline, as the program will likely reach capacity at that point. The online application may be accessed on-line at weber.edu/athletictraining/graduateadmissions.html.

**Post-Admission Requirements**

After formal admission to the Athletic Training Master’s degree program, students are required to complete an FBI background check and drug test. The WSU Master of Science in Athletic Training Program enters into Affiliation Agreements with multiple healthcare facilities and schools throughout the state. These agreements provide WSU MSAT students and faculty authorized access to facility resources and patients. In response to stipulations contained within one or more of these Agreements, the WSU MSAT requires students admitted to the program to submit to an FBI level criminal background check as well as a urine drug test. This screening process has been mandated by the WSU MSAT in an effort to more effectively protect the safety and well-being of the patients, clients, and residents of those facilities, and is fully supported by the Department of Health Promotion and Human Performance and the MSAT faculty.

Both the background check and the drug test will be completed during the student’s first semester. The expenses (approximately $80) will be paid for by the student. The detailed drug testing and background check policies can be found in Appendix C.

**Additional Admission Requirements for International Students**

All international students and any applicants educated outside the U.S. must demonstrate proficiency in English. Those whose native language is not English, or whose language of instruction for their undergraduate degree was not English, will be required to submit a score from the Test of English as a Foreign Language (TOEFL) which is not more than two years old and on which a minimum score of 563 (paper-based) or 223 (computer-based), or 85 (internet-based) has been earned. The MSAT also accept the International English Language Testing System (IELTS) - applicants may have an official score report sent to the MSAT Program Director which is not more than two years old and on which a minimum score of 6.5 has been earned.
Selection Process

All applicants will be ranked using a numerical scale on the following criteria:
- Cumulative GPA/GRE Scores [0-4 weight in selection formula = 40%]
- Application Essay [0-4 weight in selection formula = 25%]
- References [0-4 weight in selection formula = 15%]
- Previous athletic training experience and strength of applicant’s commitment as reflected in interview responses [0-4 weight in selection formula = 20%]

Students receiving the highest scores in the rating process will be invited to enter the Master of Science in Athletic Training Program. The selection committee is comprised of the MSAT faculty. The number of students chosen to enter the program each year will vary, in compliance with accreditation guidelines concerning clinical instructor-to-student ratios. Selection into the MSAT is competitive and satisfaction of the minimum requirements does not guarantee admission.

Applicants not invited to enter the MSAT may reapply the following year. All applicants who re-apply must meet all requirements in effect at the time of re-application. Students who choose to reapply must review the program website and/or catalog for current admission requirements at that time.

All students selected for the MSAT must provide evidence of being able to meet the Technical Standards for Admission of the program. Only those students who verify that they can meet those technical standards, with or without reasonable accommodations, will be allowed to enter the program. If the student’s status changes related to the technical standards, it is the student’s responsibility to inform the Program Director of these changes.

Retention Requirements

After students are selected into the MSAT, retention in the program will be based on the following criteria:
- Grade “B-” or better in all required courses (includes Graduate Practicum courses).
- Maintain an overall Weber State University Graduate GPA of 3.0.
- Adhere to WSU Athletic Training Policies and Procedures.
- Adhere to MSAT Athletic Training Student Handbook Policies.

Students who fail to meet the retention criteria will be placed on probation in the MSAT program for one semester. If standards are not met by the end of the probationary period, the student will be dismissed from the program. Students who receive a grade lower than a “B-” in any required course (MSAT course or pre-requisite course) must repeat that course and receive a grade of “B-” for MSAT courses, or a “C” for pre-requisite courses, or higher to remain in the program. Failure to repeat the course (when offered) will result in dismissal from the program. Athletic Training Policies and Procedures are available in the MS Athletic Training Student Handbook. Students who receive a grade lower than a “B-“ in two or more MSAT or pre-requisite courses will be dismissed from the program.
Advisement

Students enrolled in the MSAT program will be assigned a faculty advisor. Students will be required to meet with their faculty advisor at least once a semester but will be encouraged to engage in dialogue when necessary regarding academic success, clinical assignments, and/or personal or professional issues.

Transfer Credits

In compliance with the Higher Education Act, Weber State University only accepts transfer credit from regionally accredited colleges and universities.

Students who have completed graduate athletic training coursework at another CAATE-accredited entry-level master’s program may apply for up to 9 transfer credits. The transfer of graduate credits from non-CAATE-accredited programs will be considered on a case-by-case basis. Approval of all transfer credits requires an official transcript, a copy of the course syllabus, and approval by the WSU MSAT Program Director.

Failure of a Course

- Students must earn a “B-” or better in all required MSAT courses and a C or better in all pre-requisite courses. Any grade lower than a B- for MSAT courses or a C for pre-requisite courses will be considered a failure of the course.
- Students who fail any required MSAT or pre-requisite course will be placed on probation in the MSAT for one semester. If standards are not met by the end of the probationary period, the student will be dismissed from the program. Students who receive any failing grade (as defined above) in a required MSAT or pre-requisite course must repeat that course and receive a passing grade to remain in the MSAT Program. Failure to repeat the course (when offered) will result in dismissal from the program.
- Failure of 2 required courses and/or failure of the same MSAT or pre-requisite course twice may result in dismissal from the MSAT program at the discretion of the Program Director.
- Incomplete grades in Graduate Practicum courses must be completed before taking another Graduate Practicum course.
- Students may repeat required courses only one time. Students who do have been dismissed from the MSAT Program must re-apply for admission to the MSAT.
**Leave of Absence**

Students may need to take a leave of absence due to illness, injury, religious missions, military assignments, or other personal issues. Students who do so must submit a request in writing to the MSAT Director. If the time period is longer than one calendar year, the student must retake both the final written and oral/practical exam from the last clinical application course completed. If the student scores 70% or higher on both exams, he/she will be allowed to continue their course of study as scheduled. However, if the student does not earn the minimum score on both exams, remediation will be required. The MSAT faculty will develop a remediation plan which will include independent study, additional examinations, and/or retaking of required courses. Remediation must be completed prior to continuing with the student's AT major coursework.

It is not in the student's best interest to continue matriculating through the program if they have not retained the knowledge from previous courses. Our goal is to maximize the student's ability to succeed in both future coursework and on the BOC certification examination.
Prerequisite Course Requirements for MSAT

Required Prerequisite Courses (31 credit hours)
(or equivalent courses - syllabi or catalog course description required)

* AT 2300 Emergency Response (3)
* HTHS 2240 Introduction to Pharmacology (3)
* HLTH SS1030 Healthy Lifestyles (3)
* NUTR LS1020 Foundations in Nutrition (3)
* PEP 3280 Teaching Neuromuscular Conditioning (2)
* PEP 3500 Kinesiology/Biomechanics (3)
* PEP 3510 Exercise Physiology (3)
* PSY SS1010 Introductory Psychology (3)
* ZOOL 2100 Human Anatomy with Lab (4)
* ZOOL 2200 Human Physiology with Lab (4)

Course Requirements for MSAT (53 credit hours)

Didactic Courses
* MSAT 6080 Research Methods I (3)
* MSAT 6085 Research Methods II (3)
* MSAT 6090 Research Methods III (3)
* MSAT 6200 Psychology of Sport, Injury, and Rehabilitation (3)
* MSAT 6300 Orthopedic Assessment - Lower (3)
* MSAT 6301 Orthopedic Assessment - Upper (3)
* MSAT 6350 General Medical Conditions and Advances in Athletic Training (3)
* MSAT 6400 Basic Modalities (3)
* MSAT 6401 Advanced Modalities (3)
* MSAT 6431 Orthopedic Taping, Wrapping, & Bracing (1)
* MSAT 6450 Basic Rehabilitation (3)
* MSAT 6451 Advanced Rehabilitation (3)
* MSAT 6600 Athletic Training Management (3)
* MSAT 6700 Advanced Diagnostic Imaging for the Athletic Training Profession (1)
* MSAT 6998 Master's Board of Certification (BOC) Exam Preparation (1)
* MSAT 6999 Critical Thinking (1)

Clinical Courses
* MSAT 6500 Introduction to Graduate Athletic Training (2)
* MSAT 6501 Graduate Practicum I (2)
* MSAT 6502 Graduate Practicum II (3)
* MSAT 6503 Graduate Practicum III (3)
* MSAT 6504 Graduate Practicum IV (3)

See Appendix D for a complete list of course descriptions.
## 2 Year Curriculum Sequence

<table>
<thead>
<tr>
<th>Semester</th>
<th>Courses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Summer Semester (year 1)</strong></td>
<td>(2) MSAT 6500 – Intro to Graduate AT</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6300 – Ortho Assess - Lower Ext</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6200 – Sport Psychology</td>
</tr>
<tr>
<td></td>
<td>(1) MSAT 6431 - Orthopedic Taping &amp; Bracing</td>
</tr>
<tr>
<td></td>
<td><strong>9 Total</strong></td>
</tr>
<tr>
<td><strong>Fall Semester (year 1)</strong></td>
<td>(2) MSAT 6501 – Graduate Practicum I</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6301 – Ortho Assess – Upper Ext</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6400 - Basic Modalities</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6080 - Research Methods I</td>
</tr>
<tr>
<td></td>
<td><strong>11 Total</strong></td>
</tr>
<tr>
<td><strong>Spring Semester (year 1)</strong></td>
<td>(3) MSAT 6502 - Graduate Practicum II</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6401 - Advanced Modalities</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6450 – Basic Rehab</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6085 - Research Methods II</td>
</tr>
<tr>
<td></td>
<td><strong>12 Total</strong></td>
</tr>
<tr>
<td><strong>Fall Semester (year 2)</strong></td>
<td>(3) MSAT 6503 - Graduate Practicum III</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6350 – General Medical - AT</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6451 – Adv. Rehab.</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6090 - Research Methods III</td>
</tr>
<tr>
<td></td>
<td><strong>12 Total</strong></td>
</tr>
<tr>
<td><strong>Spring Semester (year 2)</strong></td>
<td>(3) MSAT 6504 - Graduate Practicum IV</td>
</tr>
<tr>
<td></td>
<td>(3) MSAT 6600 - Management</td>
</tr>
<tr>
<td></td>
<td>(1) MSAT 6998 – BOC Exam Prep</td>
</tr>
<tr>
<td></td>
<td>(1) MSAT 6700 – Advanced Diag. Imaging</td>
</tr>
<tr>
<td></td>
<td>(1) MSAT 6999 - Critical Thinking</td>
</tr>
<tr>
<td></td>
<td><strong>9 Total</strong></td>
</tr>
</tbody>
</table>
Graduation Requirements

To complete the Master of Science in Athletic Training degree, the student must meet the below criteria:

1. Grade "B-" or better in all MSAT courses (includes clinical courses).
3. Adhere to MSAT Student Handbook policies.
4. Successfully complete all proficiencies.

(NOTE: the student is responsible for completing courses in MSAT and for fulfilling all requirements for graduation.)

Academic Attendance in MSAT Courses

The Weber State University MSAT faculty expect students to attend all classes for which they have registered. Registration in a course is regarded as an agreement between the student and the institution, the fulfillment of which depends on regular and punctual class attendance. The attendance policy will be clearly stated in each MSAT course syllabus by the respective faculty member. If there is to be an unavoidable absence, the student should inform the instructor in advance and be responsible for making up all work that is missed regardless of the reason for the absence.

Students and faculty are expected to be on time for all MSAT courses. Students must wait ten (10) minutes for the MSAT instructor to arrive and start the scheduled class. If the instructor does not appear after ten minutes, the students are excused UNLESS prior arrangements have been made by the instructor.

Grading Scale

The specific details of how a student is to earn a certain grade in his/her classes will be explained by the instructor at the beginning of each class each semester, and outlined in each course syllabus.

Students must earn a minimum of a 70% on all final written and oral/practical exams given in the graduate practicum courses.

Academic Counseling

Each student should meet with the Graduate AT Program Director/advisor at least once per semester, prior to registering for the following semester.
Students are encouraged to utilize their faculty advisor for more than just course scheduling. All faculty members in the MSAT Program have an "open door policy" whereby students can utilize them for discussions regarding academic and/or personal problems, career counseling, etc.

During the pre-registration period, students should make an appointment with the Graduate AT PD to schedule classes. It is extremely important that MSAT students have very thorough academic advising because of the strict sequence of courses. Failure to consistently meet with one's advisor could possibly create a situation where the student has to stay an extra semester or year to take the course(s) he/she missed. Therefore, it is the student's responsibility to meet with his/her athletic training advisor a minimum of one time per semester, and to keep abreast of course and curriculum offerings and changes.

Scholarships

There are two different scholarships that are awarded to Athletic Training Students by the WSU MSAT. Applications become available during each spring semester. Total amount awarded varies per year based on the funds provided by the Utah Legislature.

Tuition Waivers:
Based on Overall GPA
Financial Need.
Utah Residents only.

Out-of-state Tuition Differential Waivers:
Available for both years of the program for academically qualified students. Students must have an undergraduate cumulative GPA of 3.2 with most consideration given to the last 60 credit hours. Students with a lower GPA, but significant work experience will be considered as well.
If interested, simply indicate on your application that you wish to be considered.
Non-Utah Residents only.

Other scholarships for athletic training students are available annually through outside entities. The faculty will assist those students interested in applying for any or all of the following:

Big Sky Conference Football Officials Athletic Training Student Scholarship - applications are due in May each year.

National Athletic Trainers' Association Research and Education Foundation Entry-level Athletic Training Student Scholarship - applications are due in February each year. Applicants must be members of the NATA by the previous November and renew their NATA membership in the year in which they apply. See their website for more details.
Academic Integrity

Cheating and other forms of academic dishonesty will NOT be tolerated. The policy of the Weber State University Student Code, found at http://weber.edu/ppm/6-22.htm will be enforced. Any individual caught cheating on examinations and/or assignments or plagiarizing will receive an automatic “E” for their final grade. Furthermore, a letter will go into the student’s file describing the situation.

Students have a special responsibility to academic standards, since Weber State University is an academic institution. Academic dishonesty is a particularly serious offense. Academic dishonesty is defined as, but not limited to:

- Giving or receiving help with intent to falsely represent one’s work
- Plagiarizing (A willful misrepresentation of another person’s work as one’s own.)
- The use (or appearance of use) of notes, books, cell phones, cameras, or any other unauthorized sources during tests of any kind, unless specific instructions are given permitting such use.
- Altering the record of any grade in any grade book or record.
- Any other type of misconduct, offense or manifestation of dishonesty or unfairness in relation to academic work.
- Unauthorized possession of a test prior to, during or after the administration of a test.
- Defacing, mutilating, destroying, modifying, stealing, hiding or in any other way inhibiting or preventing access by others to library materials or databases.
- Falsely documenting clinical hours.
- Falsifying research data.

Harassment/Discrimination

Weber State University is committed to providing an environment free from harassment and other forms of discrimination based upon race, color, ethnic background, national origin, religion, creed, age, lack of American citizenship, disability, status of veteran of the Vietnam era, sexual orientation or preference or gender, including sexual/gender harassment. Such an environment is a necessary part of a healthy learning and working atmosphere because such discrimination undermines the sense of human dignity and sense of belonging of all people in the environment. Thus, students in this program should practice professional deportment, and avoid treating others in a manner that is demeaning or derisive in any respect.

While diverse viewpoints and opinions are welcome in this program, in expressing them, we will practice the mutual deference so important in the world of work. Thus, while we encourage you to share your opinions, when appropriate, you will be expected to do so in a manner that is respectful towards others, even when you disagree with them.

If you have questions regarding the university’s policy against discrimination and harassment you may contact the university’s AA/EO office (626-6239) or visit its website: http://departments.weber.edu/aaeeo/
I. INTENT: The intent of this policy is to ensure the maintenance of academic, professional, and ethical standards as well as the physical and emotional health and safety of HPHP students, faculty, staff, and administrators.

II. AUDIENCE:
   a. This policy applies to all students enrolled in any major, minor, or course offered by the HPHP department whether face to face, online, hybrid, distance learning, or Ednet.
   b. It applies to all modes of interaction including face to face, email, discussion posts, and chat rooms. Such interactions may take place on or off campus tied to official course business.
   c. Each student is responsible for adhering to this policy and the policies that it makes reference to.

III. CROSS-REFERENCE:
   a. Students should read the official WSU Student Code available: http://www.weber.edu/ppm/Policies/6-22_StudentCode.html. This code provides details on student responsibilities, academic honesty, due process, and appeals among many other things.
   b. Each academic program in the HPHP department (see http://departments.weber.edu/hp/) may have its own admission and retention standards. In such cases, this policy should be used in conjunction with the program policy; both policies equally apply.
   c. Weber State University (WSU) has an affirmative action office that handles discrimination and harassment (http://departments.weber.edu/aaeeo/).

IV. HOW STUDENTS SHOULD BEHAVE: They should
   a. Adhere to the WSU Student Code.
   b. Treat others equitably and demonstrate respect for the dignity, individuality, culture, and values of each person.
   c. Exemplify honesty and integrity and behave morally and ethically.
   d. Respect the personal, academic, and professional rights of others.
   e. Do their own course work unless specifically instructed to collaborate.
   f. Demonstrate commitment and dedication to learning (such as by coming to class prepared and with required course materials) and openness to new ideas.
   g. Safeguard others from conditions detrimental to learning, emotional or physical health, or safety.
   h. Work cooperatively with other students, faculty, staff, and administrators.
   i. Share their opinions in a manner that is respectful toward others even when disagreements occur.
V. HOW STUDENTS SHOULD NOT BEHAVE: They should refrain from
   a. Disrupting class or the HPHP department and facilities environment.
   b. Academic dishonesty (such as cheating, plagiarism, and violating copyright laws).
   c. Unprofessional or unethical conduct.
   d. Harassing or discriminating against others for any reason.
   e. Insubordination (defiance of authority).
   f. Using, distributing, or possessing illegal drugs or controlled substances.
   g. Engaging in criminal and unstable behavior (inconsistent with good societal
citizenship).
   h. Other incidences which may not be listed above.

