

MS-Athletic Training Student Handbook



University of Wisconsin

Stevens Point

STEVENS POINT • MARSHFIELD • WAUSAU

Athletic Training Education Program

University of Wisconsin-Stevens Point

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During your education in the MS-AT program, we will provide you with a unique and comprehensive education in athletic training. The faculty and clinical preceptors are committed to educational approaches that encompass didactic and clinical education experiences to prepare you as an athletic training professional. During this time, you will have the opportunity to learn, develop, and master foundational knowledge and skills, as defined by the Commission on Accreditation of Athletic Training Education (CAATE) competencies.

This handbook is intended to serve as a guide to your academic plan and requirements for successful completion of the MS-AT program.

Athletic Training Program Mission Statement

The Athletic Training program at UW-Stevens Point is committed to serving students seeking national certification in athletic training. The AT program will strive to incorporate effective teaching strategies, hands-on learning, the latest technologies, and mentorship to prepare students to excel as athletic training professionals. The AT program will provide a collaborative, responsible, student centered and experiential learning environment, which will produce students who are passionate and productive athletic trainers, critical thinking lifelong learners, and ambassadors for cooperative and effective health care for active individuals.

Program Goals:

- To prepare successful entry-level athletic training professionals.
- To develop students capable of critical thinking and decision-making for effective patient-centered care.
- To encourage communicate and use of information appropriately in the clinical setting with the patient and in collaboration with other health care professionals.
- To create a student-centered environment to encourage and facilitate learning in both the classroom and clinical setting.

Student Learning Outcomes: Graduates of the MS-AT program will be able to:

- Demonstrate mastery of skills and abilities necessary of a successful athletic training professional as outlined by the CAATE Professional Standards and the BOC Role Delineation Study.
- Demonstrate and apply critical thinking and decision-making skills for competent professional practice.
- Demonstrate the ability to interpret and implement evidence-based practice in athletic training and health care.
- Exhibit effective interpersonal skills, communication skills, and professional and ethical behaviors with patients, professionals, and all individuals involved in providing education and proper health care to the active individual.
- Demonstration attitudes, behaviors and practices that support life-long learning and professional engagement.

Athletic Training Program Staff Responsibilities

- Program Director: The Program Director is responsible for the day-to-day operation, coordination, supervision, and evaluation of all aspects of the athletic training educational program. These responsibilities include: (i) Administration and evaluation of the athletic training education program (ii) Coordinate and instruct courses within the athletic training education program (iii) Provide direction and continuing progression of the athletic training education program (iv) Advise athletic training and pre-athletic training majors (v) Maintain student files and documents in accordance with the CAATE Standards for Accreditation.
- Clinical Education Coordinator(s): The Clinical Education Coordinator (CEC) is responsible for the coordinating the athletic training students' clinical experience. These responsibilities include: (i) Evaluate and supervise athletic training and pre-athletic training majors (ii) Instruct courses within the athletic training major (iii) Work with the Program Director to coordinate the athletic training educational program's affiliated sites and respective clinical instructors (iv) Provide Clinical Preceptor (CP) training and communicate on a regular basis with the CPs (v) Assign athletic training students to clinical practicums and maintain records of their performance and hours (vi) Advise athletic training and pre-athletic training majors (vii) Maintain student files and documents in accordance with the CAATE Standards for Accreditation.
- Athletic Training Faculty/Academic Staff: It is the responsibility of the athletic training faculty to provide the athletic training student with the highest level of instruction possible. Faculty/academic staff will provide instruction in both the classroom and clinical setting to create confident and competent entry-level certified athletic trainers.
- Clinical Preceptors (CP): A CP is a licensed/certified athletic trainer or related health care professional who provides direct supervision and instruction to athletic training students in the clinical setting. The CP should possess a strong academic orientation, demonstrated clinical teaching skills, and a sincere interest in the professional preparation of athletic training students. All CPs for the UWSP AT Program have attended a workshop or personal training session with the Clinical Coordinator to prepare them to instruct and evaluate students on the Core Competencies outlined in the 2020 CAATE Standards. All CPs are expected to follow the State of Wisconsin Athletic Training Practice Act (or respective state practice acts), the BOC Standards of Practice, the NATA Code of Ethics, and the code of conduct for their specific allied health profession.
 - Specific responsibilities of the CP in a hands-on setting are to:
 - Provide the athletic training student (ATS) with an orientation for the clinical setting. This must include reviewing emergency action plans and blood borne pathogen protocols.
 - Provide the ATS with an appropriate schedule to fulfill the hour requirements for each clinical experience. Work with the students to ensure the schedule is not in conflict with academic requirements.
 - Provide opportunities for clinical instruction as much as possible utilizing both real life experiences, mock practical scenarios or case studies.
 - Provide ongoing evaluation of student performance through verbal feedback and written evaluation.
 - Only allow students to perform skills for which they have been evaluated clinically and found proficient to perform
 - Assist ATS with proficiency skill packets and skill evaluation during their clinical experience
 - Utilize various teaching methods to challenge the student to think critically, to develop clinical decision-making skills and to understand differences between each clinical experience

- Report any student misconduct, policy/procedure violations or gross clinical deficiencies to the clinical coordinator or program director
 - Attend a CP training session offered by the UWSP ATP at least once every three years
- Athletic Training Student (ATS): All students officially accepted into the MS-AT Program are expected to follow all policies and procedures established by the University, the College of Professional Studies, all affiliated clinical sites (on and off campus), and the Athletic Training Program. Failure to abide by these policies and procedures may result in probation and/or dismissal from the program (See section on Disciplinary Action). In addition, each student is expected to maintain academic excellence, the highest professional and ethical standards, and to take an active role in his/her athletic training education.

General Policies – Dean of Students and Academic Affairs

The ATS is part of the greater UWSP campus which has guidelines and processes to aid the student as well as expectations for student conduct. The University Handbook from the Dean of Students provides a wide range of resources for the ATS including academic dishonesty, student grievances, nondiscrimination policies, and academic procedures.

Dean of Students University Handbook: www.uwsp.edu/dos/Pages/handbook.aspx

Non-discrimination policy for the MS-AT: The MS-AT does not and shall not discriminate on the basis of age, race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, military status or any other status protected by law, in any of its activities or operations. Please visit the University Handbook at the address listed above for information about student rights and grievances if you feel you have been discriminated against by any department or individual at UWSP or associated with the MS-AT.

