

**WEST VIRGINIA WESLEYAN
MASTER OF ATHLETIC TRAINING
PROGRAM**



HANDBOOK
of Policies & Procedures

Fall 2021

Table of Contents

| | |
|--|----|
| Overview of WVWC ATP | 3 |
| Organizational Structure | 4 |
| School of EXSC/AT Faculty and Staff | 5 |
| ATP Introduction | 6 |
| Admission Procedures | 7 |
| Criminal Background Check | 14 |
| MAT Required Courses | 15 |
| MAT Suggested Course Sequence | 18 |
| BOC Exam References | 19 |
| Confidentiality Statement | 20 |
| Communicable Disease Policy | 21 |
| Athletic Training Student Requirements & Responsibilities | 23 |
| Competencies and Proficiencies in AT | 23 |
| Professional Development | 23 |
| Confidentiality | 23 |
| Keys to AT Facility | 24 |
| Clinical Education Responsibilities | 24 |
| Daily Cleaning Responsibilities | 26 |
| Weekly Cleaning Responsibilities | 26 |
| Dress Code Policy | 27 |
| Supervised Clinical Experience | 29 |
| Travel with Teams | 29 |
| Clinical Hours – Holidays | 30 |
| Related AT Experiences | 30 |
| Sexual, Racial and Other Harassment | 30 |
| Relationships with Other Medical Professionals | 30 |
| Differences of Opinion | 31 |
| Relationships with Athletes; Other AT Students | 31 |
| ATP Clinical Experience Guidelines | 32 |
| Participation in Athletics/Co-curricular Activities/Employment | 34 |
| Retention and Probation Policy | 35 |
| Grievance Procedures | 39 |
| Policy on Safety and Equipment Use | 41 |
| Radiation Exposure | 43 |
| Bloodborne Pathogens Exposure Plan | 44 |
| Organization Addresses | 54 |

I. An Overview of the West Virginia Wesleyan College Athletic Training Program

A. Vision Statement

The Athletic Training Program of West Virginia Wesleyan College aspires to be a state and regional leader in Athletic Training Education.

B. Mission Statement

The mission of the MAT program is to prepare the athletic training student to sit for the BOC national certification examination as per CAATE and BOC guidelines and requirements through evidence based didactic and clinical education. Through incorporating analytical problem-solving abilities, graduates will develop competency and proficiency in all five practice domains of athletic training:

1. Injury/illness prevention and wellness promotion
2. Examination, assessment, and diagnosis
3. Immediate and emergency care
4. Therapeutic intervention
5. Healthcare administration and professional responsibility

C. Program Goals & Outcomes

Upon completion of the WVWC Professional MAT program, the graduate will:

1. Possess the necessary skills in cognitive, behavioral and clinical skills for successful practice as a health care practitioner.
2. Demonstrate professional communication skills as a competent health care provider to effectively communicate within all aspects of patient care.
3. Develop competent, ethical health care practitioners that practice evidence-based medicine, participate in interprofessional education and demonstrate collaborative practice with other health professions.
4. Develop students that are active in professional citizenship and promote involvement with athletic training organizations and the community through service and leadership.
5. The MAT program will prepare students to pass the BOC examination and become credentialed, certified athletic training professionals. Seventy percent or higher will pass this exam on the first attempt.

Outcomes:

1. Students will be able to apply clinical reasoning skills throughout the physical examination process, and will assimilate the acquired data in order to select the appropriate assessment tests, formulate a differential diagnosis, and determine an appropriate treatment plan or referral to other health care professionals.
2. Students will develop effective, professional health care provider written and oral communication skills.
3. Students and graduates will demonstrate proficiency within the domains of athletic training, encompassing the knowledge, skills and abilities necessary to become a credentialed health care provider.
4. The student will gain experience working with diverse populations which includes but limited to: sex, race, age, disabilities/abnormalities, and socioeconomic status.

II. Organizational Structure

A. Athletic Training Program Chain of Command

President of the College

Dean of the Faculty/VPAA

School of EXSC/AT Director

Program Director of Athletic Training

Clinical Education Coordinator -- Faculty Athletic Trainers

SCHOOL OF EXERCISE SCIENCE/ATHLETIC TRAINING FACULTY AND STAFF

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ATHLETIC TRAINING PROGRAM & CAATE

Introduction

The Athletic Training Program is currently in the process of transitioning to a master's degree. This change is a result of a decision made by the AT Strategic Alliance that consists of representatives from the BOC, CAATE, NATA and NATA Foundation. The timeline for implementation that must be adhered to states that baccalaureate programs may not admit, enroll, or matriculate students into the athletic training program after the start of the fall term 2022. Therefore, any institutions wishing to continue with an Athletic Training Program must transition to the graduate level. The college is committed to continuing offering Athletic Training as a program of study for students. Faculty and administrators have obtained the necessary approval through the Higher Learning Commission and are currently working to receive CAATE approval for this transition. The professional athletic training program will have its next comprehensive review by CAATE during the 2021-22 academic year. *CAATE, 2001 K Street NW, 3rd Floor North, Washington, DC 20006.

The Master of Athletic Training program provides students with theoretical knowledge and understanding of the profession of athletic training. The program blends classroom instruction and structured clinical experiences through a process that results in students gaining eligibility to sit for the Board of Certification (BOC) examination upon graduation from Wesleyan. Students who graduate from the program and subsequently pass the national certification exam will be qualified to be employed as athletic trainers in secondary schools, in colleges and universities, for professional athletic teams, in sports medicine clinics, or in industrial preventive medicine clinics.

The educational and pre-professional preparation of the athletic training student is based on the following description of the profession:

Athletic Trainers (ATs) are healthcare professionals who render service or treatment, under the direction of or in collaboration with a physician, in accordance with their education and training and the states' statutes, rules and regulations. As a part of the healthcare team, services provided by ATs include injury and illness prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention, and rehabilitation of injuries and medical conditions. *Athletic training is recognized by the [American Medical Association \(AMA\)](#) as a healthcare profession.

**This definition is approved by the Inter-Agency Terminology Work Group and the Athletic Trainer Strategic Alliance, January 2017.*

Admission Procedures

Interested students can find application information to graduate programs at WVWC here: https://secure.cfww.com/applications/WV_Wesleyan_College_Graduate/apply.html.

The following information must be submitted to the Admission Office of WVWC and/or the Athletic Training Program Director for program application:

- A completed online application for admission
- Current vitae/resume.
- Two (2) Graduate Recommendation Forms (At least one is required from someone familiar with the applicant's previous academic work. Also see program requirements for further specifics.)
- Request the following materials to be sent to the Graduate Admissions Office electronically or through the mail to:

West Virginia Wesleyan College
Graduate Admission Office
59 College Avenue
Buckhannon, WV 26201

- Official transcripts from all undergraduate and graduate institutions that have been attended
 - Official test scores as required by your program
 - Official report of TOEFL scores, if applicable
- MAT Application Packet including:
 1. Letter of Interest which is 1-2 pages in length addressing the following elements:
 - A. Describe and discuss the attributes that you have that would make you a valuable asset to the athletic training program at WVWC.
 - B. Why do you wish to enter the athletic training curriculum at WVWC and why do you desire to become a certified athletic trainer (ATC)?
 - C. Are you currently involved in any other extracurricular activities or do you have any other responsibilities (including employment) which may conflict with the time commitment of an athletic training student? If so, describe and explain in detail your means to balance these commitments.
 2. Two (2) letters of recommendation/evaluation forms. See [WVWC Graduate Recommendation Form](#). (It is strongly recommended that one be completed by a Certified Athletic Trainer and the second can be a professional reference.)
 3. Official bachelor's degree transcripts from an accredited college/university showing the completion of the following pre-requisites and an earned degree:
 - A. a cumulative grade point average of 2.75 or higher
 - B. official transcripts noting earned degree and completion of the following prerequisites with no grade below C (2.0) and a prerequisite CGPA of 2.75 or higher:

| | |
|--|---|
| Human Anatomy and Physiology | 8 hours with laboratory |
| Chemistry | 4 hours with laboratory, (8 hours w/ laboratory pref.) |
| Physics (light/electricity preferred) | 4 hours with laboratory |
| Biology (Principles or Microbiology preferred) | 4 hours with laboratory |
| Statistics | 3 hours |
| General Psychology | 3 hours |
| First Aid and Safety | 3 hours |
| Human Nutrition | 3 hours |
| Exercise Physiology | 3 hours |
| Kinesiology | 3 hours |

4. Professional Resume.
5. Read and sign the “*Technical Standards for Admission*” and include with uploaded application document.
6. Official report of the Graduate Record Examination (GRE), if applicable
7. Official report of the TOEFL, if applicable

NOTE: ***Applicants applying as part of the 5-year MAT program need only submit bachelor’s official transcripts showing the completion of the required pre-requisite courses and 90 earned undergraduate hours. Additionally, GRE or TOEFL score reports are not required for 5 year program applicants.*

Once the student has completed steps 1-7, those applicants satisfying the minimum standards will receive official notice from the Athletic Training Program Director and be invited for an interview. The program will extend the applicant an on-campus interview (online interviews can be conducted for out of state applicants). The formal interview process will allow candidates the opportunity to clarify any requirements, ask questions, and demonstrate your knowledge of and dedication to the academic program and the athletic training profession. The applicant will be notified of their acceptance status within 2 weeks of their interview. If the student accepts the program invitation, the applicant will be required to complete and submit all additional items listed below.

Additional items required once a student is granted acceptance into the professional MAT program.

The following additional items can be scanned into one PDF document and submitted to the Program Director.

8. Physical examination noting you have passed a physical exam and can meet the technical standards for this program. This exam must be completed within the last 12 months of your application.
9. A copy of your Hepatitis B immunization record.