VI. GRIEVANCES: The HPHP department recognizes the rights of students, faculty, staff, and
administrators to express grievances and attempt to seek solutions and answers to
problems, complaints, or injustices arising from the day-to-day working relationships and
differences which may occur between students, faculty, staff, and/or administration.

   a. Whenever a misunderstanding or problem exists, first the parties (student and
individual in grievance) are urged to discuss the situation immediately in a calm
and constructive manner and according to the Student Code (see section IIIa).
   b. If the matter is not settled by following section VIa, then the grievance may be heard
and settled by the HPHP department grievance hearing committee. This
committee shall consist of a representative from each program area, usually
program directors, and the department chair as an ex-officio member who will
determine the committee chair. The committee will follow the Student Code (see
section IIIa).

VII. POLICY VIOLATION OUTCOMES:
   a. Failure to comply with this policy can result in a warning (notification of wrong
doing), probation (trial period during which an offender has time to redeem
himself or herself), suspension (temporary removal from one or more courses
with possibility for future reinstatement), dismissal (permanent termination), or
expulsion (removal from the institution).
   b. The offending student may be dismissed from their courses without refund,
dismissed from their program of study (Major, Minor, or Emphasis), lose their
right to use the HPHP department facilities (Swenson Building and Stromberg
Complex) and possibly other campus facilities.
   c. Depending on the incidence and the outcome of section VI, an incidence report may
be filed with the HPHP department chair and/or the WSU Dean of Students
(http://www.weber.edu/DeanOfStudents) and/or the police and/or other parties
including but not limited to financial aid, scholarship, athletics, and records.
Grounds for Suspension or Dismissal

A student can be suspended or dismissed from the program at any time during his/her stay for violating any of the below violations. Suspension is defined as a temporary removal from one or more courses with possibility for future reinstatement. Dismissal is defined as a permanent termination from the program. Suspended or dismissed students have the right to appeal the decision by referring to the Grievance Policy and Procedures as stated in the MSAT Student Handbook.

1. Academic dishonesty as explained above.
2. Failing grades in two MSAT and/or pre-requisite courses.
3. Failing grade on second attempt of an MSAT or prerequisite course.
4. Failure to accomplish practicum course requirements, such as clinical education hours, competencies, or proficiencies.
5. Dismissal from a clinical education setting.
6. Unprofessional or unethical conduct
7. Insubordination.
8. The conviction and/or known use, distribution, or possession of illegal drugs or controlled substances.
10. Other incidences which may not be listed above.

Professional Organizations

In the following section you will find links to the applications for joining some of the major national and state professional organizations in Athletic Training/Sports Medicine.

1. The National Athletic Trainers Association: www.nata.org
2. The Utah Athletic Trainers Association: www.rmata.org/utah
3. The American College of Sports Medicine: www.acsm.org

These sites can also be accessed via a link on the WSU Athletic Training webpage - http://programs.weber.edu/athletictraining.

Joining a professional organization is one mechanism of demonstrating your interest and commitment to the profession. Additionally, the BOC certification exam is less expensive for a student who is a member of the NATA.

It is STRONGLY encouraged for all WSU MSAT students to join the National Athletic Trainers’ Association.
Graduate Athletic Training Student Organization (GATSO)

All Graduate Athletic Training students are encouraged to become members of the WSU Graduate Athletic Training Student Organization (GATSO). The faculty believes it is very important for students to take an active role in the continuing development and support of the GATSO. Moreover, by having more students participate and become active members, fund-raising for the club should increase, as well as the camaraderie between students and between students and faculty/staff. Additionally, fund-raising will enhance the potential for more students to attend state, district, and/or national Athletic Training/Sports Medicine Conferences. Students who do not join the club will not receive club benefits such as athletic training items purchased for students and/or financial assistance to attend conferences.
MSAT Clinical Education Experience

Preceptors (Clinical Instructors)

The MSAT uses Preceptors (clinical instructors) to supervise clinical education experiences for students to meet accreditation requirements. Preceptors are certified athletic trainers (ATC) in good standing with the BOC or other credentialed health care professionals as defined by the American Medical Association and the American Osteopathic Association. In addition, the Preceptor must participate in a Preceptor Workshop offered by the MSAT program or participate in an individualized training program with the Clinical Education Coordinator (via a Clinical Instructor Educator).

Preceptors shall provide direct visual and auditory supervision for the student(s) assigned to him/her. In coordination with the practicum instructor, the Preceptor works with a student to develop increased proficiency in the skills delineated by the practicum course.

Clinical Attendance

Each student attending the MSAT has the privilege, not the right, to attend the assigned clinical education experiences. Students are expected to follow all rules of ethics and conduct delineated in this handbook. If any student is dismissed from the clinical education experience for disciplinary behavior, his/her education in the MSAT may be terminated.

Students are to attend the clinical education experience at the time and facility designated by Coordinator of Clinical Education and MSAT Director. Students cannot miss MSAT courses or practicum classes to attend clinical education experiences without permission by their classroom instructor.

Each Graduate Practicum course has a minimum clinical hours requirement. If a student is short of that minimum by 50 hours or more the student will automatically receive a grade of “E” for the course. If a student is short of the minimum hours by less than 50 hours (short 1-49 hours), his/her final grade in the course will be reduced by 0.25% for each missing hour. Refer to “Clinical Penalties Policy” regarding suspension from clinical rotations. Students are required to be at their clinical site a minimum of 2 days per week but should not exceed a maximum of 25 hours per week during the semester. If a student chooses to earn clinical hours outside of a regular semester, such as fall pre-season practices, the student may choose to exceed 25 hours per week.

On the student’s first day at a new clinical rotation, the student must complete an orientation with their Preceptor including reviewing the Emergency Action Plan and any other relevant policies at that site.

Upon arrival at the clinical site, the student must check in with the Preceptor prior to beginning the clinical education experience. Prior to departing the clinical site each day, the student is
responsible to check out with the Preceptor and document the correct number of hours on the *Monthly Clinical Hour Log*. Hours are to be rounded to the closest 15 minutes. Punctuality is a high priority, as this is a sign of dependability.

If snow or flooding or any other act of nature prevents a student from attending the clinical education experience, the student will arrange to make up the clinical time with his/her instructor as necessary. In the event that a sudden conflict, illness, or emergency arises, the student must notify the Preceptor immediately via phone or in person. Only in the most extreme conditions (i.e., death in the immediate family, hospitalization) will this notification be waived.

Students are responsible to communicate with the Preceptor on a daily basis regarding the hours of operation for the Preceptor related to the assigned clinical education experience. The student and Preceptor must work out an attendance schedule to meet the minimum number of hours required by the enrolled practicum course. Students are expected to be present at all designated hours. In the event a student needs to miss his/her assigned clinical time, arrangements should be made with Preceptor prior to missing the clinical time.

Unexcused absences and tardiness to clinical education experiences will be reflected in the student's final clinical evaluation by the Preceptor and will negatively impact the student's grade in their Graduate Practicum course.

If a student fails to attend a clinical education experience, the student is subject to a written warning. Multiple written warnings for the same offense can result in suspension or dismissal. Suspension is defined as a temporary removal from one or more courses or clinical educational experiences with the possibility for future reinstatement. Dismissal is defined as a permanent termination from the program. The following protocol will be followed for a student’s failure to attend his/her clinical education experience:

1. After the first unexcused absence, a conference will be scheduled between the student and the Preceptor to discuss the incidence and come to a resolution. The student will be given a verbal warning by the Preceptor.

2. After a second unexcused absence, the Preceptor notify the student that they will be contacting the Clinical Education Coordinator to discuss the incident and come to a resolution. A strike maybe issued at the discretion of the CEC.

3. After a third unexcused absence, a conference will be scheduled between the student, Preceptor, Clinical Education Coordinator, and Program Director to discuss all incidents. A third unexcused absence will result in a “strike” being issued and may also result in the student being removed from the site. See “Clinical Hours” policy regarding failure to earn minimum required hours. If, as a result of this suspension, the student earns below the minimum graded required in the clinical class, he or she will be placed on probation from the MSAT program. The student, Preceptor, and Clinical Education Coordinator will complete and place a copy of the *Student Conference Report*, and the report will be placed in the student’s file.
Changing your Clinical Assignment

Students who wish to change their clinical assignment for any reason must first obtain written permission from the Coordinator of Clinical Education, the Program Director, or both. The student must also get written approval from their current and proposed Preceptors. The student must utilize the Change of Clinical Assignment Form, found in Appendix G.

Clinical Education

The MSAT Program at Weber State University utilizes the learning over time model throughout the program. In this program a student will enroll in a didactic course to learn the competencies and proficiencies of a selected topic. The following semester the same student will enroll in a graduate practicum course to refine his/her clinical proficiencies and put into use an evidence based practice model. Each graduate practicum course will also review a sampling of information from all prior semesters. The learning over time schedule for our MSAT program is:

MSAT 6501: Graduate Practicum I – reviews material from:
   AT 2300 – Emergency Response
   MSAT 6500 – Introduction to Graduate Athletic Training
   MSAT 6300 – Orthopedic Assessment (lower extremities)
   MSAT 6431 – Orthopedic taping, wrapping, and bracing

MSAT 6502: Graduate Practicum II – reviews material from:
   MSAT 6301 – Orthopedic Assessment (upper extremities)
   MSAT 6400 – Basic Modalities

MSAT 6503: Graduate Practicum III – reviews material from:
   HTHS 2240 – Pharmacology
   NUTR 1020 – Foundations in Nutrition
   PEP 3280 – Teaching Neuromuscular Conditioning
   PE 3510 – Exercise Physiology (Body Composition)
   MSAT 6200 – Psychology of Sport, Injury, & Rehabilitation
   MSAT 6450 – Basic Rehabilitation

MSAT 6504: Graduate Practicum IV – reviews material from:
   MSAT 6350 – General Medical
   MSAT 6401 – Advanced Modalities
   MSAT 6451 – Advanced Rehabilitation

The purpose of the clinical education experience is to offer each student an opportunity to develop increased proficiency in the skills required to become a BOC certified athletic trainer. This experience is a component of the Graduate Practicum Courses. During the live class meetings for the Graduate Practicum Courses, the student and instructor review and practice clinical proficiencies learned during the didactic course the prior semester. The clinical courses
are **NOT** meant as an avenue to instruct new course material unless it has been determined that certain required competencies and proficiencies are deficient.

In addition to the live class meetings, the student attends the clinical education experience, obtaining all of their clinical education hours under the direct auditory and visual supervision of an assigned Preceptor. During the clinical education experience with a Preceptor the student is able to work in the field under the direct supervision of the Preceptor and apply the competencies and proficiencies learned. The Preceptor is readily available to guide and interact with the student, and be able to intervene on the behalf of the patient.

Clinical education experiences are directly linked to the competencies and proficiencies of the practicum and clinical rotations courses. Students are assigned to a Preceptor and clinical responsibility/sport assignment that best fulfills the clinical education needs of the student. While it is highly desirable for students to complete their psychomotor competency and proficiency evaluations at their clinical rotations, this may not always be possible. Those assessments that cannot be completed in the clinical setting will be done in class.

During a clinical education experience a student **CANNOT** perform skills on a patient until the skill has been taught and assessed by a classroom instructor or Preceptor. This does not prevent the student and Preceptor from discussing or learning new material. However, the patient has a right to receive medical care from an individual trained in the specific skill.

**Clinical Education Guidelines**

When the ATS is assigned to a Preceptor, it is essential that all personnel understand that the ATS is in the clinical education setting to learn under direct supervision, not simply to provide a service to patients and support personnel or act as a replacement for a full-time employee. The responsibilities of the ATS and Preceptor are provided below. See Appendix E for the Clinical Education Guidelines.

The ATS should:

1. Place a priority on academic courses.
2. Communicate with the Preceptor regarding daily clinical experience opportunities.
3. Practice competencies with Preceptors and peers to develop proficiency.
4. Mentor and teach other students in the program.
5. Apply critical thinking, communication, and problem solving skills.
6. Be prepared for proficiency assessments on a daily basis.
7. Obtain MSAT clinical experiences during scheduled direct patient care supervision by the Preceptor.
8. Perform skills on patients only after being instructed on the skills (in classroom or by Preceptor).
9. Be willing to learn about variations in applying the same technique or skill.
10. Provide honest feedback of the MSAT clinical experience through the Preceptor Evaluation and the Clinical Experience Evaluation, completed at the end of each rotation.
The Preceptor should:

1. Accept the ATS assigned to his/her facility without discrimination.
2. Utilize the ATS for no more than 25 hours/week unless outside of the regular semester and/or reviewed with the Program Director and/or Coordinator of Clinical Education.
3. Provide direct supervision of the ATS in the context of direct patient care, which is defined as direct visual and auditory interaction between the Preceptor and the ATS.
4. Allow the ATS an opportunity to answer his/her own questions using critical thinking and problem solving skills.
5. Provide supervised opportunities for the ATS to actively participate in patient care related to the practicum course and clinical experience level of the ATS.
6. Allow the ATS to only perform skills on patients once instructed on the skill (in classroom or by Preceptor).
7. Guide the ATS in using communication skills and developing professional and ethical behaviors.
8. Assess the ATS on competencies related to the practicum course and clinical experience level of the ATS.
9. Provide ongoing feedback to assist the ATS in developing proficiency in skills related to the practicum course and clinical experience level of the ATS.

**Clinical Rotation Length and Hours**

Clinical education experiences are 10-12 week rotations and/or the length of a full athletic season depending on the assignment. During the clinical education experience, the student must document the number of hours directly supervised by a Preceptor on the *Monthly Clinical Hour Log*. The documentation must occur each day and must be accurate; hours can be rounded to the nearest 15 minutes. The following hours cannot be included when documenting hours on the *Monthly Clinical Hour Log*:

1. Time spent traveling with a team
2. Academic hours
3. Unsupervised hours

Clinical hour requirements vary by Graduate Practicum course level. The required number of clinical hours for each course is listed below, as well as the recommended number of hours per week.

- **MSAT 6501**: 150 hours/semester ≈ 10-12 hours/week
- **MSAT 6502**: 200 hours/semester ≈ 14-16 hours/week
- **MSAT 6503**: 250 hours/semester ≈ 18-20 hours/week
- **MSAT 6504**: 250 hours/semester ≈ 18-20 hours/week

Students are required to establish a clinical education schedule with their Preceptor which should include a minimum of one day per week without clinical education experiences.

Students who do not complete the minimum number of clinical hours for a Graduate Practicum course will have a point reduction from their course grade. If the student is short by 50 or more
clinical hours, they will receive an E for the course grade. See Graduate Practicum course syllabi for specific grading details.

Students cannot load clinical education experience hours at the beginning, middle, or end of the experience; this is not conducive to learning over time and developing proficiency in a skill or technique.

A student in the clinical education setting does not replace a paid employee nor is treated as a paid employee. A student completes a maximum of 25 hours per week during the semester. Occasionally a unique opportunity may present itself for the student to obtain an outstanding educational opportunity requiring more than 25 hours during the week; these opportunities should be discussed with the Program Director and/or Coordinator of Clinical Education. In addition, if a student chooses to earn clinical hours outside of a regular semester, such as fall pre-season practices, the student may choose to exceed 25 hours per week.

Internships and Summer Camps

Students may choose to participate in athletic training internships and/or summer camps. These are not required by the MSAT program, nor will they satisfy any MSAT program requirements. Students who choose to participate in these internships are responsible for ensuring that their participation in the internship does not violate the athletic training licensure laws or other similar regulations in the state(s) where the internship/camp will take place. The MSAT Program Director can assist the student in reviewing the state regulation(s) that may apply, but the student is ultimately responsible for the final determination. In addition, students who participate in an internship are strongly encouraged to purchase liability insurance that would cover the student during this experience.

Clinical Rotation Assignments

The WSU MSAT must balance students’ career goals with their educational needs. Students will be assigned to a variety of on-campus and off-campus clinical rotations. Each student will, minimally, gain experience with male and female patients, individual and team sports, patients of different ages and backgrounds, high school and collegiate athletics, sports requiring protective equipment (e.g., helmet and shoulder pads), a physical therapy or sports medicine-type rehabilitation clinic, and a general medical setting such as a physician's office.

Each semester, students will be asked to submit their preferences, including any extenuating circumstances which limit their ability to complete certain rotations. A conflict with paid employment is not considered a legitimate extenuating circumstance. Within the educational parameters, the faculty will make every effort to accommodate each student's interests, needs, and career goals, although these needs cannot always be met.

Students may not receive payment for any clinical rotation.
Students must complete a majority of their clinical experiences with Preceptors who are also Certified Athletic Trainers.