Academic Catalog: <https://catalog.uwsp.edu> - General admission policies, grade policies, course descriptions, and financial aid information can be found here. This link provides a searchable electronic course catalog.

UWSP MS-AT Admission and Academic Information

Admission Requirements and Application Process

Students must complete the ATCAS application process to be considered for admission to the MS-AT program. The admission/application requirements are:

1. ATCAS Application Requirements: Demographic information, educational experience, personal statement, transcripts, additional questions related to education and athletic training.
 1. Degree and GPA: Applicants must earn a baccalaureate degree (in any field) with a cumulative undergraduate GPA of 3.0 (on a 4.0 scale).
 2. Applicants must complete the necessary prerequisite courses with a prerequisite GPA of 3.0 (on a 4.0 scale). See chart below.
 3. Observation Hours: Applicants must complete 50 hours of observation of athletic training practice with a certified athletic trainer.
 4. Proof of CPR Certification within the last 2 years.

5. Letters of Recommendation: Applicants must submit two letters of recommendation. The letters should address your potential for success in graduate school, as well as your academic and clinical performance and experience.
6. Technical Standards: Signed statement of acceptance for the athletic training program's technical standards. The technical standards are to ensure all students meet the essential qualities necessary to be a successful athletic training student. Students are able to request reasonable accommodations through the Office of Disability Services. Requests for accommodation are not used prejudicially against students. This form is available on the MS-AT website in the Application information.
2. Interview: Competitive applicants will be asked to complete an interview with the Admissions Committee. This interview can either be in-person or via telecommunication.
3. UWSP Graduate School Application: Students must also complete the UWSP Graduate School Application which requires official transcripts and an application fee.
4. Transfer Students: Students who are interested in transferring from another CAATE accredited professional program will be reviewed on a case-by-case basis. Students must still complete the UWSP application process as outlined above and submit syllabi of all courses completed in their previous CAATE program. Students must realize they may be asked to repeat courses or add additional time to graduation to meet program outcomes.

Pre-requisite Courses	UWSP Course Option
Animal Biology*	BIO 160
Human Anatomy**	HS 371 or BIO 287 or BIO 387
Human Physiology**	BIO 385
Chemistry*	CHEM 105 or CHEM 101
Physics*	PHYS 203 or PHYS 101
Exercise Physiology	HPW 312
Introduction to Psychology	PSYCH 110
Introduction to Nutrition	FN 253
Kinesiology	HS 375
Statistics	HS 301 or MATH 255
Medical Terminology	HS 295

**Courses must include a laboratory component and be a minimum of 4 credits.*

***Applicants must complete a two-semester sequence of anatomy/physiology with lab. This can be a stand-alone anatomy course and a stand-alone physiology course or a two-semester combined anatomy/physiology course.*

Admission to the AT program is a competitive process. Meeting or exceeding the requirements for eligibility to apply to the program does not guarantee placement. Acceptance is based upon academic credentials, interviews, and available clinical sites. The application process is non-discriminatory and provides equal opportunity for all students to apply as long as they meet the minimum requirements for application.

Matriculation Process for the MS-AT Program

Following review of the ATCAS application and the interview, the MS-AT Admission Committee will issue a letter via email informing students of the admission decision. The letter will ask you to respond with either acceptance or declination of your admission offer. A \$100 admission deposit will be required and will be applied to your tuition payment for the summer semester. If a student chooses not to attend UWSP, the \$100 deposit is non-refundable.

Upon acceptance of admission, students must ensure their admission requirements are complete with the UWSP Admissions Office. In addition, the student must complete the following prior to starting coursework in the summer:

- Provide verification of current physical examination by an approved, licensed health care provider (MD, DO, PA, or CNP) and the following information:
 - Include verification of physical health status with a new Technical Standards Form (MS-AT will provide this form) (Appendix A)
 - Freedom from communicable diseases
 - Appropriate immunization history including: Hepatitis B, MMR (measles, mumps, rubella), varicella, and diphtheria
 - Antibody titers for Hepatitis B, MMR, and Varicella to document immunity
 - TB test (need a two-step test for your first year in the ATP if you have not had a previous test within the past 12 months)
 - If you do not have the appropriate immunization history or titers do not show immunity, you must either get the appropriate vaccinations or boosters. If you choose to not do this, you must sign a declination form, and this will limit your opportunities for clinical placements.
- Verification of student personal liability insurance prior to affiliated rotations (approximately \$20.00 – 35.00 per academic year via Lockton Affinity Health or other program recommended by the MS-AT)
- Submit to the completion of a background study as required by regulations in Wisconsin Administrative Code Chapter HFS 12.
- Each year, students will be required to update their TB test and personal liability insurance.
- All costs associated with obtaining medical records, completing a physical and titers, completing a TB test(s), obtaining liability insurance, and performing a background check are the responsibility of the student. Costs will vary for medical requirements based on insurance and location of service.

e-Value: Once admitted, the ATS will work with the Clinical Coordinator to get all student information and associated files uploaded into e-Value. This is a web-based platform utilized by the MS-AT to document student records, student clinical experiences, clinical hours, and assessment of clinical sites.

Academic Retention Standards

- Maintain a 3.0 GPA in MS-AT coursework.
- Maintain 3.0 (5.0 scale) clinical evaluation scores and practicum skill assessment.
- Failure to meet all retention criteria listed above will result in being placed on academic probation within the program and will require skill remediation on any outcome not met. If the student does not attain all of the criteria for active status during the semester on probation, the student will be ineligible to continue in the program.

- Failure to meet retention standards will also result in the inability to be eligible to sit for the Board of Certification exam until learning outcomes are met.

In addition to programmatic retention standards, the ATS must comply with the retention standards for academic honesty and integrity at UWSP. Information will also be part of course syllabi. Please visit the Dean of Students page for the UWSP Student Handbook which outlines these standards:

<https://www.uwsp.edu/dos/Pages/handbook.aspx>

Costs Associated with Program

Students are assessed full-time graduate tuition plus fees during enrollment in the MS-AT. The tuition structure is different based on the enrollment year in the program. For students accepted in Summer 2020, the traditional tuition model for graduate students is still applicable and tuition plateaus at 9 credits per semester. The approximate cost of a full-year (summer, fall, spring) tuition plus fees for WI Residents is approximately \$14,500. For more information and costs for non-residents please visit the UWSP Tuition webpage at <https://www.uwsp.edu/SFS/Pages/Tuition-Rates-and-Fees-Stevens-Point.aspx>.