10. Students must read, sign and submit the *“Hepatitis B Immunization Informed Consent/Refusal form”*.
11. Evidence of current American Heart Association or American Red Cross certification in First aid and CPR; must be either BLS Healthcare Provider or Professional Rescuer certifications.
12. Background Check (*NOTE: information on completing both these requirements and the associated costs will be sent to candidates if they have been accepted*).
13. Students admitted to the MAT must complete Universal Precautions Bloodborne Pathogen Training prior to beginning their first clinical rotation. (*NOTE: information on completing this requirement will be sent directly to the candidates if accepted*).
14. Students admitted to the MAT must provide evidence of student membership in the National Athletic Trainers’ Association and maintain this membership as they matriculate through the ATP; for details go to <http://www.nata.org/membership>
15. Completed and signed Directed Observation Experiences form. (Observation hours do not have to be completely finished to apply, but will need to be completed prior to program start).

January 15 is the priority admission deadline for full consideration; however, the program does have a rolling admissions process for applications submitted after this date.

PROFESSIONAL MASTER OF ATHLETIC TRAINING PROGRAM TECHNICAL STANDARDS FOR ADMISSION

The professional Athletic Training program at West Virginia Wesleyan College 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 professional Athletic Training Program establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program's accrediting agency: the Commission on Accreditation of Athletic Training Education (CAATE).

The following abilities and expectations must be met by all students admitted to the Athletic Training Program. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not be admitted to the program. Compliance with the program's technical standards does not guarantee a student's eligibility for the BOC certification exam.

Candidates for selection to the WVWC Athletic Training Program must demonstrate:

1. the mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgements 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. effective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

Candidates for selection to the Athletic Training Program will be required to verify they understand and meet these technical standards or they believe that, with certain accommodations, they can meet the standards. Verification is also necessary by a physician on the student's required entrance physical examination. The Office of Student Development will evaluate any students who state that they could meet the program's technical standards with accommodation to confirm that the stated condition qualifies as a disability under applicable laws.

If a student states that he or she can meet the technical standards with accommodation, then the College 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 standards of the institution, including all coursework, clinical experiences and internships deemed essential to graduation.

Program Selection Criteria and Process

Candidates must meet ALL criteria to be selected to the program. The priority deadline for receiving completed application materials is January 15 of the spring semester; however, the program does have a rolling admissions process for applications submitted after this date. These materials are to be submitted to the Graduate Admission Office and/or the Athletic Training Program Director.

Acceptance for all candidates will be provisional until grades are released and received from the spring semester and all criteria remain met. Candidates will be notified of their official acceptance status by May 15 of each year. Intent to Enroll forms will be sent to accepted students with acceptance letters. Students will be asked to return the Intent to Enroll form with any required deposits to the Graduate Admission Office by June 15.

Transfer students may apply by completing all program admission materials and turning them in to the Program Director by July 1 prior to the beginning of the fall semester and must meet all criteria listed above.

Transfer students must also include copies of all course descriptions, course syllabi and transcripts for review by the School Director and the Program Director. Final approval for all transfer credit related to the Athletic Training Program will be at the discretion of Athletic Training Faculty. To maintain compliance with CAATE standards and educational competencies, transfer students should be informed that some or all transfer credits may be denied and will be required to be completed at WVWC. Transfer students will be notified of acceptance prior to the official registration day for the fall semester.

If a student is not accepted into the ATP, he/she will receive with the letter of denial, explicit explanation of any criteria that are not met and what must be met to all re-application via petition. Those students who wish to petition for reconsideration must do so by submitting a formal letter of petition with a specific plan to address any and all criteria that are lacking to the Program Director by July 15. The petition will be reconsidered by the School Director, Program Director, and ATP faculty, and the student will be notified prior to the beginning of the fall semester.

Selection Committee

The committee in charge of collecting and reviewing all written applications to the WVWC Athletic Training Program shall be made up of:

ATP Director
2 Faculty Athletic Trainers
Other WVWC Faculty as needed

Program admission interviews may involve:

ATP Director

2 Faculty Athletic Trainers

2 to 4 Staff Athletic Trainers
School of EXSC/AT Director

ATP Medical Director

Additional committee members may include:

1-2 Clinical Preceptors

1-2 Member(s) of the WVWC Community at large

Academic and Clinical Education Program

Once the student has been formally admitted into the program, he or she will be assigned an academic advisor within the program faculty. Students formally begin the clinical requirements following formal acceptance into the program and completion of all necessary application requirements. Students are required to complete a minimum of 4 clinical education courses, which includes 1 immersive experience: EXSC 535, 536, 670 and 675.

Following initial acceptance into the program, the student must meet the following criteria to remain in good standing within the program:

1. earn no grade below a C (2.0) in the required coursework within the program.
2. maintain a cumulative grade point average of 3.0 or above in all graduate work.
3. Students must also complete at least one course per semester to maintain enrollment within the program. If the student fails to enroll for more than one semester, a new application for admission must be approved before resuming the program. Candidates must complete the program within five years. Transfer credits older than seven years will not be applied toward the master's degree
4. demonstrate continual progress in attainment of the required clinical and educational competencies (each semester) and minimum of 4 semesters of clinical education experiences.
5. remain in good academic and judicial standing with West Virginia Wesleyan College.

Petition Procedures

Any student who has been denied acceptance into the WVWC Athletic Training Program may petition the ATP Director for admission into the Program. All petitions must include the following:

1. a detailed description of those factors which led to the student's failure to obtain admission into the program (refer to the letter received from the ATP Director detailing the reasons the student was denied admission).
2. the student's response to each of these factors indicating why he or she felt the Selection Committee did not fairly judge his or her written application and/or interview; the student may also wish to indicate progress and/or improvement made (do not include projected areas of improvement (e.g., what your official cumulative GPA is, not what you think it will be at some time in the near future).

3. the student's statement as to why he or she should be reconsidered for admission into the Program

Each student's written request should be addressed to:

Athletic Training Program Director
West Virginia Wesleyan College
59 College Ave.
Buckhannon, West Virginia 26201

All petition requests for admission for the Fall semester should be received by the Director no later than July 15. Each request will be reviewed by the Athletic Training Academic Standards and Review Committee (the ATP Director, one member of the Athletic Training Faculty, one member of the Athletic Training Staff, and the Director of the School of Exercise Science/Athletic Training). Each student will be notified in writing of the committee's decision. Any student denied by the Athletic Training Academic Standards and Review Committee may choose to further petition his or her case to the Dean of Academics. The decision of the Academic Dean is final.

WVWC's ATP supports and adheres to the College's policy of non-discriminatory process and does not discriminate on the basis of race, sex, color, national or ethnic origin, creed, religion, gender, age, or disability in the administration of its admission policies, scholarship and loan programs, educational programs, athletic programs, co-curricular activities, or other College administered programs.

Additional Fees Associated with ATP Program:

- | | |
|--|-------------|
| • Uniform and supplies requirements at official entrance to program | \$160-\$200 |
| • ATrack Subscription (Annual or Lifetime) | \$45-\$90 |
| • CPR Certification, biannually | \$20-\$35 |
| • *Transportation to/from off-site clinical and class placements, annually | \$25-\$150 |
| • Membership to the National Athletic Trainers' Association, annually | \$78-\$115 |
| • BOC preparatory exams and/or workshops, final year in program | \$155-\$225 |

*Students in the program are required to provide their own transportation to off campus clinical and class placements. Clinical education sites utilized by the program are located within a 45-mile radius of the WVWC Campus. Students may also incur additional expenses with off campus clinical sites; such expenses could include but are not limited to, housing, transportation, or board.

Interested Applicants May Contact:

Athletic Training Program Director
West Virginia Wesleyan College
59 College Avenue
Buckhannon, West Virginia 26201
Phone: (304) 473-8002

Criminal Background Check

The MAT program recognizes its role in maintaining a safe environment for students and clients. Health care agencies require employees and professional health professions students to meet local and state regulations.

To ensure that students in the MAT program uphold professional standards, integrity, and behavior expectations, all students are required to submit verification of a criminal background check for entry.

Prior convictions do not affect the applicant's eligibility to enroll in the MAT program at WVWC. However, students need to be aware that criminal history may affect clinical experience placements as well as future state licensing or professional credentialing ability as a certified athletic trainer. Failure to disclose any criminal conviction, felony, misdemeanor, or act of academic dishonesty on the application for admission to the MAT program at WVWC, at any other time during the admissions process, or during the course of the MAT program is grounds for immediate dismissal from the program.

The student is responsible for fees associated with the criminal background check evaluation.

MASTER OF ATHLETIC TRAINING DEGREE REQUIRED COURSES

| | CREDIT HOURS |
|---|---------------------|
| EXSC 505 Foundations of Patient Care | 3 |
| An integrated approach to patient care involving an introduction to epidemiology and public health through exploring the distribution of disease and risk factors that influence health outcomes of individuals and within communities. Epidemiology and public health concepts will be used to inform various aspects of quality patient care through incorporating evidence-based practice (EBP), the use health informatics systems, health care delivery systems, patient education, and cultural competence in caring for a patient and their unique health needs. | |
| EXSC 506 Advanced Emergency Care for the Athletic Trainer | 2 |
| This course is designed to prepare an athletic trainer to respond to athletic emergencies. Course content will focus on the skills necessary to provide appropriate emergency care for a variety of emergencies that may occur during an athletic practice or competition. The course will be a combination of lecture, laboratory/hands on practice, and scenario-based learning. | |
| EXSC 515 Principles of Athletic Training | 2 |
| An introduction to the basic principles of prevention, evaluation, and management of athletic injuries. Topics will include training and conditioning techniques, protective sports equipment, mechanisms and characteristics of sports trauma, pathophysiology of tissue in common injuries/illnesses/disease of a physically active population across the lifespan and tissue's physiologic response to injury. | |
| EXSC 535 Clinical Experience I | 2 |
| Under the direct supervision of a BOC certified athletic trainer or clinical preceptor, the athletic training student will complete a minimum of three five-week rotations. Emphasis will be placed on proficiency of taping and wrapping skills, emergency care skills, observations with team physician(s), and developing basic evaluation and assessment skills. Prerequisites: Formal acceptance into MAT program; Co-reqs: EXSC 506 Advanced Emergency Care for the Athletic Trainer, EXSC 515 Principles of Athletic Training, EXSC 550 Orthopedic Support and Immobilization Techniques | |
| EXSC 536 Clinical Experience II | 3 |
| Under the direct supervision of a BOC certified athletic trainer or clinical preceptor, the athletic training student will complete a full semester rotation. Emphasis will be placed on proficiency of lower extremity evaluation and general medical injury/illness evaluation. Prerequisites: Formal acceptance into MAT program; Co-reqs: EXSC 540 Evaluation and Treatment of Lower Extremity, EXSC 605 Evaluation and Treatment of General Medical Conditions | |
| EXSC 540 Evaluation and Treatment of the Lower Extremity | 3 |
| In-depth physical evaluation and treatment of injuries and pathologies of the lower extremity. Emphasis will be placed on the components of the comprehensive orthopedic clinical evaluation and diagnosis including: history, inspection, palpation, functional testing, gait evaluation, medical documentation and special evaluation techniques of the lower extremity. <i>Laboratory included.</i> | |