**General Medical Rotation**

Each athletic training student will be assigned a general medical rotation. This rotation will be assigned during or following the semester in which the student is enrolled in the MSAT 6350: General Medical Conditions and Advances in Athletic Training course. This rotation will be completed concurrent with student’s assigned clinical rotation. The student must complete a minimum of 20 hours during the general medical rotation period (determined in advance by the Clinical Education Coordinator). These hours will count towards the total minimum required hours for the student’s Graduate Practicum course. *If a student fails to complete the general medical rotation during the assigned period, they will be given a failing grade in the Graduate Practicum Course (C or below) and will be required to complete the general medical rotation the following summer (NOTE: this may delay the student’s graduation).*

**Liability Insurance**

For the protection of the student accepted into the MSAT, all students enrolled in Graduate Practicum courses (i.e., MSAT 6501, 6502, 6503, and 6504) will be required to carry medical liability insurance. This insurance will be provided at no cost to the student through a group policy arranged by Weber State University. The liability insurance coverage applies to all classroom and clinical education experiences delineated by the MSAT program.

This insurance **DOES NOT** cover student activities such as summer clinical rotations, winter break clinical rotations, transporting an injured or ill athlete, driving an institutional vehicle, acting as an unsupervised first responder, or other similar activities.

**Clinical Rotations in the Summer or during Winter Break**

Clinical hours during the summer and/or winter breaks are optional. Students are NOT required to attend pre-season practices and/or competitions prior to the first day of classes nor are they required to attend practices and/or competitions during the winter break. However, these can often be very valuable learning experiences and students are encouraged to gain clinical experiences outside of academic year.

Students who complete hours in the summer or during winter break must purchase additional liability insurance at their own cost. MSAT faculty will assist students with this process.

In the summer and/or over winter break, students may earn a maximum of 1/3 of the clinical and all service hours required for the following semester. However, these clinical rotations must be approved in advance by the Clinical Education Coordinator. Students must make such requests in writing, after having received signed approval from the Preceptor who will be supervising the student. This written request must include the dates, number of clinical hours anticipated,
clinical assignment, Preceptor's name, and signatures of both the student and the Preceptor. Students on these rotations must still complete clinical hour forms, and all applicable evaluation forms.

During the summer and winter breaks, students MUST earn their hours with their assigned clinical rotation if it is available. If the assigned clinical rotation is not available, the student must get permission from BOTH the Clinical Education Coordinator AND the Preceptor in order to go to a different clinical rotation.

For example, if a student is assigned to Weber State University Football for their fall rotation, which begins typically on Aug. 1, they may NOT earn summer hours at a clinic in August. The only rotation where they may earn summer hours in August would be with WSU Football. However, the student could earn hours at the clinic in June and July.

**Clinical Rotation Evaluations**

Evaluations are a crucial part of the academic process, both for the program and the student. See Appendix F for all Clinical Rotation Evaluation forms. Required evaluations include:

1. A Preceptor Evaluation Form at the end of each clinical education experience.
2. A Clinical Education Site Evaluation at the end of each clinical education experience.
3. A self-evaluation at the end of each clinical education experience using the designated Practicum Evaluation Form.

**Mid-rotation Preceptor/Student Meeting**

All students enrolled in MSAT must schedule a conference with their assigned Preceptor at the mid-point and end of each clinical rotation. The purpose of the mid-rotation conference is to talk about clinical strengths/weakness of each specific student, and satisfactory completion of Graduate Practicum course competencies and clinical proficiencies.

Students will document the mid-rotation meeting, have it signed by their Preceptor, and submit it to their Graduate Practicum course instructor. For the final evaluation, students will have their Preceptor use the level-specific evaluation form found in their Graduate Practicum course packet.
Transportation to Clinical Education Experience

Students are expected to assume responsibility for their own transportation to the various clinical education experience assignments that are off campus. Please note that the MSAT attempts to work with those students who do not have their own transportation, but remember that the student has the ultimate responsibility in making sure that s/he arrives to his/her clinical experience assignment on time. Car-pooling is strongly encouraged and recommended if possible. (NOTE: a current bus schedule and free UTA pass can be picked up in the Student Union, in the event you need to catch a bus to go to any of the clinical sites.)

It should be noted that students are not authorized to drive an institutional vehicle as part of the clinical education experience, unless appropriate training and paperwork have been completed.

Transportation of an Ill or Injured Patient

A student in the MSAT should not be the primary driver in the transportation of an injured or ill patient, unless the necessary training and paperwork have been completed. An MSAT student transporting an injured or ill patient is not under the direct (auditory and visual) supervision of their Preceptor, thus placing the patient at risk. Therefore, only patients/athletes who have been deemed stable by the Preceptor should be transported by a student. This should never be done without prior approval EACH TIME by the Preceptor.

Cell Phones

Cell phones are to be used for emergencies only while at the clinical education experience. Cell phones must not be used for personal calls unless approved by the Preceptor.
**Dress Code**

The guidelines below reflect the minimum standards for clinical rotations with WSU athletic teams. Off-site clinical rotations may require a more formal dress code. When in doubt, please consult your Preceptor.

All students enrolled in the Master of Science in Athletic Training Program must wear the following uniform (unless more formal attire is required) while attending clinical education experiences:

1. "Polo" style shirt with WSU Athletic Training logo. Note: WSU AT polo shirts can be purchased through the WSU Bookstore for approximately $25-55/shirt.
2. Sweatshirt with WSU Athletic Training logo.
3. Solid color, neat, pants or shorts.[1] **Jeans are not acceptable at any clinical site.**

For outdoor events, students should be prepared to add layers of clothing in the event of weather changes. Additional clothing is fine under the following conditions:

1. Clothing is approved by the Preceptor.
2. Clothing does not contain vulgar, profane, or other inappropriate advertising.
3. The student continues to wear the Athletic Training shirt or sweatshirt underneath.

For indoor events, students should be prepared to wear appropriate professional dress clothes. Professional dress clothes must be functional and appropriate to the event. This clothing should meet the following guidelines:

1. No spiked shoes; no high heels over 2”.
2. Skirt length must be knee length or longer.
3. No low cut or see through blouses.
4. No clothing that exposes undergarments.
5. All ties must be worn with a tie tack.
6. No long jewelry that may interfere with patient care (e.g., long necklaces, dangling earrings, etc.).

All students enrolled in the MSAT program must follow the additional uniform guidelines while attending clinical education experiences:

1. All shirts must be tucked in.
2. All baggy or large pants/shorts must be held up with a belt.
3. All shoes must be closed-toe shoes; NO sandals or flip-flops; laces must be tied.
4. Socks must be worn.
5. Clothing must be neat and clean.
6. No short shorts or low waist pants (i.e., trendy hip huggers).
7. No exposed cleavage.
8. No ripped or torn pants.
9. No Jeans!
10. No hats/caps are to be worn to clinical education experiences[2]
11. A digital watch or a watch with a second hand should be worn during clinical education experiences.
12. AT Program nametag (if applicable, see Nametag Policy below)
13. Photo ID badge must be worn at all times for McKay-Dee Hospital/IHC rotations.
12. Hair must be neat and clean and maintained in such a manner to professionally fulfill clinical responsibilities.
13. No body piercing to areas other than the ear lobe are allowed while attending clinical education experiences; this is an OSHA requirement.
14. Body art (tattoos) must be covered with appropriate clothing as outlined in this section.

All students enrolled in the MSAT must follow this additional guideline outside of clinical education experiences:
1. Do not wear any clothing that identifies you as a WSU Athletic Training Student to any bar, night club, gentlemen or ladies clubs, etc.

Clothing orders are placed during each fall and spring semester through the WSU bookstore.

[1] Neither shorts nor jeans are acceptable attire at Sports Medicine/Physical Therapy Clinics, Medical Rotations, or Surgical Observations. **Jeans are not acceptable at any clinical site.**

[2] Hats may be permissible at outdoor events upon the approval of the Preceptor; these hats must have a WSU logo or no logo.

**Name Tags**

All MSAT Program students will be issued a nametag prior to the start of their first clinical rotation. For all sites, MSAT students are required to wear nametags for the first few weeks to identify yourself to student-athletes/patients as a student. The name tag is to be worn on the upper chest, on the left or right. It is up to the Preceptor’s discretion if/when the nametag is no longer required.

The first name tag will be provided to the student when enrolled in MSAT 6500. If the name tag is lost, the student is responsible for purchasing and obtaining a new tag. Name tags can be obtained from Art Services 801-626-6374. (Art Services is located in the Receiving Distribution Center (RD on the campus map) behind Printing Services.) The cost is approximately $7.00. The loss of a name tag will not be accepted as an excuse or reason for poor attendance at clinical education experiences, which can result in a poor clinical rotation and Graduate Practicum course grade.
**Dress Code Violation**

MSAT Students who are in violation of the dress code will be asked to leave their clinical assignment, change into appropriate clothing, and return to the assignment immediately. The Preceptor may ask students not to return if dressed inappropriately. Additional penalties are outlined below.

**Clinical Education Penalties (Clinical Probation)**

The Weber State University MSAT Program has adopted a “3 strikes” rule for violations of MSAT Program policies. Any athletic training student who accumulates 3 strikes* during an academic semester will be placed on clinical probation for the remainder of the semester (NOTE: clinical probation is NOT the same as academic probation). If while on probation, a student is issued another strike (4th), he/she will be suspended from their clinical rotation and will not be allowed to earn any additional clinical hours during that semester (NOTE: clinical suspension is NOT the same as academic suspension). See “Clinical Hours” policy regarding failure to earn minimum required hours. If, as a result of this suspension the student earns below the minimum graded required in the clinical class, he or she will be placed on academic probation.

Any student placed on clinical probation will be given last priority during clinical rotation assignment in the subsequent rotation period. The probation period will automatically end at the conclusion of the academic semester. If a student reaches clinical suspension a second time (consecutive or non-consecutive) during enrollment in WSU MSAT Program, the student will be dismissed from the program.

- A “strike” is defined as any violation of AT Program policies. Examples include, **but are not limited to**, dress code/ATS uniform violations, attending a rotation to which you are not assigned, unauthorized cell phone usage during clinical rotation, or any other behavior deemed by the preceptor or MSAT Program faculty to be inappropriate and/or unprofessional. Strikes may also be issued for failure to submit clinical education paperwork on-time (e.g., clinical orientation form, immunizations, preceptor evaluations).
- Strikes do not necessarily need to be from the same category (example: a student may earn strike 1 for a dress code violation, strike 2 for inappropriate use of cell phone, and strike 3 for earning hours at an unassigned rotation).
- Strikes may be issued by athletic training faculty/instructors and/or Preceptors.
- All strikes will be written warnings (which may come in the form of an email to the student, with the CEC and/or PD copied on the email) and will be recorded in the AT student’s file in the Program Director’s office.
- The MSAT student, preceptor, and all MSAT Program faculty will be notified via email of each strike received.
Service Learning Hours

Service Learning Hours are obtained by volunteering as an ATS with the medical coverage for a sporting event or other activity. Volunteering in other capacities (working a registration table, handing out programs, etc.) is commendable, but does not count towards service learning hours.

Service Learning hours may only be completed with Clinical sites which have formal affiliation contracts and paperwork completed. Because Service Learning Hours are a requirement of each Graduate Practicum course, students are covered by the same liability insurance policy that covers them during their other clinical education experiences.

All students enrolled in the MSAT program must attain service learning hours while enrolled in Graduate Practicum Courses. The number of service learning hours required varies by the student's level in the program. To obtain credit for these hours, students must record them on the Service Hour Reporting Sheet, obtain a signature from their supervisor of the activity, and write a reflection that will all be submitted to their Graduate Practicum course instructor.

- MSAT 6501 10 hours/semester
- MSAT 6502 10 hours/semester
- MSAT 6503 15 hours/semester
- MSAT 6504 20 hours/semester

Many opportunities will be presented to the ATS in class throughout each semester via announcements in class, e-mails, and bulletin board postings. Students are advised not to wait until the end of the semester to choose an opportunity as there may be a limited number of participants. Other opportunities for athletic training service will be reviewed by the Program Director and/or Clinical Education Coordinator on a case-by-case basis.
HIPAA, Confidentiality, Privacy, and Security

The Weber State University MSAT Program and Athletics Department are committed to safeguarding the confidentiality of protected health information (PHI) and other confidential information which is or may be contained in the records of the University and to ensuring that PHI and other confidential information if used/or disclosed only in accordance with the University’s policies and procedures and applicable state and federal law.

All Athletic Training employees and students and Athletics Department employees must hold confidential information used or obtained in the course of their duties in confidence. All protected health information and other individually identifiable health information must be treated as confidential in accordance with professional ethics, accreditation standards, and legal requirements. All employees and students with access to confidential information, including patient/student-athlete medical records information and/or information systems must read and sign this Agreement, which will be kept on file and updated periodically.

Everyone with access to PHI and other confidential information is responsible for safeguarding it confidentiality. Health information and other confidential information may be in paper, electronic, verbal, video, oral, or any other form, and must be protected regardless of form. Access to health information in any format must be limited to those persons who have a valid business or medical need for the information, or otherwise have a right to know the information. Individuals who access clinical records from other organization are expected to follow that organization’s requirements.

To abide with this policy one must only:

- Discuss patient/student-athlete information with authorized personnel only and only in a private location where unauthorized persons cannot overhear.
- Keep medical records and other confidential information secure and unavailable to persons not authorized to review or obtain those records or information.
- Follow specified procedures for use of electronic information systems, including use of individual passwords, logging off when finished, proper data entry techniques, and protection of displayed or printed information from unauthorized users.
- Omit the patient/student-athlete’s name and other unique identifiers when using case reports or hypothetical situations for educational or training purposes.
- Verify with the patient/student-athlete what information may be given to the patient/student-athlete’s family and friends with the patient/student-athlete’s knowledge and permission.
- Screen requests for access to all patient/student-athlete and other confidential information so that the minimum necessary amount of information is made available and made available only to those persons who are legitimately involved in patient care, billing or administrative operations.
- Never release patient/student-athlete medical records and other confidential information to external sources. Release of medical and other confidential information is the responsibility of the paid athletic training staff.
- Use appropriate information security procedures for users of electronic information systems.

Any knowledge of a violation of this confidentiality policy must be reported to an immediate supervisor. The supervisor will present the information to the Graduate Athletic Training Program Director and Athletics Director for review and investigation.

See Appendix H for the Confidentiality/HIPAA Agreement that all students are required to read, sign, and submit for their file.
Romantic Relationships with Athletes

A voluntary, intimate, romantic, or sexual relationship between an athletic training student and a WSU student-athlete is not prohibited. However, any athletic training student must report any consenting relationship he or she may have with a student athlete to his/her immediate supervisor to ensure that the athletic training student is not in a position where a conflict of interest may exist. A conflict of interest exists when the athletic training student is assigned to the same sport as the student-athlete with whom he/she has the relationship. In these situations, the athletic training student shall be removed from that sport assignment and transferred to another assignment at the discretion of the supervising Athletic Trainer and the Athletic Training Program Director. Violations of this policy by an athletic training student will result in disciplinary action.

Note: Clinical rotations outside of Weber State University may have a different policy. Athletic Training students must discuss any potential issue with their Preceptor prior to pursuing any personal relationship with an athlete or patient.

Student Conference Report - Violation of Clinical Education Policies

Each student is responsible for strictly adhering to the policies and procedures delineated by the MSAT program and the affiliate clinical site, in addition to following any requirements issued by the ACI. If a student fails to meet any of the above requirements, the following action will occur:

1. After the first infraction, a conference will be scheduled between the student and the Preceptor to discuss the incident and come to a resolution.

2. After a second infraction, a conference will be scheduled between the student and Preceptor. The Preceptor and student will complete the Student Conference Report, and the report will be forwarded to the Coordinator of Clinical Education to be placed in the student’s file.

3. After a third infraction, a conference will be scheduled between the student, Preceptor, Coordinator of Clinical Education, and Program Director to discuss all incidents. A Student Conference Report will be completed and placed in the student’s file. In addition, the student's clinical hours for the next 7 days will not be counted towards their clinical hour OR service hour requirements.

4. After a fourth infraction, the student may be expelled from the MSAT and immediately removed from the clinical rotation. A Student Conference Report will be completed and placed in the student’s file.

See Appendix H for a copy of the Student Conference Report.
Grievance Procedure

The Athletic Training faculty recognizes the rights of students enrolled in the MSAT to express grievances and attempts to seek solutions and answers to problems, complaints, or injustices arising from the day-to-day working relationships and differences which may occur between student, faculty or administration. Whenever a misunderstanding or problem exists, students are urged to discuss the situation immediately with their instructor and/or Preceptor in a calm and constructive manner. Small problems and poor communication tend to become large problems, and are harder to resolve when not discussed with an individual who can correct them in a timely fashion. This grievance procedure is intended for use by the Athletic Training student in both the clinical and classroom areas.

Process of Informal Resolution
- Initial conference with faculty or Preceptor.
- If no resolution reached, then meet with Program Director and/or Clinical Education Coordinator depending on the nature of the situation.
- If no resolution reached, then meet with Department Chair, HPHP (Dr. Jennifer Turley – 626-6933)
- If no resolution reached, then meet with Dean, College of Education (Dr. Jack Rasmussen - 626-6273)
- If no resolution reached, contact Due Process Office - Dr. Jeff Hurst, Dean of Students - 626-7256)

MSAT Sanctions
- Warning – regarding conduct
- Probation – must show improved conduct during this period
- Suspension – temporary or permanent separation from the MSAT
- Personal Development Sanctions – may require counseling or remediation
- Temporary Interim/Emergency Sanctions – if potential for harm exists

Expulsion/Dismissal
- Permanent termination from the MSAT
  - Infliction of bodily harm to anyone.
  - Noncompliance with policies regarding patient care.
  - Performance of patient care activities that exceed the student’s scope of practice.
  - Infliction of emotional or mental distress to other students, faculty, preceptors, or patients
  - Substantial disruption of clinic or classroom activities.
  - Presenting a threat to the stability and continuance of MSAT functions
  - Being convicted of a felony.