For students starting in Summer 2021, a new tuition structure has been approved as a \$452.00 per credit cost plus fees. In this model, the cost is the same for all students regardless of residency. More detailed information on total cost per year is available on the MS-AT website at <https://www.uwsp.edu/health/Pages/graduate/athletictraining/tuition.aspx>.

Fees for all students include either segregated fees for campus or online distance education fees. In addition, students will have additional costs related to application, program fee and other requirements related to clinical education.

In addition to tuition, students will have the following expenses:

1. UWSP Graduate Application fees: \$56.00
2. Program fee: \$500.00 (AT 701)
A one-time fee assessed to tuition to off-set costs during time in the program. Includes CPR and First Responder Certification, uniforms, personal medical kits, and BOC test preparation.
3. Costs for physical, immunizations, titers. Varies based on insurance and health care provider. Physicals and select immunizations are provided as part of your tuition and student fees.
4. Personal student liability insurance: \$25.00 – \$35.00 (approximate yearly fee)
5. Textbooks: Human Kinetics Athletic Training Collection Subscription: \$299.99 (life-time access). Students can opt out of this and purchase the individual textbooks for use if they would like. UWSP does not offer text rental for graduate students. Please contact the Program Director for more information.
6. Annual NATA Student Membership: \$99.00 (not required but recommended)
7. Travel to off-site clinical rotations and housing at off-site clinical rotations is the responsibility of the AT student. Costs will vary based on location of clinical site. In addition, clinical sites may require additional immunizations, testing or background checks which will be the responsibility of the student.
8. Students may wish to purchase additional apparel for clinical rotations although this is not required.

Financial Aid, Scholarships and Graduate Assistantships

UWSP Financial Aid Office is a great resource for students in need of financial assistance to complete the MS-AT. More information is available at: www.uwsp.edu/finaid/Pages/default.aspx

Students in the MS-AT program are eligible to apply for UWSP scholarships for which they are eligible and allocated graduated assistantships. The number of graduate assistantships available to MS-AT students will vary by year based on allocation from the Vice Chancellor of Academic Affairs. All students are informed of the application process for the scholarships and assistantships by the MS-AT faculty. Applications are reviewed by departmental committees and recipients are informed of the awards. Please contact the Program Director or the following website for more information. (Reference: www.uwsp.edu/health/Pages/scholarships/default.aspx)

Academic Calendar

Students will be taking classes during the Summer/Fall/Spring semesters for two consecutive years. Summer courses will start in June and continue through mid-August. Fall and spring will follow the UWSP Academic Calendar. (Reference: www.uwsp.edu/regrec/Pages/calendars.aspx)

Clinical rotations associated with AT 780, 781, 783, or 784 can start prior to the start of the semester based on your clinical assignment to ensure a robust educational experience. If students are completing their immersion experience that spans over a time of a recognized University holiday or break, students will work with the Clinical Coordinator and supervising preceptor to determine appropriate scheduling.

Grade Policies

All courses in the MS-AT will utilize the same grading scale:

A: 94-100%; A-: 90-93%; B+: 87-98%; B: 83-86%; B-: 80-82%; C+: 77-79%; C: 73-76%; C-: 70-72%; D+: 65-69%; D: 60-64%; F: 59% or below

For more information, please see the individual syllabus for each MS-AT course.

Student Progress and Graduation

All students in the MS-AT can visit with faculty for academic advising or mentorship. It is the student's responsibility to ensure you meet the requirements for graduation, but mentorship is available throughout the program. To successfully graduate, students must complete all courses in the curriculum sequence (with a B or better) and the associated learning outcomes with each course. Learning outcomes and the associated clinical skills will be outlined within the course syllabi. Upon successful completion of the MS-AT curriculum and clinical requirements, students will earn a Master of Science – Athletic Training degree.

Failure to meet the learning outcomes and retention standards may result in the need to repeat a semester or a course. This would mean time to graduation would be delayed. The faculty will make every effort to work with students to ensure success in classes, but students must make a commitment to succeed as well. As soon as faculty become aware of insufficient progress, a meeting will take place

between the student and faculty to create a plan for remediation. It is not the desire of the MS-AT to delay time to graduation for any student.

Curricular Policies and Procedures for the MS-AT Program

It is the belief of the MS-AT program that an environment which displays respect and professionalism while encouraging the highest level of academic excellence will foster an educational experience consistent with professional practice in athletic training. It is also our responsibility to ensure the health and safety of students and patients. The following policies and procedures apply to learning experiences within the classroom and or/during your time in the clinical setting. The purpose and rationale for these policies and procedures is to help students develop as future professionals in a positive learning environment.

The Curriculum

The MS-AT Curriculum is a sequence of coursework to provide a comprehensive educational experience for the future athletic trainer. As graduate students, the commitment to learning and the level expectation increases from the undergraduate experience. There is an expectation for students to be engaged in the learning process and work to think critically and methodically during the MS-AT program. See Appendix A for a course sequence.

The summer semesters are the most intense in terms of the time students need to dedicate to learning. The semesters are shorter (8 weeks vs. 16 weeks) and the credit load requires rigorous work from the student. During the summer, students do not have clinical practicums with the exception of the General Medical experience within the 2nd summer (approximately 8-15 hours) which is scheduled with area practitioners. Fall clinical rotations may start earlier than fall courses due to pre-season schedules.

The 1st year in the MS-AT, all courses are face-to-face delivery and clinical practicums are local within the central WI area. The 2nd summer semester is also face-to-face delivery for all courses. During the last 2 semesters, didactic courses are all conducted via online delivery. Clinical practicum associated with AT 783 and AT 784 can be completed with preceptors in the local central WI area or with approved affiliated sites and preceptors out of the local area. This will be planned and approved with our Clinical Education Coordinators in advance of AT 783 and 784.

Expectations During Clinical Experiences

Professional Appearance and Hygiene: The athletic training student (ATS) is a highly visible figure in the UWSP athletic program and a recognized member of the health care team. The appearance of all students should reflect that of the medical community. If the ATS is questioning their appearance or if unsure what modest and professional appearance is, please ask.