- EXSC 545 Evaluation and Treatment of the Upper Extremity & Spine 3
 In-depth physical evaluation and treatment of injuries and pathologies of the upper extremity and spine. Emphasis will be placed on the components of the comprehensive orthopedic clinical evaluation and diagnosis including: history, inspection, palpation, functional testing, medical documentation and special evaluation techniques of the upper extremity and spine. *Laboratory included.*
- EXSC 550 Orthopedic Support and Immobilization Techniques 2
 This course will be primarily a laboratory, hands on experience based course. Students will be instructed on various applied athletic taping, bracing, splinting and casting procedures. Skill instruction will also include the fitting and use of assistive mobility devices.
- EXSC 570 Therapeutic Interventions 3
 A study of the therapeutic interventions used by athletic trainers in the treatment and rehabilitation of athletic injuries. Students will gain hands-on experience with various modalities (e.g. electrical stimulation, ultrasound, therapeutic massage) currently used in athletic training settings. The course will also introduce general principles of pharmacology and drug therapy as a therapeutic intervention. Pharmacotherapy is presented with a pathophysiological approach and emphasis is on major drug classifications and prototype drugs.
- EXSC 605 Evaluation and Treatment of General Medical Conditions 3
 In-depth physical evaluation and treatment of injuries and pathologies of the head, common illnesses and general medical conditions. Emphasis will be placed on the components of the comprehensive clinical evaluation and diagnosis including: history, inspection, palpation, functional testing, medical documentation and special evaluation techniques. *Laboratory included.*
- EXSC 610 Cardiopulmonary Issues and the Athletic Trainer 3
 Advanced evaluation methods and issues related to the cardiopulmonary systems. Topics will include but are not limited to: evaluation of various pathologies, assessment techniques, risk assessment, and medical history. Requires a research based project with presentation. Includes didactic and lab session.
- EXSC 613 Psychosocial Aspects of Athletic Training 2
 This course serves as an exploration in the psychological aspect of working with patients in a health care setting. Topics will include patient recovery from injury/illness and various behavioral health conditions, such as, suicidal ideation, depression, anxiety disorder, psychosis, mania, eating disorders, and attention deficit disorders.
- EXSC 635 Rehabilitative Interventions 2
 This course will focus on methods and techniques in the selection and application of rehabilitation/reconditioning techniques for injuries/illnesses sustained by the competitive athlete and physically active individual. Key components will focus on the overall functional progression of rehabilitative exercise, specific rehabilitative exercises, and manual therapy techniques. Students will develop skills related to the integration of physical assessment into a comprehensive rehabilitation plan.

- EXSC 640 Research in Athletic Training 2
 This course provides a capstone experience for students in health care research. Students will use skills in evidence-based medicine to complete an approved research project. Research presentation required. *Satisfies the advanced composition requirement for the General Education curriculum.*
- EXSC 645 Healthcare Administration in Athletic Training 2
 An in-depth course in organizational and administrative components of athletic training health care administration. Topics will consist of: reimbursement for services, legal concepts associated with health care, record management, financial management, facility management, personnel management, and planning, coordinating, and supervising all administrative components of a health care organization as well as public relations. In addition, students will be exposed to management strategies, leadership styles, certification/licensure issues, policy and procedure development in various athletic training settings.
- EXSC 655 Professional Topics Seminar 2
 Exploration of current professional topics including certification requirements and preparation, licensure requirements, grantsmanship, and other topics related to the professional domains in athletic training as defined by the BOC Role Delineation Study.
- EXSC 670 Clinical Experience III 3
 Under the direct supervision of a BOC certified athletic trainer or clinical preceptor, the athletic training student will complete a full semester clinical rotation. Emphasis will be placed on proficiency of upper extremity evaluation, therapeutic interventions and rehabilitative interventions. Prerequisites: Formal acceptance into MAT program; EXSC 545 Evaluation and Treatment of Upper Extremity, EXSC 570 Therapeutic Interventions, EXSC 635 Rehabilitative Interventions; Co-req: EXSC 645 Health Care Administration of Athletic Training
- EXSC 675 Immersive Clinical Experience 6
 Under the direct supervision of a BOC certified athletic trainer or clinical preceptor, the athletic training student will complete a minimum 5-week immersive clinical experience. Emphasis will be placed on proficiency of all practice domains of athletic training. Prerequisites: Formal acceptance into MAT program and EXSC 670 Clinical Experience III
- EXSC 678 Current Topics in Athletic Training 1
 A course in new developing topics and trends athletic training. Topics will include but are not limited to: evaluation of various pathologies and emerging treatment techniques related to a variety of evolving employment settings for the athletic trainer.

MASTER OF ATHLETIC TRAINING

Suggested Plan of Study

| Summer (Extended Term) | Credit Hours |
|--------------------------------------|---------------------|
| EXSC 505 Foundations of Patient Care | 3 |

Fall

| | |
|---|---|
| EXSC 506 Advanced Emergency Care for the Athletic Trainer | 2 |
| EXSC 515 Principles of Athletic Training | 2 |
| EXSC 535 Clinical Experience I | 2 |
| EXSC 550 Orthopedic Support and Immobilization Techniques | 2 |

Spring

| | |
|---|---|
| EXSC 540 Evaluation and Treatment of the Lower Extremity | 3 |
| EXSC 570 Therapeutic Interventions | 3 |
| EXSC 605 Evaluation and Treatment of General Medical Conditions | 3 |
| EXSC 536 Clinical Experience II | 3 |

May/Summer

| | |
|--|---|
| EXSC 545 Evaluation and Treatment of the Upper Extremity & Spine | 3 |
| EXSC 613 Psychosocial Aspects of Athletic Training | 2 |
| EXSC 635 Rehabilitative Interventions | 2 |

Fall

| | |
|--|---|
| EXSC 610 Cardiopulmonary Issues and the Athletic Trainer | 3 |
| EXSC 645 Healthcare Administration in Athletic Training | 2 |
| EXSC 655 Professional Topics Seminar | 2 |
| EXSC 670 Clinical Experience III | 3 |

Spring

| | |
|---|---|
| EXSC 640 Research in Athletic Training* | 2 |
| EXSC 675 Immersive Clinical Experience | 6 |
| EXSC 678 Current Topics in Athletic Training* | 1 |

**EXSC 640 and EXSC 678 will be delivered in an online, asynchronous format to allow for simultaneous completion the students' Immersive Clinical Experience. In the event that synchronous meetings need to occur between the student and faculty, those will be scheduled around the student's immersive clinical experience.*

WVWC reserves the right to modify course offerings and sequencing.

BOC References 2021-22

BOC Exam references can be found here:

[Exam Preparation Tools](#)

[BOC Exam References](#)

Athletic Training Program

CONFIDENTIALITY STATEMENT

Patient confidentiality is of the utmost importance at no time should that confidentiality be breached. Other than with clinical preceptors and/or an overseeing physician(s), students should not discuss confidential patient/athlete information to anyone (including the media, fans, professional scouts, roommates, parents, boyfriends/girlfriends, other patients, etc.). When in doubt, the student should consult his/her clinical preceptor, and understand that this preceptor is the only person who can be authorized to release information. Likewise, all records are confidential and should never be removed from the athletic training facility/clinical site without the permission of the clinical preceptor. All students must comply with the provisions of the Health Insurance Portability and Accountability Act (HIPAA).

I understand and agree that, in the performance of my duties as a student in the West Virginia Wesleyan College athletic training program, I must hold all athlete/patient care and agency information in confidence. I understand that any violation of the confidentiality of this information may be cause for immediate termination of my student affiliation with the agency and would jeopardize my progression in the athletic training program.

Printed Name: _____

ATS Signature: _____

Date: _____

Communicable Disease Policy

It is the policy of the West Virginia Wesleyan College ATP not to discriminate against any applicant, employee, or student who has or is suspected of having a communicable disease. As long as an applicant, employee, or student is able to satisfactorily perform the essential functions of the ATP and there is no medical evidence indicating a threat to the health or safety of the individual, coworkers, students, athletes, or the public, an individual shall not be denied employment, continued active student status, or admission to the campus or classes. The ATP will consider the educational, employment, or student status of individuals with a communicable disease or suspected of a communicable disease on an individual, case-by-case, basis following procedures outlined by the College.