Termination/Withdrawal/Readmission
- Inactive status – withdraw in writing
- Termination – case by case
  - Must wait one full year for readmission
- Readmission
  - Upon approval of MSAT faculty
  - If space in program allows
**Communicable Diseases**

**Communicable Disease:** A communicable disease is an illness due to a specific infectious agent which can be transmitted from one individual to another. A communicable disease may be transmitted directly from one person to another without physical contact with the infected person. It may be transmitted indirectly when an object transmits the organism. Objects of transmission may be clothing, linens, utensils, food, water, milk, air, soil or insects.

Students that are determined by a physician as having an active communicable disease will be required to take a medical leave of absence from clinical experience until cleared by the same physician. At that time, the student will determine, with the PD and CC, a plan to make up the missed competencies and experiences.

Examples of communicable diseases are:
- Rubella (3-day measles)
- Rubeola (9-day measles)
- Meningitis - viral and bacterial
- Hepatitis A
- Varicella (Chicken Pox)
- Tuberculosis (TB)
- Influenza Mononucleosis

If you have any of the following signs and/or symptoms, you may have contracted a communicable disease. Athletic training students who experience any or all of the following signs or symptoms need to be examined by a physician prior to attending clinical rotations.

- Fever
- Skin rash
- Nasal discharge
- Coughing
- Open and/or oozing skin lesions
- Yellowing of the skin, eyes, or mouth
- Unexplained fatigue
- Chest pain
- Dizziness

Any Athletic Training Student who comes in contact with a communicable disease or experiences any or all of the above signs and/or symptoms will be referred to the Student Health Center (Student Service Center Room 190 - 626-6459).

The costs associated with the referral to the Student Health Center and any additional care will be the responsibility of the student’s primary insurance and the student.
Participation in Extracurricular Activities

Students in the MSAT are encouraged to participate in extracurricular activities (i.e., intramurals, part-time jobs, athletics, fraternity/sorority) as part of the collegiate experience. However, the student must meet all requirements of the Graduate Practicum courses, clinical education experiences, and clinical hours to remain in the MSAT and be eligible for graduation. These requirements are part of the academic curriculum of the MSAT program and must be the primary or first priority.

For MSAT students who participate in varsity or club athletics, additional responsibilities occur. Due to the rigor of the MSAT a student may only participate in ONE varsity or club sport during the academic year. To prevent a conflict of interest, the MSAT student will NOT obtain clinical education experiences on the team which s/he participates.

Students participating in varsity or club athletics at WSU MUST sign an agreement, along with their head coach, delineating the expectations of the ATS, both in and out of the regular athletic season. See Appendix I for the Varsity/Club Athletic Participation by Athletic Training Students contract.

This contract must be signed and submitted for the student's file by September 15 of EACH academic year following formal admission to the MSAT. During the year in which the student-athlete applies for admission to the MSAT, a copy of this contract must accompany the program application.

Policies and Procedures

Students participating in clinical rotations at Weber State University are expected to abide by the Policies and Procedures Manual established by the WSU Athletic Training Staff. These can be viewed at: http://www.weberstatesports.com/ViewArticle.dbml?

Students in clinical rotations at other clinical sites must abide by the guidelines for that site.
APPENDIX A

Physical Examination Form

Technical Standards Form

Immunization Requirements
WEBER STATE UNIVERSITY
ATHLETIC TRAINING STUDENT MEDICAL EXAMINATION

NAME_________________________________________ DATE____________________
SOCIAL SECURITY NUMBER_________________________ BIRTHDATE________________
LOCAL ADDRESS___________________________________ LOCAL PHONE________________

MEDICAL HISTORY: Have you ever had any of the following? Check "yes" or "no". If yes, do not write in the details. The examiner will ask for and fill in appropriate details related to the condition.

<table>
<thead>
<tr>
<th>GENERAL HISTORY</th>
<th>YES</th>
<th>NO</th>
<th>REFERENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head injury, concussion, or loss of consciousness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dizzy spells or fainting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High or low blood pressure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Taking any medication on a regular/continuing basis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heat cramps, heat exhaustion or heat stoke</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allergies or skin problems (hay fever, bee stings, foods)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allergies to medications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any seizure disorders</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes, hypoglycemia, leukemia, etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Been hospitalized or had a major illness</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FAMILY HISTORY (Grandparents, Parents, Siblings)</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>High blood pressure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strokes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart attack</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cancer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sickle Cell Disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other familiar illness (Hypertrophic cardiomyopathy, Marfan’s syndrome)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HEAD, EYES, EARS, NOSE, THROAT</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fracture to the nose, jaw or face</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Broken or missing teeth, gum problems</td>
<td></td>
<td></td>
</tr>
<tr>
<td>False teeth and/or dental bridge</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ear trauma, ear drum rupture, ear infection, hearing loss</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Injuries to the throat</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frequent headaches</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thyroid problems</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chronic sinus infection</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recurrent strep throat</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eye injuries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diseases of eyes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other problems not listed above</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**CHEST AND THORAX**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart trouble or rheumatic fever</td>
<td></td>
</tr>
<tr>
<td>Heart murmur, irregular heart rhythm</td>
<td></td>
</tr>
<tr>
<td>Experienced chest pain while exercising</td>
<td></td>
</tr>
<tr>
<td>Fainted or felt faint while exercising</td>
<td></td>
</tr>
<tr>
<td>Experienced unexplained shortness of breath while exercising</td>
<td></td>
</tr>
<tr>
<td>Diagnoses with a heart murmur or high blood pressure</td>
<td></td>
</tr>
<tr>
<td>Injuries to major blood vessels or nerves</td>
<td></td>
</tr>
<tr>
<td>Asthma or any breathing disorder</td>
<td></td>
</tr>
<tr>
<td>Chronic bronchitis</td>
<td></td>
</tr>
<tr>
<td>Serious pneumonia</td>
<td></td>
</tr>
<tr>
<td>Tuberculosis</td>
<td></td>
</tr>
<tr>
<td>Other problems not listed above</td>
<td></td>
</tr>
</tbody>
</table>

**ABDOMEN, GENITAL, URINARY**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hernia</td>
<td></td>
</tr>
<tr>
<td>Testicular trauma or pain</td>
<td></td>
</tr>
<tr>
<td>Kidney or bladder problems</td>
<td></td>
</tr>
<tr>
<td>Injury to the spleen or liver</td>
<td></td>
</tr>
<tr>
<td>Hepatitis or Jaundice</td>
<td></td>
</tr>
<tr>
<td>Mononucleosis</td>
<td></td>
</tr>
<tr>
<td>Chronic Diarrhea</td>
<td></td>
</tr>
<tr>
<td>Constipation</td>
<td></td>
</tr>
<tr>
<td>Hemorrhoids or fissure</td>
<td></td>
</tr>
<tr>
<td>Skin disorders</td>
<td></td>
</tr>
<tr>
<td>Sexually transmitted diseases</td>
<td></td>
</tr>
<tr>
<td>Have you ever had any organs removed?</td>
<td></td>
</tr>
<tr>
<td>Other problems not listed above</td>
<td></td>
</tr>
</tbody>
</table>

**ORTHOPEDIC**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tendinitis, joint pain, arthritis</td>
<td></td>
</tr>
<tr>
<td>Shoulder dislocation or separation</td>
<td></td>
</tr>
<tr>
<td>Surgery to correct a shoulder injury</td>
<td></td>
</tr>
<tr>
<td>Ligament or cartilage damage to knee</td>
<td></td>
</tr>
<tr>
<td>Sprained knee causing loss of activity</td>
<td></td>
</tr>
<tr>
<td>Surgery to correct a knee injury</td>
<td></td>
</tr>
<tr>
<td>Sprained ankle causing a loss of activity</td>
<td></td>
</tr>
<tr>
<td>Surgery to correct an ankle injury</td>
<td></td>
</tr>
<tr>
<td>Back injury or chronic back pain</td>
<td></td>
</tr>
<tr>
<td>Injury or fracture to the skull</td>
<td></td>
</tr>
<tr>
<td>Stress fracture</td>
<td></td>
</tr>
<tr>
<td>Collar bone injuries</td>
<td></td>
</tr>
<tr>
<td>---------------------</td>
<td>--</td>
</tr>
<tr>
<td>Arm or elbow injuries</td>
<td></td>
</tr>
<tr>
<td>Wrist, hand or finger injuries</td>
<td></td>
</tr>
<tr>
<td>Hip or leg injuries</td>
<td></td>
</tr>
<tr>
<td>Foot or toe injuries</td>
<td></td>
</tr>
<tr>
<td>Other problems not listed above</td>
<td></td>
</tr>
</tbody>
</table>

**CONFIDENTIAL QUESTIONS**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

| Alcohol |  |
| Smoking tobacco |  |
| Chewing tobacco |  |
| Marijuana |  |
| Cocaine |  |
| Amphetamines |  |
| Steroids |  |
| Other |  |

**OFFICE USE ONLY**

HEIGHT___________   B.P_____/_____
VISION R 20/_____ L 20/_____
CORRECTED R 20/_____ L 20/_____
WEIGHT__________

**HEAD, EYES, EARS, NOSE, THROAT EXAMINATION**

HEAD______________________________________________________________________________________________________________________________

EYES/FUNDUS______________________________________________________________________________________________________________________

E.N.T.____________________________________________________________________________________________________________________________

TEETH_____________________________________________________________________________________________________________________________

THYROID & LYMPH GLAND___________________________________________________________________________________________________________

**CHEST AND THORAX EXAMINATION**

CHEST/LUNGS____________________________________________________________________________________________________________________________________

PRECORDIAL AUSCULTATION - SUPINE / STANDING________________________________________________________________________________________

FEMORAL ARTERY PULES____________________________________________________________________________________________________________________________________

RECOGNITION OF MARFAN'S SYNDROME____________________________________________________________________________________________________________________________________

**ABDOMEN, GENITAL, URINARY EXAMINATION**

ABDOMEN____________________________________________________________________________________________________________________________________

GENITAL/HERNIA____________________________________________________________________________________________________________________________________

RECTAL____________________________________________________________________________________________________________________________________

SKIN____________________________________________________________________________________________________________________________________

LYMPH NODES____________________________________________________________________________________________________________________________________
ORTHOPECIC EXAMINATION

HEAD

NECK/BACK

UPPER EXTREMITIES

LOWER EXTREMITIES

X-RAY

Is the Athletic Training Student able to meet the Technical Standards required of this program? If no, what accommodations need to be made?

_____ Yes

_____ NO. Accommodations: ____________________________________________________________

Are the Athletic Training Student's immunizations up to date and in compliance with the attached form?

_____ Yes

_____ No. Immunizations needed: _______________________________________________________

ATS SIGNATURE ___________________________ DATE: __________________

EVALUATING MEDICAL DOCTOR'S SIGNATURE ___________________________ DATE: __________

PROBLEM LIST/ COMMENTS

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________
WEBER STATE UNIVERSITY
ATHLETIC TRAINING TECHNICAL STANDARDS
ADMISSION REQUIREMENT

Technical Standards Criteria

Section 1, explains the rationale for the technical standards and how they may be used by the program.
Section 2, includes the technical standards.
Section 3, includes a statement that the student has read the technical standards and, by their signature, acknowledges an understanding of the implications of the standards.

SECTION 1.
The Athletic Training Educational Program at Weber State University is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The technical standards set forth by the Athletic Training Educational 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 Accreditation of Athletic Training Education [CAATE]). All students admitted to the Athletic Training Educational Program must meet the following abilities and expectations. 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 BOC certification exam.

SECTION 2.
Candidates for selection to the Athletic Training Educational Program must demonstrate:

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 the assessment and treatment of patients.
3. the ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgements and treatment information effectively. Students must be able to understand and speak the English language at a level consistent with competent professional practice.
4. the ability to record the physical examination results and a treatment plan clearly and accurately.
5. the capacity to maintain composure and continue to function well during periods of high stress.
6. the perseverance, diligence and commitment to complete the athletic training education program as outlined and sequenced.
7. flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
8. affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.
SECTION 3.
Candidates for selection to the athletic training educational program will be required to verify they understand and meet these technical standards or that they believe that, with certain accommodations, they can meet the standards.

The Weber State University services for students with disabilities department will evaluate a student who states he/she could meet the program’s technical standards with accommodation and confirm that the stated condition qualifies as a disability under applicable laws.

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

I certify that I have read and understand the technical standards for selection listed above, and I believe to the best of my knowledge that I meet each of these standards without accommodation. I understand that if I am unable to meet these standards I will not be admitted into the program. I will inform the MSAT Program Director if, at any time, my ability to meet the technical standards changes to determine if I am able to continue in the program with reasonable accommodations.

________________________________  ____________  
Signature of Applicant    Date

Alternative statement for students requesting accommodations.

I certify that I have read and understand the technical standards for admission listed above and I believe to the best of my knowledge that I can meet each of these standards with certain accommodations. I will contact the Weber State University Services for Students with Disabilities office at (801) 626-6413 to determine what accommodations may be available. I understand that if I am unable to meet these standards with or without accommodations, I will not be admitted into the program.

________________________________  ____________  
Signature of Applicant    Date
Immunization Requirements

Documentation of the following immunizations are required by all MSAT students by June 1st of the first year in the MSAT program.

1. Tuberculosis skin test (PPD)
   A. **Do not need to complete until later in program (prior to General Medical rotation).**
   B. Must be within the past twelve months prior to beginning General Medical Rotation or any other rotation that requires this test.
   C. To meet this requirement, one of the following is required:
      1.) 2-step TST (two separate Tuberculin Skin Tests, aka PPD tests) within 12 months of each other. Complete at the WSU Student Health Center (free of charge). The results must be written in millimeters.
      2). One (1) Quantiferon Gold blood test with negative result.
      3). If previously positive to any TB test, the student must complete a symptom questionnaire and have a chest x-ray read by a radiologist with a normal result. If chest x-ray is abnormal, the student needs to be cleared by their physician or local health department before beginning their general medical rotation or any other rotation at an IHC facility.

2. MMR (Measles, Mumps, Rubella)
   A. Students will need one of the following:
      1.) Proof of **two** (2) MMR vaccinations
      2.) A positive titer (proof of immunity to Measles (Rubeola), Mumps, and Rubella through a blood test

3. Tdap - Proof of one (1) Tdap vaccination after the age of 10.

4. Varicella (Chicken Pox)
   A. One of the following is required:
      1.) Proof of **two** (2) Varicella vaccinations.
      2.) Proof of immunity to Varicella through a blood test.
      3.) Healthcare Provider documentation of Varicella disease.

5. Hepatitis B
   A. Students will need one of the following:
      1.) Dates you received the three Hepatitis B shots, or if you have just begun the series, indicated the date of the first shot within the past month (if longer, a second date must be listed.)
      2.) A positive titer (showing immunity or “reactive”)
      3.) If not completed yet, the WSU AT Program Director will provide you with information regarding how to get this series of shots for free, after you have completed the OSHA/Bloodborne Pathogen Training and are formally admitted to the MSAT program.

6. Each student is required to have a current, annual influenza vaccine.
HEPATITIS B IMMUNIZATION

Hepatitis is inflammation of the liver which may be caused by several viruses, one of which is Hepatitis B. The Hepatitis B virus has been detected in almost all body fluids and secretions including blood, saliva, semen, vaginal fluid, breast milk, tears and urine of someone infected with Hepatitis B. Although contact with infected blood is the most common way in which the virus is transmitted, it can also pass through cuts, scrapes or breaks in the skin or mucous membrane. A carrier of Hepatitis B is someone who may or may not show signs of liver disease, but who continues to carry the Hepatitis B virus in the body and, therefore, can transmit to others.

A Hepatitis B virus infection may be mild or more severe. Death is uncommon in the early stages of infection. Chronic infection develops in 6-10 percent of patients who become carriers. This chronic infection may last for years, possibly for life, and it may lead to cirrhosis and liver cancer.

There is not a treatment or drug available that can kill the Hepatitis B virus. In most cases the body’s own defense mechanism will eliminate the infection. In health care workers, the risk of acquiring Hepatitis B is determined mainly by their degree of exposure to blood.

Hepatitis B vaccine is recommended for persons at high risk of contracting Hepatitis B. It will not prevent Hepatitis caused by other agents such as Hepatitis A virus or Hepatitis non A, non B virus.

Hepatitis B immunization should be withheld in the presence of:
1. Any serious active infection except when a physician believes withholding the vaccine entails a greater risk.
2. Hypersensitivity (allergy) to yeast or any components of the vaccine (alum, theramasola mercury derivative, aluminium hydroxide, formaldehyde).
3. Pregnancy or breast-feeding.
4. Severe heart/lung problems.

Hepatitis B vaccine is generally well-tolerated. As with any vaccine there is the possibility that broad use of the vaccine could reveal adverse reactions not observed in clinical trials. There may be a local reaction at the injection site such as soreness, pain, tenderness, itchiness, redness, black/blue mark, swelling, warmth or nodule formation. Other reactions may include low grade fever, fever over 102 degrees (uncommon), general arthralgia, rash, or neurological disorders.

The vaccine consists of three injections. The first dose is at an elected time, the second dose one month later and the third dose six months after the first dose. Full immunization requires three doses of the vaccine over a six month period to confer immunity. However, the duration of the protective effects of the Hepatitis B vaccine is presently unknown and the need for boosters is not yet defined.