As a health care provider, the ATS must adhere to safe practices to decrease the spread of microbes and stay healthy. Examples include: good hand washing practices and taking care of nails and skin, wearing the appropriate PPE, avoiding wearing jewelry that can interfere with patient care, keeping hair short or pulled back and facial hair short and clean, regular showering practices and not using soaps or products that are heavily fragranced, and proper coughing and sneezing techniques.

Lastly, professional appearance allows for the focus to be placed on student performance in the learning environment – what the student is doing and how well rather than physical appearance. While it is important to allow for personal expression, it is also important to keep in mind the importance of professionalism and appearance standards for performing certain tasks. For example, lip or tongue piercings or untrimmed facial hair could interfere with proper resuscitation skills.

Dress Code: During all clinical practicums, the ATS must follow the MS-AT dress code. The only time exceptions can be made is through verbal approval of the supervising CP at each clinical site. Clothing needs to allow the ATS to perform the duties necessary to learn the skills of an entry-level athletic trainer.

- Nametags – issued name tags identifying you as the Athletic Training Student must be worn at all times. If nametags are lost, the replacement cost will have to be paid by the ATS. (approximately \$13.00). It is mandatory to wear as it is the way an ATS is differentiated from the licensed health care professional.
- Attire – the MS-AT provides students with polos, t-shirts, pullovers, and jackets for uniforms. This is approved for wear in the clinical setting. Other attire and more specific information includes:
 - Closed toe shoes, no slip-ons/sandals
 - Khaki or chino style pants or shorts (must come to at least mid-thigh)
 - Athletic training t-shirts allowed for practices if approved by the supervising CP.
 - Outdoor practice – Please wear appropriate clothing in case of inclement weather. UWSP hats are acceptable outside. Seek approval of the supervising CP for outdoor wear.
 - Events – ATS must wear the UWSP Athletic Training Polos at events unless supervising CP approves or requests alternate attire. T-shirts and sweatshirts are not allowed at events. Jackets or pullovers with UWSP logos must be worn for events to properly identify the ATS.

Conduct

Attitude – All clinical sites should be a positive working and learning environment. Personal attitudes/grudges should be left at the door. A positive attitude will foster learning and create an optimal working environment. Maintain a professional attitude and treat others with respect and courtesy.

Standards of Professional Practice – Students will review this handbook as well as the Standards of Professional Practice for ATs from the Board of Certification to ensure expectations are clear and the environment is conducive to learning. Students deviating from the professional expectations will be subject to dismissal from clinical practicums which may result in an increased time to program completion. The BOC Standards of Professional Practice can be accessed [here](#).

In the event a student would not follow the conduct expectations of UWSP or the MS-AT, disciplinary actions may have to be followed. All offenses will be documented, and a record will be kept in the ATS file housed within our education management system. The Dean of Students office will also be notified if the event warrants their involvement. Please see Appendix B for more information.

Learning

Under the direct supervision of a CP, students will have the opportunity to learn in a unique, hands-on environment.

- Assist in the prevention, evaluation, treatment, rehabilitation, and documentation of athletic related injuries/illnesses.
- Complete competencies/skills associated with your current courses, review/practice previously learned skills, interact with other students and patients, and mentor pre-athletic training majors.
- Ask the CPs and other health care professionals to teach you something new.
- Observe and interact with team physicians during weekly clinics.

Supervision and Communication

Supervision: At all times during the clinical practicum, the ATS should be under direct supervision of the CP. The ATS should not be performing any patient care or AT skills without the supervision of the CP.

Communication and Orientation to Clinical Experiences: ATS is expected to make contact with his/her CP at the start of each clinical practicum. The contact information will be provided to the ATS by the Clinical Coordinator. During the first communication it is important to establish times to complete the following:

- Policies and procedures for each clinical site including dress code and name tags. Use of cell phones during the clinical experience should also be addressed.
- A schedule will be made for the clinical practicum. This should include a weekly schedule as well as any expectations for travel under the supervision of the CP.
- Roles and responsibilities of the ATS will be reviewed.
- Orientation forms and training should be conducted to include: Emergency action plans or critical incident plan, location of personal protective equipment and emergency supplies, venue specific documentation, patient privacy policies, BBP exposure plans, sanitation methods, and any other safety information or orientation specific to the clinical site (including but not limited to: modality use and calibration, radiation exposure from diagnostic testing)
- Learning goals for the clinical experience should be discussed between the ATS and the CP.

Effective and ongoing communication between the ATS and the CP is an integral part of the educational experience. If communication becomes difficult, the ATS should seek the advice of the Clinical Coordinator.

Medical Confidentiality: Patient/athlete confidentiality must be maintained in all medically related matters. What is seen, heard, or read from medical reports, sports medicine staff discussions or evaluations is confidential.

- The ATS should only discuss medical injuries or illnesses with the supervising CP and appropriate sports medicine staff. This should be done in the privacy of an office where conversations cannot be overheard.
- Do not discuss medical records with faculty, communication media including social media, press, scouts, or friends/relatives. Do not discuss these matters where they may be overheard.
- Medical records can only be released with the consent of the athlete. Any request for release of medical information should be directed to the CP or the Head of Athletic Training Services.

Safety: The ATS must be protected and feel safe during all clinical experiences. Prior to the start of the any clinical experience, the Clinical Coordinator will ensure that all sites have been properly vetted. This includes ensuring the supervising CPs have properly maintained equipment at the clinical site and can provide supplies and equipment necessary for your safety. This will be outlined and reviewed for students during the orientation to the clinical site and experience with the supervising CP as indicated in the Supervision and Communication information.

To ensure student safety, all students must have successfully completed the BLS and Responding to Emergencies certification in AT 701 prior to attending the first clinical experience. Blood borne pathogen training will also take place yearly via AT 701 and AT 782. The MS-AT also has policies to keep students safe in case of exposure to blood borne pathogens and communicable or infectious disease (Appendix C & D). HIPAA training will also occur in AT 700 and patient confidentiality processes for each clinical site will be reviewed with the CP.

Clinical Practicum Experiences

The Clinical Coordinator will assign you to practicum experiences during your time in the MS-AT. Clinical practicum experiences will be associated with AT 780, 781, 782, 783, and 784. The overarching goal of these experiences is to instruct and assess the Core Competencies in the CAATE 2020 Standards within the clinical environment.