COMMUNICABLE DISEASES

Communicable diseases are defined as those diseases that can be transmitted from one person to another. The Community Care of WV provides Student Health Services and as an agent for the College, monitors communicable disease cases that may affect the well-being of students, faculty, and staff. In the event of a suspected or confirmed communicable disease, the Health Services staff consults with and receives guidance from Upshur County Health Department, WV Department of Health and Human Resources and the CDC (Center for Disease Control). The consulting agency is determined by the disease presented, the number of cases, and the guidelines and recommendations established by state and federal laws. Disease events are co-managed by the Student Health Services staff and the consulting agency to ensure the safety of individual and the campus community. When necessary, the WVWC Crisis Emergency Plan will be implemented to guide the response including the communications plan to inform and educate the administration, faculty, staff, students, and others of a communicable disease event. Cooperating agencies in the Buckhannon and Upshur County community will also be utilized as resources.

Individuals contracting a communicable disease should report the case to Community Care of WV on the campus of WVWC by immediately by calling 304-473-8100 or 304-517-3774. The Staff will work with Upshur County Health Department to provide preventive measures to those who were exposed: such as immunization, distribution of antibiotics or antiviral medications as necessary to prevent further spread of the disease. If quarantine of exposed individuals is needed, a building on campus will be dedicated for this purpose, and food and other needed items will be provided by the campus food service and/or the Red Cross.

Individuals who contract a communicable disease are required to obey prescribed guidelines by their attending physician and the recommendations of WVWC Student Health Services. Students may not participate in clinical rotations and field experiences during the time they are affected by the communicable disease and shall not return to clinical participation until allowed by the attending physician.

Therefore, athletic training students should not report to their clinical site if they have *active* signs or symptoms of a communicable disease. Athletic training students must immediately notify the ATP Clinical Education Coordinator and their assigned Preceptor of their status and an estimate of how long they will need to be absent from their clinical rotation. Absences of more than 2 days will require appropriate documentation from the attending physician.

Examples of communicable diseases include, but may not be limited to:

| | |
|---------------------------------|-------------------------------|
| AIDS | Pandemic flu |
| Amebiasis | Pertussis |
| Anthrax | Plague |
| Botulism | Poliomyelitis |
| Brucellosis | Psittacosis |
| Campylobacter infections | Rocky Mountain spotted fever |
| Chancroid | Rubella |
| Chlamydia trachomatis infection | Salmonellosis (typhoid fever) |
| Cholera | Shigellosis |
| Diphtheria | Streptococcus pneumonia |
| Infectious encephalitis | Syphilis |
| Escherichia coli | Tetanus |
| Giardiasis | Toxic Shock Syndrome |
| Gonorrhea | Trichinosis |
| Haemophilus influenza | Tuberculosis |
| Hand, foot and mouth syndrome | Tularemia |
| Viral and acute hepatitis | Yellow Fever |
| Hepatitis A | Pinworms |
| Hepatitis B | Ringworm |
| Hepatitis C | SARS/SARS-CoV-2/COVID-19 |
| Herpes | Scabies |
| Hantavirus | Shingles (herpes zoster) |
| HIV | Varicella |
| Legionellosis | Mumps |
| Leprosy (Hansen's disease) | |
| Lyme disease | |
| Malaria | |
| Measles | |
| Meningitis (bacterial) | |
| Meningococemia | |

ATHLETIC TRAINING STUDENT REQUIREMENTS AND RESPONSIBILITIES

The overall goal the WVWC Athletic Training Program (ATP) is to prepare graduates to apply a wide variety of specific health care skills and knowledge within each the following five domains: injury and illness prevention and wellness promotion; examination, assessment and diagnosis; immediate and emergency care; therapeutic intervention; healthcare administration and professional responsibility. To achieve this goal and the other related educational goals, a comprehensive curriculum, which combines formal classroom instruction and clinical education, has been developed.

1. Competencies and Proficiencies in Athletic Training

The CAATE has established the minimum competencies and curricular content standards for the entry-level athletic trainer and the professional athletic training program. These competencies will be instructed and assessed in academic classes and during the practicum experiences. (Copies of these competencies and curricular content standards are available in the Program Director's office for student review upon request.) Each athletic training student is responsible for practicing these competencies and proficiencies during his/her clinical experience. In order to graduate, the athletic training student must complete all required clinical proficiencies and pass all comprehensive mastery competencies.

2. Professional Development

Athletic Training is a career goal for students in the WVWC ATP. As such, all students enrolled in this program are expected to abide by the [National Athletic Trainers' Association Code of Ethics](#). In addition, all students are expected to abide by those policies described in the "[WVWC Student Handbook](#)", specifically those policies related to academic integrity and behavior.

Membership in National Athletic Trainers' Association and any one State Athletic Training Association of choice (student's home state or the West Virginia Athletic Trainers' Association) is **required** as part of the application process as well as continuation through the program. Professional membership provides student discounts (e.g., conventions, BOC) and scholarships (refer to www.nata.org). A copy of the student's membership card should be placed in the ATS file. Failure to comply with this program requirement throughout the duration of the program will result in **probationary status** within the program.

Required attendance at scheduled athletic training program meetings and scheduled in-services is considered part of the ATP students' professional development and is a requirement of all clinical practicum courses.

3. Confidentiality

Athletic training students should never discuss the health status (e.g., injuries, illnesses, and mental health) of any patient with anyone other than their clinical instructor. Any information

about a patient's medical condition and/or treatment that the student may have access to either through medical records, observation, discussions with the medical staff, or otherwise is considered confidential. All students who have been formally accepted into the Athletic Training Program will be required to read and sign a Confidentiality Statement during the first semester of their clinical experience. All related assignments (e.g., case studies, competencies completed on live/non-simulated medical conditions, etc.) should not reveal the name of the patient.

4. Keys

Designated ATP students may be temporarily issued a door key to the Athletic Training Facility by their supervising Preceptor. Being in possession of this key is considered a **privilege**. It is this student's responsibility to ensure that his/her key is used only for the purpose intended: access to the athletic training facility to pick up or return supplies for an assigned athletic event, and for general Athletic Training Facility maintenance (cleaning, etc.) procedures. An athletic training student should **never** loan this key to anyone without permission from a clinical preceptor. Failure to use an Athletic Training Facility key in a responsible manner will result in immediate loss of that key and may result in further disciplinary action. Any athletic training student who loses an assigned key will be required to reimburse the College for the replacement cost. **No Athletic Training Facility key may be duplicated.** The Athletic Training Facility should be **locked** when unoccupied.

5. Clinical Education Responsibilities

- a. Report to your athletic training clinical assignment at the time established by your clinical supervisor. Be prepared to begin your clinical duties upon arrival.
- b. All injury evaluations, treatments, and rehabilitation performed by an athletic training student **must** be done under the **direct supervision** of the student's clinical supervisor/preceptor or another member of the athletic training staff.
- c. Record all treatments properly. No exceptions. Injury reports and SOAP notes are to be completed by athletic training students only under the supervision of his/her clinical supervisor/preceptor. All daily updates and/or changes recorded by the athletic training student should be reviewed and approved by the clinical supervisor.
- d. Proper uniforms, including **name tags**, must be worn for all clinical assignments.
- e. Under no circumstances may an athletic training student dispense medication to an athlete without the direct supervision of his/her clinical preceptor.
- f. Re-stock your team medical kit daily. Clean out trash and replace supplies that are depleted. Be sure your team medical kit is organized for efficient use. Keep the exterior of the kit free from mud and dirt. All medical kits should be properly stored on the designated shelves on the taping side of the Athletic Training Facility. Your clinical preceptor should inspect your team medical kit on a regular basis.

- g. Your personal medical kit (i.e., fanny pack or sling bag) is part of the required clinical experience uniform. All personal medical kits should be worn during practice and game events. Athletic training students should consult with their clinical preceptor on suggestions for personal medical kit contents. Lost medical kit must be replaced by the student at an additional cost.
- h. Report all missing or damaged equipment and/or supplies to your preceptor.
- i. No food or drink is allowed in any area of the Athletic Training Facility/clinical site at any time.
- j. Re-stock the Athletic Training Facility shelves and taping tables daily. Wipe down and organize countertops. Refill sundry jars, cabinets, soap dispensers, and ultrasound gel dispensers as part of weekly cleaning. Make ice cups and heel and lace pads when needed. If you notice that inventory is low on a certain item, re-stock that item from the cage storage area. If additional supplies of any item cannot be located in the cage storage area, notify the Coordinator of Athletic Training Services immediately.
- k. Do laundry on a daily basis while following the instructions of both a washer and dryer equipped in the taping area of the Athletic Training Facility. When laundry is dry, fold and carefully stack near treatment table. Roll compression wraps and stack neatly in the containers provided in the taping area. As part of weekly cleaning, wash hydrocollator covers, separately from white towels.
- l. Enter injury reports and other related medical documents into the electronic medical record database (i.e., SportsWare™). Re-file medical documents in athletes' medical folders after entering information in the designated database. Neither injury reports nor SOAP notes may leave the Athletic Training Facility under any circumstances.
- m. Ask permission to enter the brace cabinet for supplies. Be sure to sign-out equipment which is loaned. When a student-athlete returns a piece of loaned equipment, be sure to return the item to the proper place in the brace cabinet and mark the item as returned on the clip board. Ensure the loaned item is cleaned or sanitized.
- n. Check the water depth of the hydrocollator, and refill when necessary. Inspect hydrocollator packs for leaks or damage. Remove damaged packs immediately and replace them with a new pack that is located in the storage closet in the Athletic Training Facility.
- o. Add air to Swiss balls as necessary. The foot pump is located in the cabinet drawer near the hydrocollator.
- p. No ankle taping may be done without the permission of the student's clinical supervisor. Whenever possible, encourage athletes to take advantage of ankle braces.
- q. **Clean up your own mess!** This may include re-sweeping, re-vacuuming and/or re-cleaning treatment tables, etc. Do not leave trash on the playing fields, in the gymnasium, nor on the golf carts.
- r. Rain jackets are available for short-term (practice or game). To borrow a rain jacket, ask your clinical supervisor for permission. Return the loaned jacket as

soon as possible. Make sure it is clean and dry before re-hanging it the appropriate storage area.