Students enrolled in the Master of Science in Athletic Training Program must begin the immunization series prior to beginning clinical rotations. Students who attend the required OSHA/Bloodborne Pathogens training will receive all three injections at no cost to the student.
Bloodborne Pathogens Post-Exposure Procedures & Forms

Introduction

This information is designed to:

1. Assist WSU personnel and health care interns to respond correctly after an occupational exposure to human blood
2. Ensure compliance with the OSHA Bloodborne Pathogens Standard
3. Facilitate timely resolution of workers compensation claims resulting from exposures

What is an occupational bloodborne pathogen exposure?

An occupational bloodborne pathogen exposure is contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

What are the possible exposure methods?

Methods of exposure: An occupational exposure to human blood other potentially infectious material occurs in one or more of the following ways:

1. A stick with a contaminated sharp object (i.e., needle)
2. A splash to the eyes, nose, or mouth (i.e., mucous membrane)
3. A contact with non-intact skin (i.e., cut on hand)
4. Prolonged contact with intact skin

Post Exposure Procedures

Involving a needle stick or other potential exposure to a bloodborne pathogen by an employee, student intern, or assigned volunteer

Revised August 2003

1. **Cleanse the wound** and surrounding area with soap and water (for a needle stick), or flush eyes, nose or mouth with copious amounts of tap water (for a splash to the face).
2. **Inform your supervisor or clinical instructor to call the appropriate infection control/blood exposure triage staff on duty**, and alert them to expect you for immediate evaluation and treatment. (Evaluation must be completed within two hours of exposure. If the Health Care practitioner has any questions about the course of action or evaluation of
the exposure potential, refer them to Dr. Chris Baliga, an infectious disease physician at McKay Dee Hospital. Dr. Baliga's 24-hour telephone number is (801) 387-7900.)

3. **Report to the hospital triage staff according to where the exposure occurs:**
   - **On campus or in McKay-Dee Hospital:**
     Report to the McKay-Dee Hospital Emergency Room, 4401 Harrison, and ask for the Health Coordinator, Natalie Kovack. Telephone (801) 387-7726.
   - **Off campus exposure or in any other hospital:**
     Report to the nearest hospital, and ask for the Blood Exposure Triage Staff.

4. **Tell the triage staff you experienced an occupational blood exposure covered by WSU's Workers Compensation Insurance.** (Refer billing questions to the EH&S workers compensation coordinator at (801) 626-7547, 8:00 a.m. through 5:00 p.m., Monday through Friday.)

5. **Request the source individual** to complete the Consent or Refusal (By source individual) for HIV, HBV, and HCV Infectivity Testing form, if appropriate. (Once the source individual gives consent for testing, your department is responsible for coordinating blood testing.)

6. **Inform the EH&S Specialist** of your exposure as soon as possible at (801) 626-7823.

7. **Complete the WSU Occupational Bloodborne Pathogens Exposure Incident form** within 24-hours of your exposure, and send a copy to WSU EH&S, MC 3002.

If hospital triage personnel determine the risk is low, you may request follow up treatment IHC WorkMed (387-6151).

Follow up treatment should begin within 48 hours following exposure, and includes initial screening; counseling concerning risk, health, and relationships; and follow up testing.

Direct questions about these procedures to WSU's Environmental Health and Safety Specialist, Telephone (801) 626-7823; fax (801) 626-8530; address: 3002 University Circle, Ogden, UT 84408-3002.

IHC WorkMed is WSU's preferred Workers Compensation provider.

---

**What are the exposed bloodborne individual's responsibilities?**

The exposed individual is responsible for:

1. Becoming familiar with post-exposure procedures before an exposure occurs
2. Obtaining medical treatment and follow up. (See "Post Exposure Procedures" above)
3. Completing necessary forms
4. Notifying his/her supervisor or clinical instructor of your exposure
What are the responsibilities of the department?

The department is responsible for:

1. Disseminating post exposure information to faculty, staff, and interns who are at risk for exposures to human blood
2. Coordinating blood testing of the source individual once consent is given

What are the responsibilities of the supervisor?

The supervisor or clinical instructor is responsible to:

1. Becoming familiar with these procedures before an exposure occurs
2. Knowing the location of the nearest health care provider able to perform post-exposure evaluation and treatment
3. Having available rapid access to the health care provider's telephone number

Forms

Forms are available for download at http://www.weber.edu/ehs/

- Supervisor's Report of Incident
  The supervisor or instructor of the exposed individual must complete and submit this form to EH&S within 24 hours following an occupational exposure to human blood or other bio-hazardous material.
- Incident Information Form
  The exposed individual must complete and submit this form to EH&S within 24 hours following an occupational exposure to human blood or other bio-hazardous material.
- Source Individual's Consent or Refusal for Infectivity Testing Form
  The individual whose blood or bio-hazardous material was involved in the occupational exposure (not the exposed individual) must complete and sign this form before submitting to testing.
- Refusal of Post-Exposure Medical Evaluation Form
  The exposed individual must complete this form only if refusing post-exposure medical evaluation by a health care professional.
- A printable copy of the information on this page.
APPENDIX C

Criminal Background Check Policy

Drug Testing Policy
Weber State University  
Athletic Training Education Program  
Student Criminal Background Check Policy

1. PURPOSE:  
The WSU Master of Science in Athletic Training Program enters into Affiliation Agreements with multiple healthcare facilities and schools throughout the state. These agreements provide WSU Athletic Training Education student and faculty authorized access to facility resources and patients. In response to stipulations contained within one or more of these Agreements, the WSU Master of Science in Athletic Training Program requires students admitted to the MSAT program to submit to a FBI level criminal background check. This screening process has been mandated by the WSU Athletic Training Education Program in an effort to more effectively protect the safety and well-being of the patients, clients, and residents of those facilities, and is fully supported by the Department of Health Promotion and Human Performance and the MSAT faculty.

2. POLICY:  
During the first semester of the MSAT program, all students must submit to and provide evidence of a FBI criminal background check (CBC). If the CBC reveals history of convicted criminal actions, the student may be removed from the MSAT program. If extenuating circumstances result in the CBC results being returned after the end of the first semester, and found to be positive for convicted criminal actions, the student may be expelled from the MSAT program and will not be entitled to any refund of tuition dollars and other fees.

3. PROCEDURES:  
All students who wish to apply for admission to the WSU Athletic Training Education Program(s) are informed in writing that they are required to submit to a FBI level criminal background check.

   A.1 The following written statement, as well as instructions for obtaining the CBC, are found in both the admission and acceptance packets: "If your record reveals prior criminal convictions, it may affect your eligibility to begin and/or remain in the MSAT program. Actions which would preclude an individual from admission to, or continuance in the MSAT program include: aggravated assault, spouse or child abuse, sexual predatory behavior, financial related crimes such as identity theft, and issue of moral turpitude (reference Utah Department of Professional Licensing). This list is not inclusive of all criminal convictions that will prevent program admission and/or progression, and the program reserves the right to review each student’s record on an individual basis."

   A.2 If your background check documents a criminal conviction, it may be required of you to obtain official verification that the charge(s) have been expunged.
B.1 Students are provided an instructional document providing step-by-step instructions for obtaining a FBI level criminal background check.

B.2 Students are responsible for the expense associated with this documentation. This information is attached.

B.3 Disclaimer included in the admission and orientation packet states:
A Students are encouraged to have their criminal record expunged prior to seeking criminal background check.@

C.1 Any student convicted of one or more felonies, must receive an absolute discharge from the sentences for all felony convictions five or more years prior to the date of filing an application to the MSAT Program. Therefore, students who have committed felonies and have not met the above-stated criteria will not be allowed to progress in the MSAT program.

C.2 Students whose criminal background checks reveal evidence of prior convictions will be reviewed on a case-by-case basis to determine if they will be allowed to progress in the MSAT program.

C.3 Students who have committed a felony, but have successfully petitioned to reduce the conviction to a misdemeanor charge, will be reviewed on a case-by-case basis to determine if they will be allowed to progress in the MSAT program. Students who have criminal convictions in which actual or potential physical, emotional, or financial harm to another individual was involved will be treated as stated in C.1.

D.1 Students already progressing in the MSAT program are required to report any pending criminal charge(s) at the time that they occur (this includes throughout the entirety of their MSAT educational program).

D.2 The Program reserves the right to place the student reporting a pending criminal charge on an approved program leave-of-absence until the courts have made a decision regarding the criminal actions.

D.3 If criminal charge(s) are dismissed, the student will re-enter the MSAT program at the earliest date possible.

D.4 If the courts determine that the charges are valid and a conviction is made, the student=s status in the MSAT program will be reviewed on a case-by-case basis. Procedures outlined in Items C.1 - C.3 will be the basis for the program=s response.
D.5 Students placed on an approved program leave-of-absence until the courts have made a decision regarding the criminal charge(s) will have a "T" grade placed on their educational record.

D.6 If the charge(s) are dismissed, or the program determines that the students may progress to completion, the student will be allowed to resume the MSAT course work without financial loss and the "T" grade will be converted to actual grade earned.

D.7 If the charge(s) are not dismissed and the program determines that the student is to be dismissed from the program, the student will be subject to the WSU policy guiding refund of tuition and fees.

E.1 Information obtained in the criminal background check may be disclosed on a need-to-know basis to instructors, administrators, and contracted clinical facilities.

F.1 A student who wishes to grieve the Program decision relative to the actions taken in response to the results of their criminal background check are referred to WSU Policy Section 6-23 thru 33; Student due process policy and procedures.

F.2 A student seeking such action will be placed on an approved program leave-of-absence until the final outcome of his/her grievance is determined.

F.3 As always, the safety and well-being of patients, clients, and residents of our contracted clinical facilities remain our first consideration.
MEMORANDUM

TO: Graduate Athletic Training Students

FROM: Graduate Athletic Training Program Director – Valerie Herzog

DATE: June 17, 2014

SUBJECT: Required fingerprinting and background check procedures

All individuals admitted to the Graduate Athletic Training Education Program will be required to complete Livescan fingerprinting and receive background clearance from the Bureau of Criminal Identification prior to performing clinical rotations off-campus.

The Livescan fingerprinting office is located in Room 022 of the McKay Education Building. You will go to the Livescan fingerprinting office on Thursday, June 26th, on your assigned time in the morning. Appointment time: ____________________

Required payments:

1. A receipt showing that you paid $55 to WSU HPHP Department (pay this at the front desk in the Swenson Bldg. – NOT in the Wildcat Center) for your background check and fingerprinting. Give one copy of the receipt to Dr. Herzog by the end of the day on June 18th.
2. Bring the second copy of your receipt with you to your fingerprinting appointment on Thursday, June 26th.
3. You may pay with cash, check, or credit card at the Swenson Building Customer Service desk.
4. If your name does not show on your receipt, please write it on the receipt prior to turning it in.

Bring the following with you to your fingerprinting appointment:

1. Government issued ID: Drivers License, Passport, or Military ID

Fingerprint and background clearance is valid for three years. If the program is not complete within three years, this procedure must be repeated.

(5/2014)
1. PURPOSE:

The WSU Master of Science in Athletic Training (MSAT) Program enters into Affiliation Agreements with multiple healthcare facilities and public schools throughout the state. These agreements provide WSU MSAT students and faculty authorized access to facility resources and patients. In response to stipulations contained within one or more of these Agreements, the WSU MSAT Program requires students to submit to a urine drug screen analysis for the presence of controlled and/or illegal substance(s) in order to be retained in the MSAT Program. This screening process has been mandated by the WSU MSAT Program in an effort to more effectively protect the safety and well-being of the patients, clients, and residents of those facilities, and is fully supported by the Health Promotion and Human Performance Department and the Graduate Athletic Training faculty.

In order to remain in compliance and good standing with our partners in healthcare delivery, the MSAT Program has contracted with JAG Exam Services to perform the required urine drug screen on our students entering the program(s). JAG Exam Services is an approved testing site which meets standards of testing and reporting of results to the Program.

2. POLICY:

During the first semester of the MSAT Program all students must submit to and provide evidence of a negative drug screen. If the drug test reveals the presence of a non-prescribed controlled substance, then the student may be prevented from beginning the MSAT Program. If extenuating circumstances result in the drug screen results being returned after the first day of class, and found to be positive for non-prescribed controlled substance(s), the student may be expelled from the MSAT Program and will be subject to the WSU policy guiding refund of tuition and fees.

3. PROCEDURE:

All students who wish to apply for admission to the WSU Athletic Training Education Program are informed in writing that they are required to submit to, and pass, a urine drug screen after acceptance into the program.
A.1 The following written information and instructions are found in the both admission and acceptance packets: “If your drug test reveals the presence of a non-prescribed controlled substance it may affect your eligibility to remain a student in the WSU MSAT Program.”

A.2 If the urine drug screen is positive for metabolites of controlled substances, the student may be required to provide medical documentation of the prescribed controlled substance(s).

B.1 Students are provided an instructional document providing instructions for obtaining the urine drug screen at an approved testing facility.

B.2 The student is responsible for the cost of the urine drug screen.

C.1 If a student’s results return indicating a “dilute” sample, testing must be repeated at the student’s expense.

C.2 A second “dilute” test result will be interpreted as a positive screen, and the student may not be allowed to enter and/or continue in the program.

D.1 Drug screen results that read as “positive” for metabolites of non-prescribed controlled substances will result in the student not being allowed admission, or being withdrawn from the program.

D.2 Students have the option of requesting a re-screen by a different, state approved, drug screening agency. The re-screen must be a lab-based test and must screen for the same drugs.

D.3 The re-screen will be at the student’s expense.

E.1 A student who refuses to submit to the urine drug screen or who does not have the screening performed by the date indicated on the admission form may forfeit his/her position in the MSAT Program.
F.1 The Program reserves the right to ask any student(s) in the MSAT program(s) to submit to additional testing throughout the duration of their WSU MSAT Program experience. This action will be engaged if a student appears to be intoxicated or under the influence of drugs, narcotics, or chemicals. Graduate Athletic Training faculty, in consultation with other Athletic Training Education faculty and/or health care professionals, are authorized to make this determination. If it is determined that the student is impaired, in order to avoid a potential threat or risk to the public health, safety, or welfare, the student will be required to leave the clinical setting. The cost of additional urine drug screens will be the responsibility of the student.

G.1 Students who test negative on the urine drug screen have passed the drug screen criteria for program admission.

H.1 A student who wishes to grieve the Program decision relative to the actions taken in response to the results of his/her urine drug screen are referred to WSU Policy Section 6-23 thru 33; Student due process policy and procedures.

H.2 A student pursuing a grievance process will be placed on an approved program leave-of-absence until the final outcome of his/her grievance is determined.

H.3 As always, the safety and well-being of patients, clients, and residents of our contracted clinical facilities remain our first consideration.
Possession or Sale of Controlled Substances and Financial Aid:

Federal law requires us to notify you of potential penalties if convicted of the possession or sale of a controlled substance (i.e. illegal drugs) under any Federal or State Law. Individuals enrolled in classes, who would otherwise be eligible for Federal Financial Aid would no longer be able to receive any grant, loan, or work assistance during the period beginning on the date of such conviction and ending after the interval specified as follows:

If convicted of an offense involving the 'possession' of a controlled substance:
Ineligibility period is:
First offense - 1 year
Second offense - 2 years
Third offense - Indefinite

If convicted of an offense involving the 'sale' of a controlled substance:
Ineligibility period is:
First offense - 2 years
Second offense - Indefinite

Weber State University prohibits the unlawful possession, use, or distribution of drugs and alcohol by students and employees on the school's property or as part of school activities as outlined in the Student Alcohol and Drug Policy (PPM-10). http://www.weber.edu/ppm/Policies/6-10_StudentAlcoDrug.html and in the Alcoholic Beverage Policy (3-30b) http://www.weber.edu/ppm/Policies/3-30b_AlcoholicBeveragePolicy.html The institution may impose sanctions upon students and employees who violate these policies.

Sincerely,
Mr. Jed Spencer, Director of Financial Aid & Scholarships
Weber State University
Drug Testing
Complete between June 18-20, 2014.

J.A.G. Exam Services, Inc.
Jim Guernsey, President
801-399-9686 – Call and schedule an appt.
Fax 801-399-9685

952 East Chambers, Suite 5 (around back of building)
South Ogden, UT
(NOTE: building is across street from Arctic Circle on Washington Blvd.)

Lab-based test - $24 (bring cash or check, can use credit card, but will add a 3% fee)
Students must bring a Photo ID – Driver’s License or other official state-issued ID
DON’T DRINK TOO MUCH WATER BEFORE YOU GO – EAT A FULL MEAL AND
DON’T USE THE BATHROOM FOR 2-4 HOURS PRIOR TO THE TEST.
Note: They have to watch you go to the bathroom, so be prepared for that.

5-panel Screen:
THC – Marijuana
Cocaine
PCP
Morphine/Opiates
Amphetamines/Methamphetamines
APPENDIX D

Athletic Training Course Descriptions
Master of Science in Athletic Training Courses

MSAT 6080. Research Methods I (3) S

This course explores the process and methods of scientific inquiry and interpretation of research findings in athletic training. Students will gain familiarity with the major elements of research including literature review, quantitative and qualitative methodology, design, evaluation of research, statistical analysis, presentation of data, and ethical considerations. This course also provides an overview of statistics including descriptive and inferential statistics and one-way ANOVA. Students should have a basic understanding of conducting library and Internet information searches prior to taking this course.