Attendance

Presence at clinical rotations is a key factor in the education and success of the ATS. Therefore, absence from one's clinical setting is unacceptable. Missing the clinical rotation is just like skipping an academic course. The ATS will be expected to complete the required clinical hours with each course as agreed upon during scheduling with the CP.

If you will be absent from your clinical hours, you must contact the CP immediately. If the CP cannot be reached, the Clinical Coordinator must be contacted and be made aware of the situation. Students will be required to correspondingly lengthen their clinical experience to complete missed days in rotations. Tardiness or unexcused absence is not accepted and will be dealt with by the CP and Clinical Coordinator if it becomes habitual.

In the case of inclement weather, the ATS should contact the CP to check on potential closings or communicate about the safety of transportation to the clinical site. If the ATS does not feel it is safe to travel, they need to reschedule their clinical experience with the CP.

In the case of illness or injury, please do not complete your clinical hours if you are sick or will not be able to physically perform your clinical responsibilities. In absences occurring more than 5 days as a result of illness; the ATS will be required to have written documentation of medical clearance prior to returning to their clinical practicum. Please refer to the communicable/infectious disease policy.

Clinical Hour Policy

Within the MS-AT curriculum, 1 credit in the clinical practicum courses (AT 780, 781, 783 and 784) is equal to a minimum of 50 hours of clinical experience. The maximum amount of hours per credit is 100 hours. The ATS is required to complete the minimum number of associated with each credit to meet the clinical experience associated with the practicum courses.

The ATS clinical experience hours are:

- 1st year students: Minimum for the academic year – 300 hours; maximum of 600.
 - Fall – AT 780 (3cr) – Minimum of 150 hours; Maximum of 300 hours.
 - Spring – AT 781(3cr) – Minimum of 150 hours; Maximum of 300 hours.
- 2nd year students: AT 783 & 784 are variable credit courses (4-8 credits). A total of 12 credits are required to be completed between the 2 courses.
 - Fall - AT 783 & Spring - AT 784 (12 credits) – Minimum of 600 hours for academic year; Max of 1200.
 - The assigned credits for AT 783 & 784 will be determined together with the Clinical Coordinator, the CP, and the ATS based on how the practicums are assigned and when the clinical immersion experience is scheduled.
 - Note: AT 782 is within the clinical sequence of courses – but it is a clinical skills course, not a practicum course. The only clinical experiences completed during this summer course would be clinical simulations and possibly the general medical experiences based on availability. This general medical experience is approximately 8-15 hours in length and the hours would be totaled with AT 783 and 784 for the academic year.

All clinical hours and patient exposures during clinical hours will be recorded by the ATS in e-Value and will be approved by the supervising CP.

Assignment of Clinical Experiences

Clinical Practicum Experiences: Students will be assigned to clinical practicums during AT 780, 781, 783, and 784. During AT 780 and 781, the ATS will complete 2, 8-week clinical practicums each semester. These practicums will be with our on-campus CPs or with CPs at local high schools or clinics. In AT 783 and 784, the practicums will vary in length as they will be scheduled around your clinical immersion experience. The ATS will be involved in clinical practicums the full academic year but the culminating experience of your 2nd year in the MS-AT will be the clinical immersion due to the richness and real-time exposure it provides. AT 782 – Clinical Skills Practicum – will incorporate clinical simulations and students may be scheduled for the general medical experiences based on preceptor availability during this summer course. The hours accumulated for the general medical experience will be added to the total clinical hours for AT 783 and 784.

Students will work with the Clinical Education Coordinators early in their academic progress to talk about professional interests and create a plan for clinical practicum experiences. It is the desire of the MS-AT to match future professional interests to clinical immersions with qualified clinical preceptors as much as possible. Please realize this will not always be possible but we will work with you and have many discussions about the clinical practicum experiences.

All clinical practicums are assigned based on academic considerations and are vetted by the Clinical Coordinator to ensure a positive experience. All practicum sites must be welcoming of all students, provide a safe learning environment and not discriminate on the basis of race, gender, sex, ethnicity, or religion or the site will not be utilized. In addition, the CPs must be willing and able to provide a quality educational experience.

Clinical Immersion Experience: The Clinical Education Coordinators will work with the ATS to assign a Clinical Immersion Experience. The Clinical Immersion will be a minimum of 4 weeks and is meant to mirror a true day-in-the-life experience of an athletic trainer in the assigned setting. In other rotations, the ATS might only see a certain scheduled time of the day. This experience will be the full working day to include not only patient care, but administration and other job responsibilities of the athletic trainer.

During this immersion, all other MS-AT courses will be scheduled online to ensure there are no other academic conflicts. The ATS must also ensure there are no other personal conflicts that will interfere with the true immersion experience.

The clinical immersion will take place during either AT 783 or AT 784 (it is possible that it will be scheduled over both semesters). Learning outcomes will be assigned based on the AT 783 and 784 courses and with the assistance of the Clinical Education Coordinator and the supervising CP. With guidance from the CECs, students will register for the appropriate number of credits in AT 783 and/or 784 to ensure credits coincide with assigned time for the immersion experience.

Assessment of Clinical Practicum Experience

All clinical experiences are included within the requirements of the clinical practicum courses. To successfully complete a practicum course, the ATS must (1) complete the minimum required clinical hours associated with the course and (2) be assessed on clinical performance by the supervising CP. The Clinical Assessment of Student Performance is completed at the mid-term and end of the clinical practicum. During both times, the CP and ATS meet to discuss the evaluation and provide direction for continued growth. In addition, AT 783 and 784 will have Clinical Education Assignments which map back to CAATE Standards. The Clinical Education Assignments are evaluated by the supervising CP to ensure developing competence and mastery of knowledge and skill while working with patients. All expectations of each clinical practicum course will be explained in detail in the course syllabus and should serve as an informational reference to the ATS when enrolled in the practicum course.

An example of the mid-term and final evaluation rubrics utilized will be available within Canvas for the clinical practicum course so the ATS can see the skills and professional attributes being assessed during each clinical practicum. The Clinical Education Assignments will also be available in Canvas. The only time the mid-term and final evaluation process is shortened is during the general medical experience due to the shorten nature of the rotation. The evaluation process will be based on a mid-term and final assessment of overall performance during the experience.