- s. Faculty/Staff offices are not for lounging. Limit your time in a faculty/staff member's office to the following: discussion of injury and rehabilitation status, daily practice or game planning, review of SOAP notes or injury reports with your clinical preceptor, academic and/or career advising, or personal counseling. All other time spent in the Athletic Training Facility should be strictly for clinical education purposes.

6. Daily Cleaning Responsibilities: all clinical sites are healthcare facilities and appropriate sanitation, disinfection, cleanliness should be regularly performed as well as a shared responsibility by all providers and students.

- a. Wipe down countertops, taping tables, treatment tables, examination table, and cabinet shelves with Sanizide or alcohol
- b. Drop whirlpools and wipe down, inside and outside, with Sanizide
- c. Clean outside of ice machine with stainless cleaner or Sanizide
- d. Sweep floor of taping side; vacuum treatment/rehabilitation side
- e. Wipe down shelves
- f. Wipe down coolers and ice chests with alcohol; dry completely; store open
- g. Wash out water bottles; wipe down lids with alcohol; store open to dry
- h. Wipe down modalities, exercise machines, and carts with Sanizide; clean and straighten area around and under carts
- i. Clean out golf carts, van, and carts after use; remove dirt, debris, and turf styrene butadiene rubber ("crumb rubber")
- j. Wipe down sink area

7. Weekly Cleaning Responsibilities

- a. Mop wet room and taping area after sweeping
- b. Wash pillowcases and hydrocollator covers
- c. Drain and clean the inside of the hydrocollators with stainless cleaner, followed by refilling them with hot water
- d. Wipe down cubby area; clean exercise equipment (i.e., ankle weights, swiss balls, Total Gym, etc.) with Sanizide
- e. Wipe down shelves underneath treatment and taping tables
- f. Clean closet area – sweep, straighten, etc
- g. Sweep and organize the cage area
- h. Restock any medical supplies from the cage area to the Athletic Training Facility
- i. Disinfect whirlpool motors
- j. Refill ultrasound gel bottles and hand soap dispensers
- k. Bleach water bottle lids; Wash mesh bags that water bottle lids are stored in
- l. Charge radios

8. Dress Code Policy

WVWC Athletic Training strives to maintain a professional environment in all its clinical locations. Appearance and dress of all athletic training students and staff is a critical element in creating and maintaining a professional atmosphere that supports the rendering of high quality service in all aspects of operations. The following are intended to assist athletic training students and staff in determining appropriate appearance and attire for the clinical environment. ***Note**Some athletic training clinical sites may have their own dress code policies that must be adhered to. Please refer to those for specifics or inquire with the CEC prior to reporting to that site.*

General Policies – practice and game coverage:

- WVWC Athletic Training issue t-shirt (no modifications); must be wrinkle and stain free. (Modifications include cutting, ripping, etc. and apply to all clothing worn in the clinical setting.)
- Collared (polo/golf style) shirts are consistent with school colors (black, orange, white, and grey).
- Color cohesiveness must be maintained.
- All shirts must be tucked in at all times. If the shirt comes un-tucked during normal clinical conditions, the student should re-tuck the shirt at the first available opportunity.
- Any non-khaki shorts or pants MUST be worn with a collared shirt (see above description for acceptable colors).
- Any non-khaki style pants or shorts may only be black, orange, or navy and must not represent any institution other than WVWC.
- A belt is recommended to be worn with any pants or shorts that have belt loops.
- All shorts and pants must be in good condition, wrinkle and stain free, and must be worn between hip and waist level. Shorts must have a minimum 4-6" inseam for females and between 6-8" inseam for males.
- No jeans, baggy pants, cut offs, sweatpants, tear-away pants, yoga pants, leggings, jeggings or stretch type pants/jeans, or fleece pants are allowed in all clinical locations.
- Footwear: sneakers or low-heeled shoes; boots may be worn outdoors.
- No high heeled shoes (must be less than one inch); no stiletto heels are allowed.
- No clogs (including Crocs) or sandals or open-toed shoes are allowed.
- Sunglasses and hats may be worn OUTDOORS only. Any hat worn must be WVWC logo only or plain (no other logo except for manufacturer).
- Bandanas/scarves are not permitted.
- Hair is to be clean, well groomed, and neat in appearance. Hair must not interfere with clinical duties. Individuals with a beard, mustache, or sideburns must keep facial hair clean and well-trimmed at all times.
- Any jewelry worn must not interfere with normal clinical activities.
- Visible non-traditional piercing(s) are not allowed (tongue, eyebrow, lip, nose, and navel). Spacers 12-14mm or smaller are acceptable.

- Undergarments should be consistent with the color of clothing being worn, in good taste, and not visible.
- Clinical staff should use cosmetics moderately. Strong perfumes are to be avoided as some patients may be particularly sensitive to fragrances.
- Fingernails are to be kept clean and appropriate in length in order to not interfere with job duties.
- The Athletic Training Service Department may designate variations from this policy on an occasional basis. These may include Casual Friday, Jean Days, etc. Additional details will be provided for these events.
- Program issued **name tag**

Game Coverage

- Outdoor events
 - o WVWC AT issued game shirt (no modifications); must be wrinkle and stain free; must be tucked in
 - o Black or khaki shorts or pants, must be worn between hip and waist level
- Indoor events
 - o WVWC AT issued game shirt and slacks or skirt; or professional dress (see below); must be wrinkle and stain free
 - o Appropriate shoes for indoor courts (no boots or high-heeled shoes – must be less than one 1 inch, no stiletto style)
 - o Undergarments should be consistent with the color of clothing being worn, in good taste, and not visible.
 - o Clinical staff should use cosmetics moderately. Strong perfumes are to be avoided as some patients may be particularly sensitive to fragrances. Fingernails are to be kept clean and appropriate in length in order to not interfere with job duties.

Professional Dress

Professional dress should at minimum mimic the dress of the coach of the assignment or following the off campus clinical site dress code policy. A minimum of khaki-style pants and game shirt is required. Athletic training students and staff should strive for the highest level of professional dress.

Men

- Neatly pressed slacks (waist level) and shirt and tie. Sweaters may be worn.
- Appropriate footwear. No boots, sneakers, or shoes in poor repair.
- All other general practice guidelines apply.

Women

- Neatly pressed dress, skirt or pants; skirts and dresses must be longer than knee length.
- Shirt or sweater

- Appropriate footwear. No boots, sneakers, high-heeled shoes, or shoes in poor repair. Heels must be less than one inch and not be stiletto style.
- All other general practice guidelines apply.

Inclement Weather (cold, rain, and/or snow)

- If at all possible, outer most layer should have WVWC Athletic Training logo.
- Wind pants and “track pants” may be worn for outdoor practices/games in inclement weather conditions. If so, a collared shirt must be worn.
- Long sleeves worn under another shirt may be black or white and should match the shirt on the outside.
- Rain jackets are available for short term use. They may be signed out for a practice/game and returned after the event. They must be cleaned before being returned.
- Appropriate judgment should be used when selecting attire for wear in inclement weather situations to avoid ruining “good” clothes.
- Severe cold or rain may require alterations or suspensions of this policy. This will apply when the student or staff member leaves the Athletic Training Facility for the outdoor event. While in the Athletic Training Facility, general practice or game coverage policies apply.

9. Supervised Clinical Experience

During a supervised clinical experience, the student’s clinical preceptor is **physically** present (has both direct auditory and visual contact with the student) and can intervene on behalf of the athlete or patient. During a supervised clinical experience, the student may perform clinical skills previously mastered (via competency manual check-offs). If a student has not yet shown mastery on a clinical skill, the Preceptor is present and may assist the student in proper performance of the skill. Supervised clinical hours should be recorded in ATrack. In the event that a Preceptor must leave a practice for an emergency, etc, the ATS is to accompany the Preceptor and remain supervised AT ALL TIMES. Additional information can be found under ATP Clinical Experience Guidelines.

10. Travel with Teams

Athletic training students traveling with a preceptor are expected to act at all times in a professional manner and perform only those duties as described above under supervised clinical experience. AT students are not permitted to travel independently or without the direct supervision of a preceptor. The appropriate dress for travel should be consistent with dress requirements for a home game event. **Do not be late.** Be early and have your supplies neatly packed and ready.

You are **not automatically excused** from a class to travel with a team. Be sure to notify your professor/instructor of a travel conflict well in advance of that day. You are responsible for all

work you miss. Be aware that a professor/instructor may reserve the right to not excuse you from class. If this happens, communicate this to your clinical supervisor as soon as possible.

AT students **may not serve as drivers** for away trips. Your role is strictly limited to that of an athletic training student. If you are asked to drive, please politely decline and then inform your clinical supervisor of this. Be friendly, courteous, and **professional** at all times when traveling with a team. Remember, you represent not only WVWC, but serve as an ambassador from our athletic training department.

11. Clinical Hours – Holidays

Students enrolled in clinical education courses are not required to be on-campus over the **Thanksgiving, Christmas, Spring Break, and Easter holidays**. Should a student CHOOSE to complete supervised clinical hours over any of these holiday breaks, he or she will need the approval of his/her clinical preceptor (as well as approval from the AT PD, CEC, and the Director of Housing on campus). Meals in the cafeteria may not be available during holiday breaks. Students are expected to remain on campus for assigned clinical hours over all other scheduled breaks (Labor Day, fall break, etc.).

12. Related Athletic Training Experiences

All ATP students are strongly encouraged to attend workshops, national, district, and state meetings, clinics, and seminars whenever possible.

13. Sexual, Racial and Other Harassment

Sexual harassment of any WVWC student, student-athlete, athletic training staff, or any other member of the WVWC community will not be tolerated and will be dealt with as a severe breach of professional behavior. Sexual harassment includes unwelcome sexual advances, requests for sexual favors, sexually motivated physical contact or any other verbal, written, or physical conduct of a sexual nature, when:

- (a) submission to that conduct is explicitly or implicitly made a term or condition for any individual's obtaining employment, services, or education;
- (b) submission to or rejection of any unwelcome overtures is a factor in decisions affecting any individual's employment, services, or education;
- (c) that conduct has the purpose or effect of creating an intimidating or hostile environment for any individual's employment, services, or education.