MSAT 6085. Research Methods II (3) F

This course is designed to help students develop a master's thesis research project proposal that is carefully researched and professionally written. Students will prepare an introduction, literature review, detailed methodology, and IRB proposal. Prerequisite: MSAT 6080.

MSAT 6090. Research Methods III (3) S

This course is designed to help students complete a master's thesis research project. Basic statistical analysis will be reviewed and advanced statistics will be introduced. Students will collect and analyze data and synthesize results. At the completion of the course, students will submit a full manuscript, suitable for publication, along with an abstract and a professional poster. Prerequisite: MSAT 6085.

MSAT 6095. Research Methods IV (1-3) F,S,Su

This course allows students to choose one of the following options: 1) complete their master’s thesis requirements from MSAT 6090; 2) prepare a manuscript for publication or formal oral presentation for a professional conference, or 3) participate in additional research above and beyond the master’s thesis. May be taken twice up to 9 credit hours.

MSAT 6200. Psychology of Sport, Injury & Rehabilitation (3) F

This course is designed to provide a basic understanding of the psychology of sport, injury, and rehabilitation. Topics covered include emotion, motivation, mental skills training and use, psychological antecedents of injury, psychology of injury and rehabilitation, using mental skills with injured athletes, career transition and termination, disabilities, rehabilitation/exercise adherence, eating disorders, alcohol and drug/substance abuse, gender and cultural diversity, and research methods related to psychology of sport, injury and rehabilitation. The graduate student will get an advanced approach, including in-depth application of psychological interventions with injured athletes and a more comprehensive investigation of psychosocial aspects. Prerequisite: PSY SS1010.
MSAT 6300. Orthopedic Assessment of Musculoskeletal Injuries: Lower Extremities (3) *F*

Content of this course addresses evaluation techniques and care for musculoskeletal injuries to the trunk and lower extremities for graduate-level athletic training students. The student must integrate knowledge of anatomical structures, physiology principles and evaluative techniques to provide a basis for critical decision-making in an injury management environment. Prerequisite: ZOOL 2100.

MSAT 6301. Orthopedic Assessment of Musculoskeletal Injuries: Upper Extremities (3) *S*

Content of this course addresses evaluation techniques and care for musculoskeletal injuries to the head, face and upper extremities for graduate-level athletic training students. The student must integrate knowledge of anatomical structures, physiology principles and evaluative techniques to provide a basis for critical decision-making in an injury management environment. Prerequisite: MSAT 6300.

MSAT 6350. General Medical Conditions and Advances in Athletic Training (3) *S*

Discusses general medical disorders and conditions pertaining to sports medicine and inquire into the latest research of related issues.

MSAT 6400. Basic Therapeutic Modalities for Musculoskeletal Injuries (3) *F*

Through lecture, discussion, and laboratory experience, the scientific basis of musculoskeletal rehabilitation involving therapeutic modalities will be examined. This course is designed to introduce students to the contemporary usage and basic foundation of therapeutic modalities, transmission of energy, infrared, and mechanical therapy. Two lecture and 2 lab hours per week. Prerequisites: MSAT 6301 and ZOOL 2200.

MSAT 6401. Advanced Therapeutic Modalities for Musculoskeletal Injuries (3) *S*

Through lecture, discussion, and laboratory experience, the scientific basis of musculoskeletal rehabilitation involving therapeutic modalities will be examined. This course is designed to build upon the basic foundations of therapeutic modalities established in MSAT 6400. Topics for discussion include the application of electrotherapy devices, ultrasound, light therapy, and short-wave diathermy. Two lecture and 2 lab hours per week. Prerequisite MSAT 6400.

MSAT 6431. Orthopedic Taping, Wrapping, & Bracing (1) *S*

This course is designed to give graduate athletic training students a basic understanding of athletic training taping, wrapping, bracing, padding, and splinting techniques. Students will also learn how to properly fit and repair athletic protective equipment. Students will apply a variety of techniques to support all areas of the body. Prerequisite: Must be taken concurrently with or following MSAT 6430.
MSAT 6450. Basic Rehabilitation of Musculoskeletal Injuries (3) F

Content of this course provides basic understanding of therapeutic exercise as it relates to the rehabilitation process of musculoskeletal injuries. Course provides basic concepts and hands-on techniques used in the rehabilitation of the athlete/patient from an injury state to a highly competitive state. Prerequisite: MSAT 6300 and MSAT 6301.

MSAT 6451. Advanced Rehabilitation of Musculoskeletal Injuries (3) S

Content of this course provides advanced understanding of therapeutic exercise as it relates to the rehabilitation process of musculoskeletal injuries. This course provides advanced instruction and hands-on techniques in the rehabilitation of an athlete/patient from an injury state to a highly competitive state. Prerequisite: MSAT 6450.

MSAT 6500. Introduction to Graduate Athletic Training (First Semester) (2) F

Provides an opportunity for students to observe the function of an athletic training facility and become aware of the various duties performed by a Certified Athletic Trainer. Orients students to the graduate athletic training program.

MSAT 6501. Graduate Practicum I (2) S

Provides an opportunity for graduate-level athletic training students to receive skill proficiency testing in the areas of acute care of injury and illnesses. Prerequisite: MSAT 6500.

MSAT 6502. Graduate Practicum II (3) F

Provides an opportunity for graduate-level athletic training students to receive skill proficiency testing in the areas of orthopedic assessment (upper extremity) and basic therapeutic modalities. Prerequisite: MSAT 6301, MSAT 6400, MSAT 6501.

MSAT 6503. Graduate Practicum III (3) S

Provides an opportunity for graduate-level athletic training students to receive skill proficiency testing in the areas of basic therapeutic exercise, sport psychology, pharmacology, nutrition, and strength and conditioning. Prerequisites: MSAT 6200, MSAT 6450, MSAT 6502.

MSAT 6504. Graduate Practicum IV (3) Su

Provides an opportunity for graduate-level athletic training students to receive skill proficiency testing in the areas of advanced therapeutic exercise, advanced therapeutic modalities, and general medical conditions and disabilities. Prerequisites: MSAT 6503, MSAT 6401, MSAT 6451, MSAT 6350.
MSAT 6600. Administration and Management in Athletic Training (3) F

Provides an overview of the necessary policies, procedures, maintenance, and daily operation of athletic training facilities. Applies principles of facility design and planning, information management, legal and ethical considerations in health care, and professional development as it relates to athletic training. Prerequisite: MSAT 6502.

MSAT 6700. Advanced Diagnostic Imaging for the Athletic Training Profession (1) F

This course provides an opportunity for students to gain exposure to the diagnostic imaging techniques commonly used by the medical community in diagnosis of injury in the athlete. Upon completion of the course, students will be able to identify anatomy and understand terminology used by health professionals when discussing diagnostic images and have an advanced understanding of indications, contraindications, and clinical implications. Prerequisite: MSAT 6350.

MSAT 6998 - Master’s Board of Certification (BOC) Exam Preparation (1) F, S

This course prepares Graduate Athletic Training students to take the Athletic Trainer Board of Certification (BOC) Exam. This course will review content from all courses in the Master of Science in Athletic Training program as well as content from the program’s prerequisite courses. Prerequisite: MSAT 6450. May be repeated 2 times up to 3 credit hours.

MSAT 6999 Critical Thinking for Musculoskeletal Injury Management (1) F

Content of this course addresses evaluation techniques, rehabilitation processes and return to play guidelines for specific orthopedic injuries to the upper and lower extremities. The student must integrate anatomical structures, physiology principles, rehabilitation principles, and evaluative techniques to provide a basis for critical decision-making and care in a musculoskeletal injury management environment. Prerequisites: MSAT 6401 and MSAT 6451.
APPENDIX E

Clinical Education Guidelines
Weber State University  
Athletic Training Education Program  
Clinical Education Guidelines

When the athletic training student (ATS) is assigned to a Preceptor, it is essential that all personnel understand that the ATS is in the clinical education setting to learn under direct supervision, not simply to provide a service to patients and support personnel or act as a replacement for a full-time employee. The responsibilities of the ATS and Preceptor are provided below.

The ATS should:
1. Place a priority on academic courses.
2. Communicate with the Preceptor regarding daily clinical experience opportunities.
3. Practice competencies with Preceptors and peers to develop proficiency.
4. Mentor and teach other students in the program.
5. Apply critical thinking, communication, and problem solving skills.
6. Be prepared for proficiency assessments on a daily basis.
7. Obtain MSAT clinical experiences during scheduled direct patient care supervision by the Preceptor.
8. Perform skills on patients only once instructed by a course instructor or preceptor.
9. Be willing to learn about variations in applying the same technique or skill.
10. Provide honest feedback of the MSAT clinical experience through the Preceptor Evaluation and the Clinical Experience Evaluation, completed at the end of each rotation.

The Preceptor should:
1. Accept the ATS assigned to his/her facility without discrimination.
2. Utilize the ATS for no more than 25 hours/week unless reviewed with the Program Director and/or Coordinator of Clinical Education.
3. Provide direct supervision of the ATS in the context of direct patient care, which is defined as direct visual and auditory interaction between the Preceptor and the ATS.
4. Allow the ATS an opportunity to answer his/her own questions using critical thinking and problem solving skills.
5. Provide supervised opportunities for the ATS to actively participate in patient care related to the practicum course and clinical experience level of the ATS.
6. Allow the ATS to only perform skills on patients once instructed by a course instructor or preceptor.
7. Guide the ATS in using communication skills and developing professional and ethical behaviors.
8. Assess the ATS on competencies related to the practicum course and clinical experience level of the ATS.
9. Provide ongoing feedback to assist the ATS in developing proficiency in skills related to the practicum course and clinical experience level of the ATS.
APPENDIX F

Clinical Evaluation Forms
Weber State University  
Department of Health Promotion and Human Performance  

Athletic Training Preceptor Evaluation

Name of Preceptor: ____________________________________  Rotation:  [ ] Fall  [ ] Winter  [ ] Spring  [ ] Summer  

Location of Current Practicum: __________________________________  Date: ______________

Number of hours with Preceptor: _____________________________________

Current Clinical Level: [ ] 6501  [ ] 6502  [ ] 6503  [ ] 6504

**Directions:** This form is to be used by the student to evaluate the clinical/educational aspects of the supervising Preceptor. Be honest, as this evaluation will be used to evaluate the WSU Athletic Training Education Program and will serve to improve the overall educational program. It will in NO way be reflected in your clinical grade. Check the appropriate number from the coding system below to respond to the following statements.

**Evaluation Scale**

5 = Very good,  4 = Good,  3 = Fair,  2 = Poor,  1 = Very poor,  N/A = Not applicable

---

**Modified Athletic Training Supervisory Skills Inventory**¹

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>In my opinion, the supervising athletic trainer (Preceptor) named above: conveys practicum/clinical requirements to the students. Comments:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2. Conveys understanding of the athletic training Preceptor’s role to the student. Comments:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>3. Provides information to supplement the student’s theoretical knowledge. Comments:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>4. Communicates knowledge effectively. Comments:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5. Suggests appropriate outside resources and reading materials. Comments:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>6. Provides direct suggestions for evaluation and/or treatment when needed or requested by patients or students. Comments:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>7. Demonstrates athletic training skills, techniques, and procedures when needed or requested by patients or students. Comments:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>8. Provides guidance in evaluation and assessment procedures. Comments:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>9. Provides guidance for maintaining records and report writing tasks. Comments:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>10. Remains up-to-date regarding student’s ongoing practicum/clinical and experiences. Comments:</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
11. Provides ongoing direct supervision. Comment: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

12. Conveys opinions regarding student’s specific athletic training strengths. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

13. Conveys opinions regarding student’s specific athletic training weaknesses. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

14. Suggests ways for students to improve areas of weakness. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

15. Appropriately confronts students for not fulfilling practicum/clinical requirements. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

16. Provides opportunity for sufficient number of supervisory conferences. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

17. Provides comprehensive supervisory evaluations periodically. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

18. Evaluates student’s performance fairly. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

19. Allows the students sufficient opportunity to interact during supervisory conferences. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

20. Listens attentively to students. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

21. Demonstrates empathy and respect toward students. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

22. Communicates at a level consistent with the student’s professional development. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

23. Maintains emotional stability during supervisory encounters. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

24. Exhibits an appropriate sense of humor. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

25. Encourages student feedback concerning the supervisory process. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

26. Remains receptive to student ideas concerning assessment and treatment strategies. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

27. Shows flexibility in permitting student to explore a variety of treatment strategies. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

28. Motivates the student to develop listening skills. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

29. Encourages the student’s self appraisal of their athletic training skills. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA

30. Encourages student to become increasingly more independent and autonomous professionals. Comments: □ 1 □ 2 □ 3 □ 4 □ 5 □ NA
31. Helps students in planning and implementing comprehensive athletic training injury/illness prevention programs. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

32. Helps students recognize and evaluate injuries and illnesses sustained by the physically active population. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

33. Demonstrates appropriate first aid and emergency care. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

34. Helps students plan and implement a comprehensive rehabilitation and reconditioning program. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

35. Provides a good model for the organization and administration of athletic injuries. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

36. Instructs the student in financial, personnel, and public relations management. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

37. Demonstrates good counseling skills when interacting with athletes, coaches, and parents. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

38. Maintains appropriate ethical behavior with athletes. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

39. Discusses with the student the Code of Ethics. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

40. Demonstrates interest and enthusiasm regarding the profession. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

41. Provides an appropriate model of speech and language. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

42. Maintains an appropriate professional appearance. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

43. Provides an appropriate professional model overall. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

44. Overall rating of supervisory effectiveness. Comments: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

45. What did you like best about this clinical rotation?

46. What did you like least about this clinical rotation?

47. Identify specific skills you have developed or enhanced during this rotation.

48. How might the quality of this rotation be improved?

Student Signature (Optional): ____________________________________________
Weber State University
Department of Health Promotion and Human Performance

Athletic Training Clinical Facility Evaluation

Current Placement: ____________________________________________
Date: ___________________________ Rotation: ☐ Fall ☐ Winter ☐ Spring ☐ Summer
Number of hours with Preceptor: _______________________________________
Current Clinical Level: ☐ 6501 ☐ 6502 ☐ 6503 ☐ 6504

Directions: This form is to be used by the student to evaluate the clinical education experience learning environment. Be honest, as this evaluation will be used to evaluate the overall quality of the learning environment and will serve to improve the overall quality of the athletic training educational program. It will in NO way be reflected in your course grade. Check the appropriate number from the coding system below to respond to the following statements.

Evaluation Scale
5 = Very good, 4 = Good, 3 = Fair, 2 = Poor, 1 = Very poor, N/A = Not applicable
or
5 = Strongly agree, 4 = Agree, 3 = Neutral, 2 = Disagree, 1 = Strong disagree, N/A = Not applicable

I. Overall Evaluation
1. Did you receive any information from the clinical facility prior to your arrival regarding the facilities policies and procedures? ☐ Yes ☐ No

2. Did the facility provide you with any information or resources that would have improved your learning environment? ☐ Yes ☐ No

2a. If so, what information or resources would you liked to have received?

3. Did the supervising Preceptor introduce you to the staff members working at the facility? ☐ Yes ☐ No

4. Did the facility provide you with an orientation of the facilities? ☐ Yes ☐ No

5. Did the staff members at the facility make you feel welcomed? ☐ Yes ☐ No

5a. If not, why?

6. Was the layout of the facility adequate and conducive to a learning environment (i.e., offices, access to patients, access to resources)? ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

7. Did the facility have adequate equipment and supplies to meet the demands and expectations placed upon the student? ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

8. Did the staff members at the facility make adequate time to answer questions and assist you when necessary? ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA

9. Was time set aside specifically for educational opportunities? If so, how much time per day was set aside.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA minutes day.
10. Did the facility take adequate steps to expose the student to a variety of patients and/or cases on a daily basis?  

11. The clinical facility provided the student with challenges and opportunity to utilize skills necessary to meet the following, according to their clinical level:  
   - Risk management and injury prevention competencies.  
   - Pathology of injuries and illness competencies.  
   - Orthopedic clinician examination and diagnosis competencies.  
   - Medical conditions and disabilities competencies.  
   - Acute care of injury and illness competencies.  
   - Therapeutic modalities competencies.  
   - Therapeutic exercise competencies.  
   - Pharmacology competencies.  
   - Psychosocial intervention and referral competencies.  
   - Nutritional aspects of injury and illness competencies.  
   - Health care administration competencies.  
   - Professional development and responsibilities competencies.  

12. Did the facility provided or have access to educational material(s) which support student learning and clinical expectations.  

13. Did the clinical facility use proper OSHA guidelines in the management of blood, bodily fluids, and medical waste?  

14. Did the staff at the facility practice ethically and legally according to their professional Code of Ethics and/or Scope of Practice?  

15. Did the staff at the facility demonstrate a sincere interest in professional development and responsibility?  

16. Was the communication within and among all interested parties associated with the clinical facility effective and positive?  

17. Did the facility demonstrate a sincere interest in and support of athletic training clinical education?  

18. Overall, the experiences I encountered at the facility reinforced the information and skills I learned in my course work.
19. Overall the facility provided for an environment conducive to learning and meeting the athletic training clinical competencies and proficiencies.