The assessment scale listed below is utilized in both the Clinical Education Assignments and the Clinical Assessment of Student Performance. The expectation is for the ATS to attain a minimum of a 3.0/5.0 for all skills and attributes associated with the clinical practicum course. Assessments that are below a 3.0 will be remediated by the faculty responsible for the practicum courses with the assistance of the supervising CP. It is desirable the ATS continually increase their competence and mastery of skills during AT 783 and 784 and work to attain 5.0 on all skills to demonstrate the ability to transition to professional practice. Please refer to the course syllabi and ask any questions of the Clinical Education Coordinators about assessment for the clinical practicum.

- 5 (Excellent) – performs duties/skills extremely well, very professional
- 4(Above avg) – performs duties/skills better than average in a professional manner
- 3 (Avg) – performs duties/skills as well as expected at this level, minimum CP intervention
- 2 (Below avg) – performs duties/skills at unsatisfactory level, constant intervention from CP
- 1 (Deficient) – needs remedial aid in this area prior to advancing clinical education
- N/A (Not applicable) – CP did not observe this duty/skill, or ATS has not acquired skill yet

The ATS will also complete an evaluation of the CP and the clinical site. These evaluations will be turned in to the Clinical Coordinator and will remain anonymous. It is desired that the ATS will provide honest and constructive feedback of the CP and clinical site to aid in the MS-AT assessment process and the development and abilities of each CP.

Interprofessional Education

Throughout the program, students will experience interprofessional education opportunities to learn and work with other professionals. This will occur within clinical practicum courses as the CP and students meet with other professionals during the course of patient care. During the clinical immersion, there will be meetings with administrators from the medical setting, work site, or athletics or collaborating with other health care providers for patient care. In the curriculum, there will also be opportunities to work and learn together with different students and professionals. Examples of this include on-site trainings with the City of Stevens Point Fire and Emergency Response, a collaborative project on concussion or balance with the MS-Speech and Language or Doctor of Audiology students, clinical simulation days with physicians at the Marshfield Clinic, and opportunities to attend IPE programs at the Medical College of Wisconsin. Students are required to complete a minimum of 3 IPE experiences during the MS-AT and log the experiences with reflections in e-Value. The opportunities will be made available to students through coursework.

Helpful Resources for MS-AT Students

Student Affairs Information

The Division of Student Affairs homepage is a comprehensive guide to find the resources provided to UWSP students. From this site, you can find the websites and contact information for most resources related to student life at UWSP. Please visit: <https://www.uwsp.edu/stuaffairs/Pages/default.aspx>

The Dean of Students Office is a great resource for assistance with questions or information related to student rights and student conduct.

The UWSP Student Health Center and Counseling Services are available for assistance with illness or mental and emotional health. Please see their website for more information.

There are also links to Residential Living, the University Centers, Dining Services, and other resources you might find helpful during your time in the MS-AT.

Academic Affairs Information

Here are some helpful links for UWSP services related to your academic success.

University College: A resource for students in need of tutoring and learning, disability and assistive technologies, career counseling, or research assistance. www.uwsp.edu/UCOL

Course Catalog: <https://catalog.uwsp.edu>

Financial Aid Office: www.uwsp.edu/finaid

At any time during your experience in the MS-AT, please feel free to seek out the assistance of all the faculty and staff. We are here to help ensure you have a great experience and are not left feeling like you do not know what is expected of you or of us. We look forward to having a great educational experience together and working with you to become a successful athletic trainer.

Appendix A. Course Sequence

Course #	Course Title	Credits
SUMMER I (10 credits)		
AT 700	Foundations of Professional Practice in Athletic Training	3
AT 701	Emergency Response to Injury and Illness	3
AT 710	Evaluation and Analysis of the Lower Kinetic Chain	4

FALL I (10 credits)		
AT 711	Evaluation and Analysis of the Upper Kinetic Chain	4
AT 720	Therapeutic Interventions I	2
AT 730	Introduction to Evidence-Based Practice	1
AT 780	Clinical Education I	3

SPRING I (11 credits)		
AT 712	Evaluation and Analysis of the Spine	2
AT 721	Therapeutic Interventions II	2
AT 725	Psychosocial Aspects of Caring for the Active Population	2
AT 735	Research Design	2
AT 781	Clinical Education II	3

SUMMER II (9 credits)		
AT 722	Therapeutic Interventions III	2
AT 740	Research Seminar I	2
AT 782	Clinical Skill Practicum	2
FN 650	Sports Nutrition for Fitness and Athletic Performance	3

FALL II (5 credits of coursework. Variable credits based on clinical assignment for AT 783 - Clinical Education. Minimum of 12 cr. completed between AT 783 & 784)		
AT 741	Research Seminar II	2
AT 750	Documentation and Medical Ethics	1
AT 760	Pharmacology for Health Professionals	2
AT 783	Clinical Education III	4-8

SPRING II (5 credits of coursework - variable credits based on clinical assignment for AT 784 - Clinical Education. Minimum of 12 cr. completed between AT 783 & 784)		
AT 742	Research Seminar III	2
AT 770	Management Strategies in Athletic Training	3
AT 784	Clinical Education IV	4-8

Appendix B. Disciplinary Action

The UWSP Dean of Students has many resources about student rights as well as any conduct concerns. Please visit www.uwsp.edu/dos for more information.

The MS-AT will ask for assistance from the Dean of Students if necessary to ensure fair practices. At any time, the ATS can also ask for assistance from the Dean of Students (DOS) to ensure your rights are exercised fairly.

Professional and honest behavior expected of students in the MS-AT. Deviation from this behavior that may result in intervention (academic, conduct, personal concerns) will be reported to the Dean of Students office and become part of the student file. The DOS will assist the MS-AT with the appropriate interventions and disciplinary actions if necessary.