14. Relationships with Other Medical Professionals

Students are expected to act in a professional manner when interacting with physicians and other medical professionals. The scheduled observation times with physicians are considered

very important to the clinical education of the ATP students. Students are encouraged to arrive prepared and to ask questions when appropriate.

15. Differences of Opinion

It is foreseeable that a student may have a difference in opinion with another student or clinical supervisor with regard to a patient's care. In such cases, the student should avoid expressing his/her disagreement in the presence of the patient. All differences in opinion should be discussed **privately** with the other student involved in the disagreement, or the student's clinical supervisor. Never argue in the presence of the patient. **Open expression of difference of opinion with a physician is considered a severe breach of professional behavior.** This form of unprofessional behavior serves only to undermine the patient's confidence in the athletic training student and staff, as well as the physician or health care professional involved.

All athletic training students are required to show appropriate professional respect for their fellow students, clinical instructors, supervisors, physicians, coaches, and athletes. Disrespectful behavior is unprofessional and may be grounds for removal from the athletic training program.

16. Relationships with ...

(1) Patients or athletes

- Athletic training program students should conduct themselves in a thoroughly professional manner at all times. At no time should a student engage in conduct that would undermine his/her patient's confidence or cause a conflict of interest in the patient's care. This includes social interaction with athletes/patients outside the clinical setting. Any breaches of this policy may result in termination of the student in the program.

(2) Other Athletic Training Students

- Romantic relationships with another athletic training student are strongly discouraged. In the past, breakup of some of these relationships has created a hostile atmosphere in the clinical setting. Such an atmosphere is detrimental to the learning atmosphere and service-delivery environment.
- Another area of athletic training student relationships is that of the upperclassmen to underclassmen. Upperclassmen are frequently in a position of authority or perceived authority over underclassmen. This authority relationship creates significant potential for real or perceived harassment situations. Upperclassmen are expected to fulfill the role of "mentor" for underclassmen and avoid the misuse of authority

ATP CLINICAL EXPERIENCE GUIDELINES

The purpose of these guidelines is to clarify the level(s) of supervision an athletic training program student will experience throughout his or her clinical experiences.

Supervised clinical experience: During a supervised clinical experience, the athletic training student's clinical supervisor/instructor/preceptor is **physically** present (has direct auditory and visual contact with the student) and can intervene on behalf of the athlete/patient. During a supervised clinical experience, the AT student may perform clinical skills previously mastered (via competency manual check-offs). **When a student has not yet shown mastery on a clinical skill and the Preceptor is physically present, engaged, and actively involved in patient care, the Preceptor may assist the student in proper performance of the skill.

If a student finds themselves in a potential unsupervised clinical situation (i.e., Preceptor had to excuse themselves temporarily to use the restroom, etc. **these times should be **EXTREMELY** limited**) and an emergency occurs, the student should perform only those responsibilities defined by the role of the **first responder** or **first aider**. A **first responder** is defined as "the first medically trained person present at the scene of sudden illness or injury." Specifically, the duties of a student acting as a first responder are limited to:

- assisting with stretching exercises
- application of ice, compression and elevation to an injured part; application of a splint to an injured body part
- activation of the emergency medical system
- application of basic first aid to control bleeding/basic wound care procedures (clean and bandage a wound)
- performing emergency procedures (only those, such as CPR, the student is qualified to perform) if necessary

If an injury occurs in an unsupervised situation, the student should perform only the above duties listed above, and:

- immediately contact his/her clinical supervisor
- properly document the injury, including all care given

Additional costs associated with clinical experiences:

Students in the program are required to provide their own transportation to off campus clinical and class placements. Students may also incur additional expenses with their certain off campus clinical sites; such expenses could include but are not limited to, housing, transportation, or board.

Syllabi: Copies of the following course syllabi may be found on Blackboard in the respective courses or in the Clinical Education Coordinator’s office for ATP student reference.

- EXSC 535 Clinical Experience I**
- EXSC 536 Clinical Experience II**
- EXSC 670 Clinical Experience III**
- EXSC 675 Immersive Clinical Experience**

Clinical Experience Hour Guidelines:

Below are the minimum and maximum number of clinical hours students in each clinical class are required to complete. These guidelines are to ensure that the student is not overburdened with an excessive number of clinical education hours during a given week.

| | Minimum | Maximum |
|----------|----------------|----------------|
| EXSC 535 | 165 | 225 |
| EXSC 536 | 225 | 300 |
| EXSC 670 | 225 | 300 |
| EXSC 675 | 420 | 560 |

No professional MAT student should ever obtain 30 or more hours per week during any week of the active academic semester, and every student must receive a minimum of one day off each week from all clinical assignments. Completion of EXSC 675 Immersive Clinical Experience may be the exception to the preceding.

Clinical scheduling must take precedence over work and extracurricular activities. Furthermore, if students encounter academic difficulties, then the maximum number of clinical hours they are required to complete during a given week may be reduced if approved by the PD and CEC.

This policy also aims to ensure that all students enrolled in the professional MAT program will have ample opportunities to complete the variety of clinical experiences both on and off-campus that are required. Moreover, the student must realize that if he/she is unable to achieve this minimum number of clinical experience hours per week for their specific level in the ATP due to part-time work, involvement in extracurricular activities, etc., then the missed amount (and the associated competencies and clinical proficiencies that could have been met during this time) must be made up once these obligations have been completed, which may not be until the following semester or year.

All educational competencies, clinical proficiencies, and required clinical experiences for each specific clinical course must be successfully met before the student can enroll in the subsequent clinical course and thus continue in the professional MAT program. Furthermore, students will obtain all of their clinical experiences under the direct supervision of a Clinical Preceptor that is assigned by the Clinical Education Coordinator and Athletic Training Program Director.

Participation in athletics/co-curricular activities/employment

Once a student is admitted into the MAT program, he/she is strongly discouraged from participation in one of WVWCs Athletics or other time demanding activities that may interfere with the student completing the clinical education component of the program.

It is extremely difficult to participate in an outside time demanding activity while simultaneously attempting to complete the required courses in this master's degree program, along with the required Athletic Training competencies and clinical hours. All of these requirements are pivotal in making the student more proficient and, thus, more marketable in the Athletic Training profession. The AT student must be available for clinical experience assignment throughout the academic year.

Students enrolled in the MAT program will need to be available during times outside of the academic year for completion of assigned competencies and other clinical education requirements, including the completion of specific clinical hour requirements. Students in the MAT program cannot "take off" from completing any of the clinical requirements for other activities. Also, keep in mind that the MAT program currently offers very limited clinical courses and/or associated clinical opportunities in the Summer. (NOTE: for these reasons stated above and because of the additional time demands placed upon student-athletes by their coaches and/or other obligations students are discouraged from participating in these activities and completing the MAT program).

The MAT student is required to obtain the majority of his/her clinical experiences during scheduled, direct patient care that is supervised by a Clinical Preceptor.

In order to avoid potential conflicts, and to educate coaches/supervisors/others about the clinical education requirements of the MAT program, each student must disclose any potential conflicts to the program during the application process. The student will then be required to meet with the CEC and develop a written athletic training clinical education experience plan that will be evaluated and updated on a semester by semester basis. This plan should include any necessary requirements that will need to be completed outside of the traditional academic year. The student will be asked to sign the plan and provided a copy. The original documents/plan will be maintained by the CEC.

It is important for students to understand that the more clinical experiences one misses due to athletic or other obligations, the more he/she will have to overload at other times to "catch-up" on missed clinical experience opportunities. Being able to "overload" is not always assured because of the lack of available Clinical Preceptors and/or the lack of suitable clinical placement sites during times outside of the traditional academic year period.

Furthermore, the program wishes to maintain a balance for the student as students complete both didactic and simultaneous clinical education experiences. Thus, in completing clinical education hours, the program does not expect to see students' clinical hours exceeding an *average* of more than 20 hours/week over the course of a full semester. The exception to this per week hour average/guideline is when the student is completing the immersive clinical experience. During the immersive, clinical experience, the student should expect to exceed an average of 20 hours/week over the course of the clinical experience rotation.

Retention and Probation Policy

Athletic training students will be expected to fulfill all professional responsibilities and guidelines for operation described and outlined in this manual. Evaluation of the academic success of the individual student will be made at the end of each semester. Evaluation of the clinical performance of each student will be made at the middle and end of each semester. Probationary and dismissal policies are in the following paragraphs. Students should be familiar with these policies.

Each student accepted into the WVWC athletic training program will be evaluated on a semester basis by members of the athletic training faculty/staff. Upon acceptance into the AT program, students will be evaluated by the supervising Preceptor mid-semester and at the end of each assignment. These evaluations will be shared with you upon their completion, at which time the student will be able to discuss his or her experiences and sign the evaluation form to confirm that he/she has seen it. The forms will be kept in the athletic training student's personal file.

In addition to the written evaluation, each student will have an exit interview at the end of each semester with your assigned Preceptor. At this time, strengths and weaknesses will be discussed and specific goals will be identified for the student. It is hoped that these interviews will be constructive and allow the student to achieve constant improvements in skills and confidence. The student will sign the evaluation form at the end of the interview and the form kept in his/her file.