II. Written Comments
20. What were the strengths of this facility?

21. What were the weaknesses of this facility?

22. What would you like to see improved?

23. Any other comments.

Student Signature (Optional): ____________________________________________
Weber State University
Master of Science in Athletic Training Program

MSAT 6501 Final Clinical Evaluation

Name: ______________________________________ Rotation:  □ Fall  □ Winter  □ Spring  □ Summer
Location: ____________________________________ Preceptor: ______________________________________
Number of hours with Preceptor: ________________________________________________________

Directions: Please mark your individual perceptions concerning the clinical student identified above. Consider each item separately in deciding whether or not you generally agree or disagree or whether the student has meet minimal competency with the statement. Indicate the strength of the agreement or disagreement or ability by checking the appropriate number. You are encouraged to add any comments related to these items below. *Evaluate the student against/along with other “MATS’s” of the same clinical level.

Evaluation Scale*

_______ Poor - inability to perform this action without constant intervention from Preceptor, requires constant remediation.

_______ Fair or Below Average - performs this action to a barely acceptable standard, usually requires intervention from Preceptor, and requires remediation.

_______ Average - performs this action meeting minimal competency standards, requires occasional intervention from Preceptor, no remediation is required.

_______ Good or Above Average - performs this action meeting minimal competency standards, no Preceptor intervention is required.

_______ Excellent or Outstanding - performs this action that exceeds other students’ ability at this level.

N/A Not Applicable or Not Observed

I. Athletic Training Skills and Behaviors: All behaviors should be measured against and consistent with the student’s current clinical level.

[N/A] 1 2 3 4 5

Demonstrates general knowledge and understanding of the subject matter consistent with his/her clinical level including: emergency response. Comments:

[N/A] 1 2 3 4 5

Demonstrates the recognize acute injuries. Comments:

[N/A] 1 2 3 4 5

Demonstrates the ability to recognize acute injuries. Comments:

[N/A] 1 2 3 4 5

4. Demonstrates the manage acute injuries. Comments:

[N/A] 1 2 3 4 5

5. Demonstrates the ability to recognize acute illnesses. Comments:
6. Demonstrates the ability to manage acute illnesses. Comments:

7. Demonstrates knowledge of and skills in recognizing and managing risk factors associated with physical activity. Comments:

Demonstrates the ability to obtain, interpret, make decisions, and develop policies and procedures regarding environmental data to allow safe activity in a variety of environmental conditions (e.g., heat index, lightning, etc.). Comments:

Demonstrates effective lines of verbal and written communication using appropriate medical documentation and terminology. Comments:

Demonstrates knowledge of and enforcement of healthcare facility policies and procedures. Comments:

Demonstrates a commitment to and uses an evidence-based approach in the prevention, evaluation, and treatment of musculoskeletal injuries and illnesses when appropriate. Comments:

Points earned  

# of questions answered  

Section I Score = (Points earned) _______ ÷ (# questions answered) __________ *14 = __________

II. Personal Attributes

Student is dependable. Comments:

Student addresses assigned responsibilities without delay. Comments:

Student demonstrates an initiative to perform athletic training skills and tasks without being instructed. Comments:

Student establishes an appropriate rapport with patients and supervisors. Comments:

Student is willing to accept constructive criticism. Comments:

Student is neat, clean, and appropriately dressed during his/her clinical rotation. Comments:

Student recognizes the need for and demonstrates a commitment to working with a diverse population and in diverse work settings.

Student is sympathetic to the physical and psychological needs of the patients. Comments:
Student is enthusiastic about his/her current assignment. Comments: N/A

Section II Score = (Points earned) _______ ÷ (# questions answered) __________ *4 = __________

III. Attendance

21. Student was in attendance when they were scheduled.

NA

Section III Score = (Points earned) _______ ÷ (# questions answered) __________ *2 = __________

IV. General Comments: Use this portion of the evaluation form to qualitatively reflect on the student's experience and professional growth. This is an overall review of the experience, designed to provide feedback to the student. Complete the questions and write any comments that appear pertinent. Review with your student and then both sign and date.

Compared to other “MATS” with similar experience these are the student’s strengths and weaknesses.

Strengths:

Weaknesses:

Additional Comments:

Preceptor Signature and Date

Student Statement:
I have discussed this evaluation with my Preceptor and I accept the content as a reflection and constructive criticism of my clinical education preparation at this current time.

Student Signature and Date

Grade (Add sections I, II, III)
Section I _____ + Section II _____ + Section III _____ = _____
Weber State University  
Master of Science in Athletic Training Program  

MSAT 6502 Final Clinical Evaluation

Name: ______________________________________ Rotation: ☐ Fall ☐ Winter ☐ Spring ☐ Summer
Location: _________________________________ Preceptor: ________________________________
Number of hours with Preceptor: ______________________________________________________

Directions: Please mark your individual perceptions concerning the clinical student identified above. Consider each item separately in deciding whether or not you generally agree or disagree or whether the student has meet minimal competency with the statement. Indicate the strength of the agreement or disagreement or ability by checking the appropriate number. You are encouraged to add any comments related to these items below. *Evaluate the student against/along with other “MATS’s” of the same clinical level.

Evaluation Scale*

- Poor - inability to perform this action without constant intervention from Preceptor, requires constant remediation.
- Fair or Below Average - performs this action to a barely acceptable standard, usually requires intervention from Preceptor, requires remediation.
- Average - performs this action meeting minimal competency standards, requires occasional intervention from Preceptor, no remediation is required.
- Good or Above Average - performs this action meeting minimal competency standards, no Preceptor intervention is required.
- Excellent or Outstanding - performs this action that exceeds other students’ ability at this level.

N/A Not Applicable or Not Observed

I. Athletic Training Skills and Behaviors: All behaviors should be measured against and consistent with the student’s current clinical level.

1. Demonstrates general knowledge and understanding of the subject matter consistent with his/her clinical level including: emergency response, risk management, taping and splinting, injury assessment, pharmacology, and psychology. Comments:

2. Demonstrates the ability to recognize acute injuries and illnesses. Comments:

3. Demonstrates the ability to manage acute injuries and illnesses. Comments:

4. Demonstrates knowledge of and skills in recognizing and managing risk factors associated with physical activity. Comments:

5. Demonstrates the ability to obtain, interpret, make decisions, and develop policies and procedures regarding environmental data to allow safe activity in a variety of environmental conditions (e.g., heat index, lightning, etc.). Comments:
Demonstrates the ability to appropriately apply common taping, wrapping and bandaging skills. Comments:

Demonstrates the ability to select, evaluate, and modify common taping, wrapping, and bracing skills. Comments:

Demonstrates the ability to select, evaluate, apply, and modify standard protective equipment and other custom devices. Comments:

Demonstrates the ability to recognize, intervene, and refer when patients exhibit sociocultural, mental, emotional, and psychological behavioral problems. Comments:

Demonstrates the ability to select and integrate appropriate motivational techniques into patients’ treatment or rehabilitation programs. Comments:

Demonstrates the ability to clinically evaluate and diagnosis orthopedic injuries of the lower extremity. Comments:

Demonstrates the ability to document the results of a lower extremity orthopedic injury examination: Comments:

Demonstrates the ability to evaluate, administer, and monitor common pharmaceutical agents used in the treatment of injuries and illnesses (e.g., epi-pen, bronchodilators, anti-inflammatory medicine). Comments:

Demonstrates an understanding and applies appropriate pharmacy regulations relevant to the treatment of injuries and illnesses. Comments:

Demonstrates effective lines of verbal and written communication using appropriate medical documentation and terminology. Comments:

Demonstrates knowledge of and enforcement of healthcare facility policies and procedures. Comments:

Demonstrates a commitment to and uses an evidence-based approach in the prevention, evaluation, and treatment of musculoskeletal injuries and illnesses when appropriate. Comments:

Points earned \[ \frac{(\text{Points earned})}{(\text{# of questions answered})} \times 14 = \] 

II. Personal Attributes

Student recognizes the need for and demonstrates a commitment to patient privacy (e.g., HIPAA). Comments:

Student recognizes the need for and demonstrates a commitment to a team approach to practice (e.g., values other healthcare providers, works well with others, dependable). Comments:
Student recognizes the need for and executes duties within the identified scope of practice for athletic training students. Comments:

Student recognizes the need for and demonstrates the ability to establish and maintain positive relationships (e.g. honesty, compassion, empathy, rapport) when interacting with patients, family members, administrators, and other healthcare team members. Comments:

Student recognizes the need for and demonstrates a commitment to practicing athletic training ethically and legally within the confines of the NATA Code of Ethics, BOC Standards of Practice, national, state, and institutional policies. Comments:

Student displays professionalism in all areas of clinical practice, including but not limited to verbal and written communication with patients, physicians, patients, media, administrators, and other healthcare team members. Comments:

Student recognizes the need for and demonstrates a commitment to working with a diverse population and in diverse work settings.

Student takes initiative to perform necessary athletic training skills/tasks without being asked. Comments:

Student demonstrates self-confidence while interacting with patients. Comments

Student is willing to accept constructive criticism. Comments:

Student is a prudent and effective decision-maker. Comments:

Student demonstrates leadership qualities which serve to enhance the mission of the institution and profession. Comments:

Section II Score = (Points earned) _______ ÷ (# questions answered) __________ *4 = __________

III. Attendance

30. Student was in attendance when they were scheduled.

Section III Score = (Points earned) _______ ÷ (# questions answered) __________ *2 = __________

IV. General Comments: Use this portion of the evaluation form to qualitatively reflect on the student's experience and professional growth. This is an overall review of the experience, designed to provide feedback to the student. Complete the questions and write any comments that appear pertinent. Review with your student and then both sign and date.

Compared to other “MATS” with similar experience these are the student’s strengths and weaknesses.

Strengths:
Weaknesses:

Additional Comments:

___________________________________________
Preceptor Signature and Date

Student Statement:
I have discussed this evaluation with my Preceptor and I accept the content as a reflection and constructive criticism of my clinical education preparation at this current time.

___________________________________________
Student Signature and Date

Grade (Add sections I, II, III)

Section I _____ + Section II _____ + Section III _____ = _____
# MSAT 6503 Final Clinical Evaluation

**Name:** ______________________________  **Rotation:** ☐ Fall  ☐ Winter  ☐ Spring  ☐ Summer  
**Location:** ______________________________  **Preceptor:** ______________________________

**Number of hours with Preceptor:** ____________________________________________

**Directions:** Please mark your individual perceptions concerning the clinical student identified above. Consider each item separately in deciding whether or not you generally agree or disagree or whether the student has meet minimal competency with the statement. Indicate the strength of the agreement or disagreement or ability by checking the appropriate number. You are encouraged to add any comments related to these items below. *Evaluate the student against/along with other “MATS’s” of the same clinical level.

**Evaluation Scale**

- **Poor** - inability to perform this action without constant intervention from Preceptor, requires constant remediation.
- **Fair or Below Average** - performs this action to a barely acceptable standard, usually requires intervention from Preceptor, requires remediation.
- **Average** - performs this action meeting minimal competency standards, requires occasional intervention from Preceptor, no remediation is required.
- **Good or Above Average** - performs this action meeting minimal competency standards, no Preceptor intervention is required.
- **Excellent or Outstanding** - performs this action that exceeds other students’ ability at this level.
- **N/A** Not Applicable or Not Observed

### I. Athletic Training Skills and Behaviors: All behaviors should be measured against and consistent with the student’s current clinical level.

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Demonstrates general knowledge and understanding of the subject matter consistent with his/her clinical level including: emergency response, risk management, taping and splinting, injury assessment, pharmacology, psychology, nutrition, therapeutic modalities and rehabilitation. Comments:

- Demonstrates the ability to recognize acute injuries and illnesses. Comments:

- Demonstrates the ability to manage acute injuries and illnesses. Comments:

- Demonstrates knowledge of and skills in recognizing and managing risk factors associated with physical activity. Comments:

- Demonstrates the ability to obtain, interpret, make decisions, and develop policies and procedures regarding environmental data to allow safe activity in a variety of environmental conditions (e.g., heat index, lightning, etc.). Comments:
<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Demonstrates the ability to appropriately apply common taping, wrapping and bandaging skills.</td>
<td>N/A</td>
</tr>
<tr>
<td>2</td>
<td>Demonstrates the ability to select, evaluate, and modify common taping, wrapping, and bracing skills.</td>
<td>N/A</td>
</tr>
<tr>
<td>3</td>
<td>Demonstrates the ability to select, evaluate, apply, and modify standard protective equipment and other custom devices.</td>
<td>N/A</td>
</tr>
<tr>
<td>4</td>
<td>Demonstrates the ability to recognize, intervene, and refer when patients exhibit sociocultural, mental, emotional, and psychological behavioral problems.</td>
<td>N/A</td>
</tr>
<tr>
<td>5</td>
<td>Demonstrates the ability to select and evaluate, and modify standard protective equipment and other custom devices.</td>
<td>N/A</td>
</tr>
<tr>
<td>6</td>
<td>Demonstrates the ability to clinically evaluate and diagnosis orthopedic injuries.</td>
<td>N/A</td>
</tr>
<tr>
<td>7</td>
<td>Demonstrates the ability to document the results of an orthopedic injury examination.</td>
<td>N/A</td>
</tr>
<tr>
<td>8</td>
<td>Demonstrates the ability to counsel patients in proper nutrition based upon, current dietary trends, body composition measurements, etc.</td>
<td>N/A</td>
</tr>
<tr>
<td>9</td>
<td>Demonstrates the ability to recognize, manage, and refer patients with disordered eating and eating disorders.</td>
<td>N/A</td>
</tr>
<tr>
<td>10</td>
<td>Demonstrates the ability to develop and implement a pre-preparation meal and an appropriate exercise and nutritional plan for an active individual.</td>
<td>N/A</td>
</tr>
<tr>
<td>11</td>
<td>Demonstrates the ability to evaluate, administer, and monitor common pharmaceutical agents used in the treatment of injuries and illnesses (e.g., epine, bronchodilators, anti-inflammatory medicine).</td>
<td>N/A</td>
</tr>
<tr>
<td>12</td>
<td>Demonstrates an understanding and applies appropriate pharmacy regulations relevant to the treatment of injuries and illnesses.</td>
<td>N/A</td>
</tr>
<tr>
<td>13</td>
<td>Demonstrates the ability to appropriately apply fitness testing and training techniques (e.g., flexibility, strength, power, agility, etc.).</td>
<td>N/A</td>
</tr>
<tr>
<td>14</td>
<td>Demonstrates the ability to plan, implement, evaluate, and modify a fitness program specific to the physical status of a patient.</td>
<td>N/A</td>
</tr>
<tr>
<td>15</td>
<td>Demonstrates the ability to properly apply a infrared and mechanical therapeutic modalities.</td>
<td>N/A</td>
</tr>
<tr>
<td>16</td>
<td>Demonstrates the ability to synthesize and document information from a patient evaluation and exam to determine the proper selection, patient set-up,</td>
<td>N/A</td>
</tr>
</tbody>
</table>
and application of therapeutic modalities in the treatment of acute and chronic injuries. Comments:

☐ 1  2  3  4  5  N/A

Demonstrates the ability to properly apply a variety of therapeutic exercises based upon sound principles and evidence-based literature. Comments:

☐ 1  2  3  4  5  N/A

Demonstrates effective lines of verbal and written communication using appropriate medical documentation and terminology. Comments:

☐ 1  2  3  4  5  N/A

Demonstrates knowledge of and enforcement of healthcare facility policies and procedures. Comments:

☐ 1  2  3  4  5  N/A

Demonstrates a commitment to and uses an evidence-based approach in the prevention, evaluation, and treatment of musculoskeletal injuries and illnesses when appropriate. Comments:

Points earned

# of questions answered

Section I Score = (Points earned) _______ ÷ (# questions answered) __________ *14 = __________

II. Personal Attributes

☐ 1  2  3  4  5  N/A

Student recognizes the need for and demonstrates a commitment to patient privacy (e.g., HIPAA). Comments:

☐ 1  2  3  4  5  N/A

Student recognizes the need for and demonstrates a commitment to a team approach to practice (e.g., values other healthcare providers, works well with others, dependable). Comments:

☐ 1  2  3  4  5  N/A

Student recognizes the need for and executes duties within the identified scope of practice for athletic training students. Comments:

☐ 1  2  3  4  5  N/A

Student recognizes the need for and demonstrates the ability to establish and maintain positive relationships (e.g. honesty, compassion, empathy, rapport) when interacting with patients, family members, administrators, and other healthcare team members. Comments:

☐ 1  2  3  4  5  NA

Student recognizes the need for and demonstrates a commitment to practicing athletic training ethically and legally within the confines of the NATA Code of Ethics, BOC Standards of Practice, national, state, and institutional policies. Comments:

☐ 1  2  3  4  5  NA

Student displays professionalism in all areas of clinical practice, including but not limited to verbal and written communication with patients, physicians, patients, media, administrators, and other healthcare team members. Comments:

☐ 1  2  3  4  5  NA

Student recognizes the need for and demonstrates a commitment to working with a diverse population and in diverse work settings.
Student takes initiative to perform necessary athletic training skills/tasks without being asked. Comments:

Student demonstrates self-confidence while interacting with patients. Comments

Student is willing to accept constructive criticism. Comments:

Student is a prudent and effective decision-maker. Comments:

Student demonstrates leadership qualities which serve to enhance the mission of the institution and profession. Comments:

Section II Score = (Points earned) _______ ÷ (# questions answered) __________ *4 = __________

III. Attendance

38. Student was in attendance when they were scheduled.

Section III Score = (Points earned) _______ ÷ (# questions answered) __________ *2 = __________

IV. General Comments: Use this portion of the evaluation form to qualitatively reflect on the student's experience and professional growth. This is an overall review of the experience, designed to provide feedback to the student. Complete the questions and write any comments that appear pertinent. Review with your student and then both sign and date.