An individual offense related specifically to the MS-AT expectations during clinical practicums (attendance, dress code, deviation from the policies set forth by the supervising CP, etc.) will be handled with the following disciplinary actions:

- a. 1st Offense - Verbal warning and individual meeting with CP. Clinical Coordinator will be informed of the result of the meeting.
- b. 2nd Offense – 1st Written warning – 1 day suspension from clinical practicum, formal apology to CP and MS-AT faculty (if applicable), and personal written reflection.
- c. 3rd Offense – 2nd Written warning - minimum of 1 week suspension from clinical practicum, formal meeting with MS-AT faculty prior to being allowed to return to clinicals. The Dean of Students Office will be notified at this time as this is now a direct reflection of personal conduct and academic conduct related to the clinical practicum course. The DOS will assist the MS-AT with appropriate consequences or interventions.
- d. 4th Offense - Removal from the clinical practicum and possibly suspension from the MS-AT program. This offense will delay time to graduation as the course sequence will be interrupted.
- e. Accumulation of three 1st offenses or two 2nd offenses of unrelated issues requiring disciplinary actions will count as the equivalent of a 3rd offense.
- f. Disciplinary Actions are accumulative during the 3 years in the ATP.
- g. These disciplinary actions are separate from academic retention standards. In addition to maintaining good academic standing, students need to follow the policies and procedures for the ATP. Don't worry ... the Student Handbook is designed to be helpful and the policies and procedures just help with clarity and understanding 😊

Appendix C. Blood Borne Pathogen Exposure Control Plan

Blood Borne Pathogen Exposure Control Plan

The UWSP ATP will follow the UWSP Exposure Control Plan that has been developed by the Environmental Health and Safety Office (EHS). The plan can be downloaded at the EHS website at <https://www.uwsp.edu/rmgt/Pages/ehs/general/policies.aspx>

The following outline has been created to give more detail to the responsibilities of the ATS, the MS-AT faculty, and the supervising CPs in preventing and determining blood borne pathogen (BBP) exposure. This plan has been developed based on the information provided in the UWSP Exposure Control Plan and has only been changed to make it more specific to the UWSP MS-AT. Any student who is officially accepted into the MS-AT, must follow the guidelines within this plan for prevention of exposure to BBP or if reporting an exposure.

1. Purpose:
 - 1.1 To ensure the safety of the individuals who have the potential for exposure to BBP.
 - 1.2 Safety of those individual who have a potential for exposure to BBP
 - 1.3 Set a standard protocol for dealing with BBP
 - 1.4 Reduce the risk of infection
 - 1.5 Meet UWSP Environmental Health and Safety standards and OSHA standards
2. Training and Education
 - 2.1 All students officially accepted into the MS-AT will receive training and education about BBP and Universal Precautions during AT 701. In this session, the BBP exposure plan will be outlined.
 - 2.2 Each summer semester, MS-AT students will repeat the BBP training in AT 782.
 - 2.3 Documentation of each training session will be recorded via the associated course.
 - 2.4 Prior to each clinical experience, the supervising CP at the affiliated site will ensure proper orientation to include access to PPE and proper procedures to follow.
3. Responsibilities
 - 3.1 UWSP MS-AT Faculty
 - 3.1.1 Yearly training and education of BBP to the ATS
 - 3.1.2 Yearly reminders to the CPs to ensure that proper PPE is available to the student, the EAP is reviewed, and safety precautions are part of the ATS orientation process at the clinical site.
 - 3.1.3 If personal PPE is not available for the ATS at the clinical site, the MS-AT faculty will purchase and maintain supplies for the ATS. Assure proper implementation of the plan which is annually updated
 - 3.1.4 Reporting any BBP exposure to the Environmental Health and Safety Office to start the exposure plan.
 - 3.1.5 Work with the ATS and EHS Office to ensure compliance with the exposure plan.
 - 3.2 Supervising Clinical Preceptors
 - 3.2.1 Purchase and maintain supplies (biohazard, bleach, personal protective equipment, etc.)
 - 3.2.2 Recording of an exposure to BBP
 - 3.2.3 Be trained in first aid & CPR
 - 3.2.4 Provide proper patient care to reduce the risk of infection or transmission of BBP
 - 3.2.5 Know and understand all aspect of the exposure control plan
 - 3.2.6 Contact the Clinical Coordinator to report BBP exposure.
 - 3.3 Athletic Training Students

- 3.3.1 Provide documentation of Hepatitis B vaccination. If students have not received the vaccination, they are available through UWSP Student Health Center. Students are responsible for the cost of the shots.
 - 3.3.2 Complete yearly training sessions
 - 3.3.3 Report BBP exposure to the supervising CP and Clinical Coordinator
 - 3.3.4 Properly utilize PPE to reduce the risk of BBP exposure.
 - 3.3.5 Provide patient care to reduce the risk of infection or transmission of BBP
 - 3.3.6 Be trained in first aid & CPR
 - 3.3.7 Know and understand all aspects of exposure control plan
 - 3.3.8 Assure proper implementation of the exposure control plan
4. Exposure Determination and Post-Exposure Protocol:

An exposure incident occurs if you come in direct contact (skin or open wounds) with blood or other bodily fluids. A determination of exposure to blood/body fluids sheet must be completed when there is a direct exposure without personal protective equipment. Examples of tasks which may involve exposure to BBP include: care of an injured athlete during a sports activity; care of a minor wound that occur within the clinical setting, i.e. bloody nose, abrasion, laceration; care of a patient who can expire respiratory droplets; completing drug testing; completing diagnostic testing involving bodily fluids; cleaning and maintenance tasks associated with body fluid spills; and administration of CPR.

- 4.1 MS-AT Faculty and Certified Athletic Training Staff at UWSP
 - 4.1.1 According to the UWSP Exposure Plan, employees of UWSP are to report potential exposures to Environmental Health and Safety Office.
 - 4.1.2 The protocol that is followed is outlined in the Exposure Plan under Section 5.2. (5.2.1 – 5.2.4) www.uwsp.edu/rmgt/Pages/ehs/general/policies.aspx
 - 4.2 Athletic Training Students
 - 4.2.1 Students should report any potential exposure to the supervising CP and the Clinical Coordinator.
 - 4.2.2 Since athletic training students are not considered employees of UWSP, the protocol outlined for exposure to students will be followed (Section 8.0).
 - 4.2.3 MS-AT faculty will assist the ATS in filling out a UWSP Accident Report for Non-Employees (Appendix D) and WKC-8165 "Determination of Exposure to Blood/Bodily Fluids" (obtained through Safety and Health Protection Office).
 - 4.2.4 ATS will be referred to UWSP Student Health Center if determined by the EHS Protocol. Cost of post-exposure care will be endured by the student.
5. Methods of Compliance
- 5.1 Universal Precautions: All blood or other potentially infected materials will be considered infectious regardless of the perceived status of the source individual
 - 5.2 Engineering controls
 - 5.2.1 Practice controls shall be utilized when practical to eliminate or minimize exposure to potentially infectious materials
 - 5.2.2 After institution of these controls, personal protective equipment should be used
 - 5.2.3 The following controls are used to reduce or eliminate the risk of infection: a. hand washing facilities b. hand antiseptic gel c. eye wash stations d. sharps containers e. biohazard waste container f. sharps container g. autoclave procedure
 - 5.3 Personal protective equipment
 - 5.3.1 The following equipment will be used to reduce the risk of potential exposure: a. gloves b. facemasks c. CPR masks d. goggles e. gowns/aprons