In order to remain in good standing, the student must meet the following criteria to remain in good standing within the program:

1. earn no grade below a C (2.0) in the required coursework within the program.
2. maintain a cumulative grade point average of 3.0 or above in all graduate work.
3. Students must also complete at least one course per semester to maintain enrollment within the program. If the student fails to enroll for more than one semester, a new application for admission must be approved before resuming the program. Candidates must complete the program within five years. Transfer credits older than seven years will not be applied toward the master's degree.
4. demonstrate continual progress in attainment of the required clinical competencies (each semester) and minimum of 4 semesters of clinical fieldwork.
5. remain in good academic and judicial standing with West Virginia Wesleyan College

Grades, Academic Standing, and Quality Points (as per WVWC Graduate Catalog)

All graduate students must maintain a quality point average of at least 3.00 to graduate and to remain in good standing. Graduate students who earn a 2.00-2.99 GPA during their first twelve semester hours will be in good standing, but will be placed on Academic Warning. Students whose GPA falls below 2.00 before earning twelve hours will be placed on Academic Probation and will be given nine additional hours in which to raise the GPA 3.00. Similarly, students whose

GPA falls below 3.00 after attempting twelve or more semester hours of course work will be on Academic Probation and will be given nine additional hours in which to raise the GPA to 3.00. Students who fail to attain the 3.00 GPA during this probationary period are subject to Dismissal from their program. The Dean of the College, in conjunction with the specific program director, may elect to place a graduate student on Academic Suspension for specific deficiencies in achieving program outcomes for either one or two semesters. A suspended graduate student will be eligible to apply for readmission after the specified time period and upon meeting the conditions stated at the time of suspension. Students who earn two Fs will be dismissed from their program. Students who are dismissed from their program may apply for re-admission after four full academic semesters.

Students who have been dismissed or suspended and who choose to re-apply will need to write a statement of justification for their re-admittance and continuation in the program. In addition, these students must complete the entire application process again, including paying the application fee, and submitting their complete application. The application and justification letter will be submitted to the appropriate program director and admission committee for consideration.

The following letter grades, explanations, and quality points are used to evaluate a graduate student's performance at Wesleyan.

| Grade | Explanation | Quality Points (per hr) | Grade | Explanation | Quality Points (per hr) |
|-------|----------------|----------------------------|-------|-----------------------|----------------------------|
| A | Excellent | 4.00 | F | Failure | 0 |
| A- | | 3.67 | I | Incomplete | 0 |
| B+ | Good | 3.33 | W | Withdrawal | 0 |
| B | | 3.00 | P | Pass | 0 |
| B- | | 2.67 | WF | Withdrawal Failing | 0 |
| C+ | Unsatisfactory | 2.33 | AU | Audit | 0 |
| C | | 2.00 | NC* | No Credit | 0 |
| C- | | 1.67 | | | |

Grades of I, W, P and AU are not included in grade point average calculation. Graduate students must repeat a course in which they receive an F or WF; graduate students may also repeat courses in which they earn a B- or lower. While the original F, C-, C, C+, or B- will remain on the transcript, when the course is repeated satisfactorily, the original grade will not be counted further in the grade point average.

Additional program deficiencies while on a probationary status: Should a student accrue additional program deficiencies while on a probationary status within the program, the student will be expelled from the ATP.

Academic Dishonesty:

Academic dishonesty may be defined as, but not limited to:

1. Giving or receiving help with intent to falsely represent one's work
2. Plagiarizing
3. Use of notes, books, or any other unauthorized source during tests of any kind, unless specific instructions are given permitting such use
4. Altering the record of any grade in any grade book or record
5. Falsely documenting clinical hours
6. Any other type of misconduct, offense, or manifestation of dishonesty or unfairness in relation to academic work (refer to WVWC Student Handbook statements on "Academic Integrity" and "Prohibited Conduct: Academic Dishonesty.")

Academic dishonesty will be dealt with according to the procedures as outlined in the "WVWC Student Handbook" (see: "Academic Integrity").

Dismissal from WVWC:

If a student is dismissed from the institution for any academic or judicial reasons, the student will also immediately be dismissed from the ATP. A student may then re-apply for admission to WVWC through the admission office if and when that is permitted through the conditions of their dismissal from the institution. If re-admitted to WVWC and the student wishes to be re-admitted into the ATP, the student will need to petition for re-admission to ATP Director. The ATP Director will specify necessary information to be included in the petition depending on the initial reason for dismissal to the student. The petition will then be evaluated by a committee of: ATP Director, Clinical Education Coordinator, School of EXSC/AT Director, ATP Faculty and former academic advisor of student. Once reviewed, the student will be notified of the committee's decision in writing.

III. Violation of Policies

All athletic training students are to expected act in a mature adult, and professional manner at all times while in all didactic and clinical education experiences related to the AT Program. Athletic Training Student requirements and responsibilities (refer to "Athletic Training Student Requirements and Responsibilities"). Each student will be expected to adhere to all classroom policies, attendance or tardiness policies, and dress code/uniform policies.

The staff and faculty of the Athletic Training Program believe that punctuality and dependability are essential in the professional world and imperative in athletic training. The establishment of a pattern of failure to be punctual and/or dependable has potentially negative impacts on the student when assigning grades, and/or asking for letters of recommendation for scholarships, internships, employment, etc.

The quality of the educational experience while actively observing and participating in rehabilitation programs, treatments, and clinical assignment hours are arranged according to the number of students at a particular given time. When one does not show up or is late, learning opportunities are lost.

The faculty and staff of the Athletic Training Program additionally view professional appearance as paramount to professional development and furthering the educational experience of the athletic training student. Athletic training students and faculty/staff will be expected to maintain compliance with the dress code at any time when providing clinical services to student-athletes or other patients. Please see the dress code for further details.

Any and all violations of any athletic training policy will be documented by program faculty. Should an athletic training student violate any policy, the violation will be referred to be resolved and dealt with at the appropriate level. For example, tardiness/absence violations and dress code violations should be resolved with the clinical preceptor and CEC or individual course faculty. Academic integrity violations will be resolved in accordance with WVWC Academic integrity policies. Should any one student violation more than one policy, the student will be required to meet with the AT Program Director, AT CEC and School Director/Academic Administrator.

GRIEVANCE PROCEDURES FOR ATHLETIC TRAINING STUDENTS

The "Grievance Procedures for AT Students" was developed by a committee whose membership includes the Athletic Training Program Director, ATP faculty, and ATP staff.

The grievance procedures detailed in this document follow an administrative hierarchy beginning with a one-to-one conference when only one staff or faculty member is involved and then progresses upward to the Department Grievance Committee (ATP Director, AT CEC, AT Faculty and/or School of EXSC/AT Director).

Students, faculty, and staff share certain responsibilities. Students can, and should, try to prevent emotions from reaching crisis proportions by initiation of the grievance process as soon as the problem is recognized. The longer the matter remains an emotional "gripe," the more difficult it is to use an objective approach. The use of one-to-one conference in the faculty or staff member's office is much less likely to trigger a defensive response than bringing the matter up in class or post-conference. Faculty and staff have a responsibility to respect student's concerns, as well as their right to be heard. If it seems that no solution is possible, students have a right to know why. Similarly, since many times correction of the problem may take time, students should be aware of the time consideration. Students should also know that a one-to-one conference does not automatically indicate the assumption of guilt or innocence.

Athletic training faculty and staff should try to assure that all experiences under their direction serve as learning experiences for the student. In this process, students will be learning (or reinforcing knowledge) about administrative channels and the value of the problem-solving process.

General Rule: All grievances must be initiated within the semester of the conflict.

1. Grievance related to academics (grading)

In cases of alleged arbitrary, inconsistent, or discriminatory grading, the procedures followed will be the same as outlined in the "WVWC Student Handbook" (see: "Student Grade Appeal Process").

2. Grievance (other than academic)

- a. Instructor/Clinical Supervisor/Preceptor involvement:
 1. Student and Preceptor meet.
 2. Then if not resolved, a grievance goes to CEC.
 3. Combine the below:

In order to minimize misunderstanding, students are encouraged to discuss potential grievances with his/her Preceptor. The initial contact should be made within 3 working days of the incident which has caused the grievance. The Preceptor will investigate the grievance,

decide if the Clinical Education Coordinator should be consulted, obtain all pertinent information, and develop a solution or response within 3 academic days. The response will be written, fully explaining the resolution, and will be placed in the student's file.

b. ATP Director

If, after the Preceptor and student have addressed the grievance, and the grievance has not been satisfactorily addressed, the student may appeal, IN WRITING to the ATP Director. Within 5 academic days, the Program Director will respond with one of three options:

1. Program Director will review and make a ruling.
2. Program Director will defer review and make ruling in conjunction with Clinical Education Coordinator.
3. Defer a ruling until a meeting with the School of Exercise Science and/or Athletic Director can be consulted. Once this meeting has taken place (within 7 academic days), the Program Director will report a ruling to the student.

Grievances not satisfactorily resolved by the above policy

If after seven working days the problem is not resolved or appropriate action has not occurred, the "Policy on Student Complaints" as per the WVWC Student Handbook will be followed.

Policy on Safety and Equipment Use

The Athletic Training Program has several therapeutic modalities intended for the educational instruction concerning modality principles and practices. Direct supervision by a faculty member/preceptor must be established at all times with any use of the therapeutic modalities at WVWC or any of the affiliated clinical sites. All therapeutic equipment in use at all clinical sites must be up-to-date with safety standards (as per manufacturer's recommendation or federal, state, or local ordinance) when athletic training students are present.

Student Use

Athletic Training Students who are officially enrolled in the Athletic Training Program and are participating in or have completed course work congruent with the proper application of therapeutic devices and are provided with a current modality treatment plan by a preceptor may apply the modality to a student-athlete or patient under direct supervision of a preceptor. No modality application may be performed on a student-athlete or patient without the direct supervision of a preceptor.

Troubleshooting

Identification of any problems concerning any therapeutic modalities must be reported to the preceptor or AT faculty as soon as possible. The preceptor/faculty will act accordingly to report the problem to the supervising individual of the facility. The item will need to be immediately removed until the device is deemed safe for usage and inspected by an appropriately trained technician. For more specific troubleshooting information, the preceptor/faculty should refer to the Operation Manual for the device.