Compared to other “MATS” with similar experience these are the student’s strengths and weaknesses. 

Strengths:

Weaknesses:

Additional Comments:

___________________________________________
Preceptor Signature and Date

Student Statement:
I have discussed this evaluation with my Preceptor and I accept the content as a reflection and constructive criticism of my clinical education preparation at this current time.

____________________
Student Signature and Date

Grade (Add sections I, II, III)

Section I _____ + Section II _____ + Section III _____ = ______
Weber State University  
Master of Science in Athletic Training Program  

MSAT 6504 Final Clinical Evaluation

Name: ______________________________________ Rotation: ☐ Fall ☐ Winter ☐ Spring ☐ Summer  
Location: ____________________________________ Preceptor: ______________________________________  
Number of hours with Preceptor: ________________________________________________________

Directions: Please mark your individual perceptions concerning the clinical student identified above. Consider each item separately in deciding whether or not you generally agree or disagree or whether the student has meet minimal competency with the statement. Indicate the strength of the agreement or disagreement or ability by checking the appropriate number. You are encouraged to add any comments related to these items below. *Evaluate the student against/along with other “MATS’s” of the same clinical level.

**Evaluation Scale***

- Poor - inability to perform this action without constant intervention from Preceptor, requires constant remediation.
- Fair or Below Average - performs this action to a barely acceptable standard, usually requires intervention from Preceptor, requires remediation.
- Average - performs this action meeting minimal competency standards, requires occasional intervention from Preceptor, no remediation is required.
- Good or Above Average - performs this action meeting minimal competency standards, no Preceptor intervention is required.
- Excellent or Outstanding - performs this action that exceeds other students’ ability at this level.

N/A Not Applicable or Not Observed

I. Athletic Training Skills and Behaviors: All behaviors should be measured against and consistent with the student’s current clinical level.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Demonstrates general knowledge and understanding of the subject matter consistent with his/her clinical level including: emergency response, risk management, taping and splinting, injury assessment, pharmacology, psychology, nutrition, therapeutic modalities and rehabilitation, and general medical. Comments:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Demonstrates the ability to recognize acute injuries and illnesses. Comments:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Demonstrates the ability to manage acute injuries and illnesses. Comments:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Demonstrates knowledge of and skills in recognizing and managing risk factors associated with physical activity. Comments:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Demonstrates the ability to obtain, interpret, make decisions, and develop polices and procedures regarding environmental data to allow safe activity in a variety of environmental conditions (e.g., heat index, lightning, etc.).
Demonstrates the ability to appropriately apply common taping, wrapping and bandaging skills. Comments:

N/A

Demonstrates the ability to select, evaluate, and modify common taping, wrapping, and bracing skills. Comments:

N/A

Demonstrates the ability to select, evaluate, apply, and modify standard protective equipment and other custom devices. Comments:

N/A

Demonstrates the ability to recognize, intervene, and refer when patients exhibit sociocultural, mental, emotional, and psychological behavioral problems. Comments:

N/A

Demonstrates the ability to select and integrate appropriate motivational techniques into patients’ treatment or rehabilitation programs. Comments:

N/A

Demonstrates the ability to clinically evaluate and diagnosis orthopedic injuries. Comments:

N/A

Demonstrates the ability to document the results of an orthopedic injury examination: Comments:

N/A

Demonstrates the ability to counsel patients in proper nutrition based upon, current dietary trends, body composition measurements, etc. Comments:

N/A

Demonstrates the ability to recognize, manage, and refer patients with disordered eating and eating disorders.

N/A

Demonstrates the ability to develop and implement a pre-preparation meal and an appropriate exercise and nutritional plan for an active individual. Comments:

N/A

Demonstrates the ability to evaluate, administer, and monitor common pharmaceutical agents used in the treatment of injuries and illnesses (e.g., epipen, bronchodilators, anti-inflammatory medicine). Comments:

N/A

Demonstrates an understanding and applies appropriate pharmacy regulations relevant to the treatment of injuries and illnesses. Comments:

N/A

Demonstrates the ability to appropriately apply fitness testing and training techniques (e.g., flexibility, strength, power, agility, etc.). Comments:

N/A

Demonstrates the ability to plan, implement, evaluate, and modify a fitness program specific to the physical status of a patient. Comments:

N/A

Demonstrates the ability to properly apply a variety of therapeutic modalities. Comments:
Demonstrates the ability to synthesize and document information from a patient evaluation and exam to determine the proper selection, patient set-up, and application of therapeutic modalities in the treatment of acute and chronic injuries. Comments:

N/A

Demonstrates the ability to properly apply a variety of therapeutic exercises. Comments:

N/A

Demonstrates the ability to synthesize and document information from a patient evaluation and exam to determine the proper selection, patient set-up, and application of therapeutic exercises in the treatment of acute and chronic injuries. Comments:

N/A

Demonstrates the ability to synthesize information to recognize, detect, treat, and refer patients as needed with medical conditions and disabilities. Comments:

N/A

Demonstrates effective lines of verbal and written communication using appropriate medical documentation and terminology. Comments:

N/A

Demonstrates knowledge of and enforcement of healthcare facility policies and procedures. Comments:

N/A

Demonstrates a commitment to and uses an evidence-based approach in the prevention, evaluation, and treatment of musculoskeletal injuries and illnesses when appropriate. Comments:

N/A

Student recognizes the need for and demonstrates a commitment to patient privacy (e.g., HIPAA). Comments:

N/A

Student recognizes the need for and demonstrates a commitment to a team approach to practice (e.g., values other healthcare providers, works well with others, dependable). Comments:

N/A

Student recognizes the need for and executes duties within the identified scope of practice for athletic training students. Comments:

N/A

Student recognizes the need for and demonstrates the ability to establish and maintain positive relationships (e.g. honesty, compassion, empathy, rapport) when interacting with patients, family members, administrators, and other healthcare team members. Comments:

N/A

Student recognizes the need for and demonstrates a commitment to practicing athletic training ethically and legally within the confines of the NATA Code of Ethics.
Ethics, BOC Standards of Practice, national, state, and institutional policies.
Comments:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA Student displays professionalism in all areas of clinical practice, including but not limited to verbal and written communication with patients, physicians, patients, media, administrators, and other healthcare team members. Comments:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA Student recognizes the need for and demonstrates a commitment to working with a diverse population and in diverse work settings.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA Student takes initiative to perform necessary athletic training skills/tasks without being asked. Comments:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA Student demonstrates self-confidence while interacting with patients. Comments

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA Student is willing to accept constructive criticism. Comments:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA Student is a prudent and effective decision-maker. Comments:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA Student demonstrates leadership qualities which serve to enhance the mission of the institution and profession. Comments:

Section II Score = (Points earned) _______ ÷ (# questions answered) __________ *4 = __________

III. Attendance

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ NA 40. Student was in attendance when they were scheduled.

Section III Score = (Points earned) _______ ÷ (# questions answered) __________ *2 = __________
IV. General Comments: Use this portion of the evaluation form to qualitatively reflect on the student's experience and professional growth. This is an overall review of the experience, designed to provide feedback to the student. Complete the questions and write any comments that appear pertinent. Review with your student and then both sign and date.

Compared to other “MATS” with similar experience these are the student’s strengths and weaknesses.

**Strengths:**

**Weaknesses:**

**Additional Comments:**

___________________________________________
ACI Signature and Date

**Student Statement:**
I have discussed this evaluation with my ACI and I accept the content as a reflection and constructive criticism of my clinical education preparation at this current time.

___________________________________________
Student Signature and Date

Grade (Add sections I, II, III)

Section I _____ + Section II _____ + Section III _____ = _____
Weber State University
Master of Science in Athletic Training Program

Monthly Clinical Hour Log

<table>
<thead>
<tr>
<th>Date</th>
<th>Clinical Site</th>
<th>Sport(s)</th>
<th>In</th>
<th>Out</th>
<th>In</th>
<th>Out</th>
<th>Preceptor Signature</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Semester Total so far ____________

Monthly Total ____________

Sport 1 ____________ Hours ____________

Sport 2 ____________ Hours ____________

Sport 3 ____________ Hours ____________
# Service Hour Reporting Form

**Name:** ______________________________________  **Semester:** ☐ Fall ☐ Spring ☐ Summer  **Year** __________

**Current Clinical Level:** ☐ 6501 ☐ 6502 ☐ 6503 ☐ 6504

This form should be completed during the course of semester and returned to your clinical course instructor at the end of the semester. Include only those hours gained during the current clinical course or as delineated in the MSAT Student Handbook. The student should keep a copy of this form.

<table>
<thead>
<tr>
<th>Date</th>
<th>Experience</th>
<th>Total Hours</th>
<th>Preceptor Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX G

Change of Clinical Assignment Form
Weber State University  
Master of Science in Athletic Training Program  
Change/Addition of Clinical Assignment  

Student_____________________________   Date___________________________

Current Clinical Assignment   ________________________________________
Proposed Clinical Assignment  ________________________________________

Reason for change or addition
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

_________________________________
Student Signature/Date

_________________________________
Current Preceptor Signature/Date

_________________________________
Proposed Preceptor Signature/Date

Clinical Education Coordinator or Program Director  
Signature/Date
APPENDIX H

Confidentiality, Privacy, and Security Agreement
Weber State University's Athletic Training information systems and those at affiliate sites contain confidential information pertaining to patients/student-athletes, health care professionals, and the Athletics Department. These systems may include computer hard drives, removable media storage mediums, filing cabinets, and medical records. This information is required by law to be protected, and thus imposes many obligations. This agreement is established to inform individuals who use these resources of their responsibilities and to secure their agreement to abide by the associated policies.

**I WILL:**

- Only disclose information, verbally and in written form, to those authorized to receive it.
- Respect the privacy and rules governing the use of any information accessible through an information system or computer network and only utilize information necessary for performance of my job.
- Report any violation of confidentiality of computer usage policies.
- Respect the ownership of proprietary software.
- Respect the finite capability of the systems and limit my use so as not to interfere unreasonably with the activity of others.
- Abide by all the procedures and policies established to manage the use of the system.

_______________________________
Student Initials

**I WILL NOT:**

- Exhibit or divulge the contents of any record or report except to fulfill a work assignment.
- Attempt to access information by using a user identification code or password other than my own.
- Remove any records, reports, or copies from their storage location except in the performance of my duties.
- Release my user identification code or password to anyone or allow anyone to access or alter information under my identity.
- Use these resources to engage in illegal activities, or harass anyone.
- Allow unauthorized use of information maintained, stored or processed by WSU Athletic Training or affiliate clinical sites.
- See personal benefit of, or permit others to benefit personally by any confidential information or use of equipment available through my clinical assignment.
- Remove any documents from Athletic Training or other clinical facilities, for any reason, without prior consent from my supervisor.

_______________________________
Student Initials
I UNDERSTAND:

- That the information accessed through all medical information systems contains sensitive and confidential patient, business, financial, and employee information.
- That I may access health information on myself, but must have specific authorization to access information on anyone else.
- That I am responsible for logging out of computer information systems and will not leave unattended a display device to which I have logged on.
- That all access to medical information systems will be monitored.
- That my user identification code and password are the equivalent of my signature and that I am accountable for all entries and actions recorded under them.
- That my obligation under this agreement will continue after termination of my employment and that my privileges are subject to review, revision, and renewal.
- That violators of this agreement will be denied access to information systems (electronic or otherwise), subject to disciplinary action (including termination/removal from the program) and may be subject to penalties under state law and federal law and regulations.

_______________________________
Student Initials

I AM FULLY AWARE:

- WSU Athletic Training and affiliate clinical sites purchase or license the use of copies of computer software from a variety of outside companies.
- WSU Athletic Training and affiliate clinical sites do not own the copyright to this software or its related documentation and, unless authorized by the software developer, does not have the right to reproduce it for use on more than one computer.
- With regard to the use on local area networks or on multiple machines, students shall use the software only in accordance with the license agreement.
- Preceptors learning of any misuse of software or related documentation within the department shall notify the Clinical Education Coordinator and/or Program Director immediately.
- According to the US Copyright Law, illegal reproduction of software can be subjected to civil damages of as much as $100,000 per work copied and criminal penalties, including fines and imprisonment. Athletic Training students who knowingly make, acquire, or use unauthorized copies of computer software shall be disciplined as appropriate under the circumstances and may include termination/removal from the program. The Athletic Training Program does not condone the illegal duplication of software.

_______________________________
Student Initials

By signing, I pledge that I have read, understand, and will comply with Weber State University's MSAT Confidentiality, Privacy, and Security Agreement.

_______________________________  _____________
Student Signature       Date

____________________________________
Print Name
APPENDIX I

Student Conference Report Form
Weber State University
Master of Science in Athletic Training Program
Student Conference Report

Student_____________________________   Date___________________________

Date of Incident ____________________    Date of Conference _______________

Persons Present at Conference:____________________________________________________________

Place of Occurrence
_____________________________________________________________________________

Incident (be specific, include date, times, etc.)
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Action to be taken:
(  )1st WRITTEN   (  ) 2nd WRITTEN   (  )SUSPENSION   (  )TERMINATION

Comments:
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

I have seen the statement of the incident. I have discussed this matter with the instructor. My signature
represents this discussion.

_________________________________  _____________________________
Student Signature/Date    Preceptor Signature/Date

_________________________________  _____________________________
Coordinator of Clinical Education Signature/Date    Program Director Signature/Date
APPENDIX J

Varsity/Club Athletic Participation by Athletic Training Students
Varsity/Club Athletic Participation by Athletic Training Students

Athletic Training students who participate in varsity or club sports must review and sign this form along with the head coach of their team EVERY academic year. Students are expected to meet ALL of the requirements of the athletic training program, including clinical hour and service hour requirements, despite sport commitments.

The Athletic Training Faculty will work with the athletic training student in an attempt to find clinical education experiences which minimally conflict with the sport, but recognize that this is difficult and not always possible.

The purpose of this form is:
1. To ensure that Athletic Training Student is abiding by our policy of participating in only one sport, as stated in the current WSU Master of Science in Athletic Training Student Handbook. This is to help assure the student that he/she will obtain a minimum level of clinical proficiency necessary to be successful and marketable in the field.

2. So that the MSAT faculty can make the necessary clinical assignments both on and off-campus, allowing the student to meet the minimum course and graduation requirements.

3. So that the Athletic Training student can obtain a variety of clinical experiences in a variety of clinical settings. Students who participate in more than one sport can obtain very little to no quality clinical experiences. Even a student who participates in only one sport limits his/her exposure to certain clinical education experiences.

This is to certify that I, _____________________________, understand the policy explained above. I am declaring that I will be participating in ___________________ during the current academic year. I am responsible for meeting all of my classroom and clinical expectations.

_______________________________________  ____________________________
Student Signature      Date

This is to certify that I, _____________________________, head coach of WSU's _____________________________ team, understand the policy explained above and will support the above-named student in pursuit of their educational goals.

_______________________________________  ____________________________
Head Coach Signature     Date
APPENDIX K

Glossary of Terms
Glossary of Commonly Used Abbreviations & Words

**Ability to Intervene** - The Preceptor is within the immediate physical vicinity and interact with the ATS on a regular and consistent basis in order to provide direction and correct inappropriate actions. The same as being "physically present."

**Affiliated Clinical Setting** - Institutions, clinics, or other health settings not under the authority of WSU, but that are used by the MSAT for clinical experiences. Examples are local high schools, physical therapy clinics, physician's offices, and hospitals.

**ATS/MATS** – the Athletic Training Student who is enrolled in a CAATE-accredited professional athletic training program.

**CIE** – A certified athletic trainer who attends the Clinical Instructor Educator Seminar, obtains the credential, and then conducts a Preceptor course.

**Clinical Education Experiences** – educational opportunities within a clinical environment where clinical proficiencies are taught and evaluated by a Preceptor.

**Clinical Proficiencies** – the clinical application of a common set of cognitive and psychomotor competencies.

**Preceptor** – a certified athletic trainer, or other specialized health/medical professional, who supervises athletic training students in a field experience other than a clinical education experience.

**Educational Competencies** – the educational content required of entry-level MSATs described as educational objectives. The competencies encompass three domains: Cognitive (knowledge and intellectual skills), Psychomotor (manipulative and motor skills), and Affective (attitudes and values). These domains are applied clinically through the clinical proficiencies.

**This handbook is a modified version of the University of Charleston's (WV) Athletic Training Student Handbook. Permission was granted by the ATEP PD as of July 2006.**
Weber State University
Master of Science in Athletic Training Program
Student Handbook
Student Agreement

I purchased a copy of the 2014-2015 WSU Graduate Athletic Training Program Student Handbook. The entire contents of this handbook discussing the policies and procedures of the Master of Science in Athletic Training Program have been read and understood. These include:

- Master of Science in Athletic Training Degree Requirements
- MSAT Curriculum
- MSAT Clinical Education Experience
- MSAT Policies & Procedures
- HIPAA, Confidentiality, Privacy, and Security Policies
- Evaluations
- General Information & Documents
- Communicable Disease Policy

I intend to comply fully with the policies and procedures stated above and in the Graduate Athletic Training Student Handbook as prescribed by the MSAT Program, the Department of Health Promotion and Human Performance, and Weber State University. Failure to follow the above rules, regulations, and guidelines can result in disciplinary measures, and/or not completing the degree in the desired time frame. I also understand my rights and responsibilities of a graduate student in Weber State University Master of Science in Athletic Training courses and/or clinical education experiences.

__________________________________________________
Student’s Full Name (Printed)

__________________________________________________
Student Signature

_______________________________________
Date