5.3.2 At a minimum, ATS should be provided gloves, goggles, and facemasks at each affiliated site.

5.4 Sharps

5.4.1 The following items will be placed in the sharps biohazard container after contact with potentially infectious materials: a. callous shaver b. disposable scalpel c. glass d. razor blade e. needles

Appendix D. Communicable and Infectious Disease/Illness Policy

The information contained in this policy statement has been adapted from the Centers for Disease Control and Prevention paper “Guidelines for Infection Control in Health Care Personnel” (updated Oct. 2019).
www.cdc.gov/infectioncontrol/pdf/guidelines/infection-control-HCP-H.pdf
www.cdc.gov/hai/pdfs/infectcontrol98---copy.pdf

It is the responsibility of the MS-AT and its affiliated health care facilities to implement measures to prevent transmission of infectious disease, which sometimes warrants exclusion of students from rotation or patient contact. Decisions on attendance during clinical rotations are based on the mode of transmission and the epidemiology of the disease (Table 1). The term *exclude from rotation* should be interpreted as exclusion from the health care rotation and from health care activities outside the assigned facility. Students who are excluded should avoid contact with susceptible persons both in the facility and in the community. The educational program administrators, supervising clinical preceptors, and the MS-AT student should know which infections may warrant exclusion (Table 1). Additional information for educational program administrators and supervising clinical preceptors can be found at the Centers for Disease Control and Prevention Website.

REQUIREMENTS OF MS-AT STUDENTS FOR INFECTION CONTROL

1. Pre-placement medical evaluations: All students must complete a physical prior to the start of their education in the MS-AT.
2. Immunizations: All students must provide documentation of vaccination records including: MMR, Hepatitis B, and varicella
 - a. All students must provide an antibody titer for Hepatitis B prior to clinical rotations in the ATP
 - b. Students must obtain any additional immunizations required of the clinical placement if requested. Students can decline the placement if they do not want to have the vaccination.
3. All student must obtain annual TB tests.
4. On-going medical evaluations: It is possible to obtain routine physicals through UWSP Student Health Services if students suspect they have been exposed to various illness or disease.

GENERAL RECOMMENDATIONS FOR STUDENT RESTRICTION DUE TO INFECTIOUS ILLNESSES

1. Students are required to report personal illness or suspected illness to the supervising Clinical Preceptor (CP) immediately.
 - a. The Clinical Coordinator should be contacted by the student and will assist in the recommendations of returning to the clinical rotation.
 - b. The student will not be penalized for exclusion from rotation due to infectious illness; however, rotation requirements must be met once the student has been cleared by an appropriate medical authority.
2. Students presenting with infectious illness will be excluded from rotations until cleared by an appropriate medical authority (MD, DO, PA, or NP) and/or the educational program’s medical director.
3. Clearance for rotation after an illness that required restriction must be obtained prior to resuming the rotation or subsequent rotations.
4. The MS-AT Medical Director, Program Director, Clinical Coordinator and supervising CP have the authority to relieve students of their rotation requirements due to infectious illness.

- Students on rotation should adhere to good hygienic practices, especially handwashing and covering the nose and mouth when coughing and sneezing.

Summary of suggested work restrictions for commonly reported infectious illness or disease health care personnel exposed to or infected with infectious diseases of importance in health care settings.

Adapted from Table 3. In www.cdc.gov/hai/pdfs/infectcontrol98---copy.pdf SPECIAL ARTICLE Guideline for infection control in health care personnel, 1998

***Note: Refer to the CDC document for other conditions not listed within this table**

Disease/Illness	Restrictions	Duration
Conjunctivitis	Restrict from patient contact with the patient's environment	Until discharge ceases
Diarrheal diseases	Restrict from patient contact, contact with the patient's environment, or food handling. Restrict from care of high-risk patients.	Until symptoms resolve
Hepatitis A	Restrict from patient contact, contact with patient's environment, and food handling	Until 7 days after jaundice
Hepatitis B - Personnel with acute or chronic hepatitis B surface antigenemia who do not perform exposure prone procedures	No restriction*; refer to state regulations; standard precautions should always be observed	
Herpes simplex		
Genital	No restriction	
Hands (herpetic whitlow)	Restrict from patient contact and contact with the patient's environment	Until lesions heal
Orofacial	Evaluate for need to restrict from care of high-risk patients	
Meningococcal infections	Exclude from duty	Until 24 hours after start of effective therapy
Scabies	Restrict from patient contact	Until cleared by medical evaluation
Staphylococcus aureus infection (skin – active lesion)	Restrict from contact with patients and patient's environment or food handling	Until lesions have resolved
Streptococcal infection, group A	Restrict from patient care, contact with patient's environment, or food handling	Until 24 hours after adequate treatment started
Zoster	Cover lesions; restrict from care of high-risk patients	Until all lesions dry and crust
Viral respiratory infections, acute febrile	Consider excluding from the care of high risk patients or contact with their environment during community outbreak of RSV and influenza	Until acute symptoms resolve
COVID-19	Restrict patient contact, follow current recommendations of the CDC	Isolation for 10-14 days and until cleared by medical evaluation

STUDENTS IN PREGNANCY

MS-AT students who are or become pregnant will be required to gain the permission of their health care provider to participate in athletic training clinical duties. All illness/disease policies for students in pregnancy will be in accordance to the guidelines provided by their health care provider.

In general, pregnant health care students do not have an increased risk for acquiring infections. Female students of childbearing age are strongly encouraged to receive immunizations for vaccine-preventable diseases before pregnancy. Students may also decrease their risk of acquiring infection by adhering to appropriate infection control practices, including standard precautions when caring for all patients.