All therapeutic equipment used for educational instruction and patient care must be calibrated annually for safety. If calibrations are needed more often than annually, modifications will be made to the schedule to make sure that it meets all safety standards. If therapeutic equipment does not pass calibrations, it will be removed from use until it can be fixed and pass safety checks. After maintenance on therapeutic equipment is performed and it is still unable to meet safety standards it will be replaced with new/refurbished equipment that passes calibrations.

Affiliated Clinical Sites

All clinical sites affiliated with the AT Program must provide annual calibration reports of therapeutic equipment (if requested) that are being used for educational instruction and

patient care. If the clinical site(s) are unable to provide the annual calibration reports, then WVWC must make sure the therapeutic equipment is calibrated and meets safety standards before any athletic training student is assigned to a preceptor at that specific affiliated clinical site. If calibrations are needed more often than annually, modifications will be made to the schedule to make sure that it meets all safety standards. If therapeutic equipment does not pass calibrations, it will be removed from use until it can be fixed and pass safety checks. After maintenance on therapeutic equipment is performed and it is still unable to meet safety standards, it will be replaced with new/refurbished equipment that passes calibrations.

Radiation Exposure

The athletic training facility at WVWC does not house equipment that would expose the athletic training student to radiation. Athletic training students should be cognizant and aware that other clinical experience sites may utilize equipment (x-ray machines, surgery under fluoroscope, etc.) that requires exposure to radiation. When a student is completing an assigned clinical experience rotation at off-campus clinical sites, the student is expected to follow all policies and procedures implemented each location.

In the event, an athletic training student is at an increased health risk due to potential radiation exposure due to pregnancy or other health conditions, the student may voluntarily communicate that to the CEC. The CEC will then work with the student and the respective clinical site on any necessary accommodations, adjustments or additional precautions that may need to be implemented.

Bloodborne Pathogens Exposure Plan

Introduction

The athletic training program is committed to providing a safe and healthy learning environment. To that end, a Bloodborne Pathogen Exposure Control Plan (ECP) has been developed to protect athletic training staff and athletic training students against potential exposure to bloodborne pathogens in accordance with federal and national accepted standards. The ECP includes:

- Background information
- Exposure determination
- Implementation of universal precautions
- Engineering and work practice controls
- Communication of hazards
- Handling emergencies involving exposure
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Training
- Record keeping

Background

Certain pathogenic microorganisms found in the blood of infected individuals can be transmitted to other individuals by blood or other body fluids. Healthcare workers whose occupational duties expose them to blood and to other potentially infectious materials are at risk of contracting any one of these blood-borne pathogens. Hepatitis B, Hepatitis C, and HIV are three of the most significant of these diseases. Blood-borne pathogens are microscopic organisms that thrive only in blood or certain other body fluids. They do not survive well outside a support system, such as the human bloodstream or a specifically engineered environment. They may be fungi (yeasts and molds), bacteria, prions and parasites, in addition to the well-publicized viruses. There are several blood-borne pathogens known today, and that number is ever-increasing. Blood-borne pathogens are spread through several routes. For example:

- Contact with mucous membranes (such as eye, nose, or mouth, or non-intact skin)
- Puncture wounds
- Organ transplants and blood transfusions
- Sexual contact
- Mother to unborn child through the placenta or breast milk
- Sharing dirty needles, acupuncture, tattoos, and body piercing

Exposure Determination

OSHA requires employers to perform an exposure determination concerning which students/employees may incur occupational exposure to blood or other potentially infectious materials (OPIM). The OSHA Bloodborne Pathogens standard applies to employees/students with occupational exposure to human blood, blood products and other potentially infectious materials. Under the standard, occupational exposure is defined as reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or OPIM that results in the performance of an employee's duties. According to the OSHA standard, blood and OPIMs include:

- Human blood, human blood components, and products made from human blood;
- The following human body fluids: semen; vaginal secretions; cerebrospinal fluid; synovial fluid; pleural fluid; pericardial fluid; peritoneal fluid; amniotic fluid; saliva in dental procedures; any body fluid that is visibly contaminated with blood; all body fluids in situations where it is difficult or impossible to differentiate between body fluids;
- Any unfixed tissue or organ (other than intact skin) from a human, living or dead; and
- Human Immunodeficiency Virus (HIV)-containing cell or tissue cultures, organ cultures, and HIV- or hepatitis B Virus (HBV)-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

The exposure determination is made without regard to frequency of exposure or the use of personal protective equipment (i.e., individuals are considered to be exposed even if they wear personal protective equipment). This exposure determination affects athletic trainers on staff and athletic training students working directly with patients on the campus of West Virginia Wesleyan College. This also covers athletic training students who are completing a required clinical experience at an off-campus affiliated clinical site.

The job classifications and associated tasks for these categories are as follows:

- a. Athletic trainers will be expected to provide emergency treatment for life-threatening emergencies, including administering mouth-to-mouth resuscitation and controlling bleeding occurring due to participation in athletics. Also, the athletic training staff member may be involved in assisting the team physician with suturing, draining blisters, applying band-aids, or shaving calluses.
- b. Athletic Training Students will often be required to perform the same tasks when the situation requires.

Implementation of Universal Precautions

OSHA also requires that this plan include a schedule and method of implementation for the various requirements of the standard. The following complies with this requirement:

Implementation Methods

Universal Precautions

The program will take every measure to inform athletic training students and preceptors the use of the universal precautions approach to infection control. All human blood and other potentially infectious body fluids will be treated as though known to be infectious for HBV, HCV and HIV and other blood-borne pathogens regardless of the perceived status of the source or source individual.

Engineering and Work Practice Controls

The objective of engineering controls and work practice controls is to reduce or minimize exposure to blood-borne pathogens. The difference between the two types of controls is that one isolates or removes the hazard from the workplace, while the other reduces the risk of exposure by altering how tasks are performed. Engineering controls isolate or remove the blood-borne pathogen hazard from the workplace and include examples of biohazard waste and sharps containers. Work practice controls reduce the likelihood of exposure by altering the manner in which a task is performed and include prohibiting of recapping of needles by a two-handed technique. The following engineering controls and work practices are utilized at each clinical affiliation. It is imperative that students and preceptors utilize these techniques and observe these rules.

1. *Hand Washing:* Hand washing stations should be provided and signs will be posted to identify those stations in exposure-prone areas at all clinical affiliated facilities. Where no sink is available, a hand sanitizing gel or foam will be used as an intermediate measure, to be followed by washing with soap and water as soon as feasible. Hands are to be thoroughly washed with water and an antimicrobial solution under the following circumstances:

- Before gloving
- After removing gloves
- After each patient procedure
- Before leaving the work area
- Before eating
- After hands have touched a possibly contaminated surface

Effective hand washing means scrubbing with soap for a minimum of 20 seconds on the palms, between the fingers, the back of the hands, and the wrist. Scrubbing is followed

by a thorough rinse with water and complete drying. If a paper towel is used for drying, it should be used to turn off the water.

2. *Gloves*: Disposable latex, nitrile, or vinyl gloves are available for use at all clinical affiliations.
 - These gloves are NOT puncture-resistant, nor are they 100% protective against infectious agents.
 - Gloves must be replaced as soon as practical when contaminated (at a minimum, after each patient).
 - Torn or punctured gloves must be replaced as soon as feasible.
 - Disposable gloves may NOT be washed for reuse.
 - Gloves will be removed prior to leaving the treatment area.
 - Grossly contaminated gloves will be discarded in a biohazardous waste container. They may go in the regular trash if they are not grossly contaminated.
 - Immediately after removing your gloves, hands must be washed with soap and running water.
 - Hand sanitizer may be used as an intermediate measure but not in place of hand washing.

After proper removal and disposal of personal protective gloves (or other personal protective equipment), athletic training students shall wash their hands or any other potentially contaminated skin area immediately or as soon as feasible with soap and water. If an athletic training student incurs exposure to their skin or mucous membranes, then those areas shall be washed or flushed with water as appropriated or as soon as feasible following contact.

3. *Biohazardous Waste*: Contaminated wastes include the following: blood or other potentially infectious body fluids; items which would release these fluids if compressed; items which are coated with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; pathological and microbiological waste containing blood or other body fluids including saliva. Protocol for waste handling is as follows:
 - Contaminated wastes, including grossly contaminated gloves, are to be placed in a biohazardous waste container.
 - All contaminated sharps are to be placed in a sharps container.
 - Recapping of needles should be performed using a one handed technique.
 - These containers must be closeable, leak proof and properly labeled.
 - Contaminated wastes or filled sharps containers may NOT be placed in with the regular trash for removal.

These containers or devices are labeled and color-coded, and are puncture-resistant and leak-proof. They are kept upright at all times and the lid will be tightly sealed prior to

removal of the container. If the outside of the container becomes contaminated, it shall be placed in another leak-proof container prior to disposal. Any contaminated object that can puncture the skin is considered a contaminated sharp. These items MUST be placed immediately in a sharps container. These containers will never be overfilled, but will be replaced when the contents reach the fill line.

4. *Housekeeping:* In keeping with the concept of universal precautions, the clinical affiliation will ensure that the worksite is maintained in a clean and sanitary condition.
 - Each clinical affiliation is responsible for using an EPA or FDA approved disinfectant to clean and decontaminate all equipment and work surfaces after he/she has used them and made contact with blood or other potentially infectious materials. Work surfaces and equipment include countertops, exam tables, modalities, etc.

5. *Biohazardous Labeling:* Biohazardous warnings, either the internationally recognized biohazard symbol or bright orange-red coloring, will be used to alert persons of potential contamination of:
 - Containers of contaminated waste.
 - Sharps containers: Contaminated sharps that are not reusable are to be placed immediately, or as soon as possible after use, into appropriated sharps containers. Sharps containers are puncture resistant, closable, labeled with a biohazard label, and are leak-proof.

6. *Needles and Sharps Handling Practices:* Contaminated needles and other contaminated sharps objects will not be bent, recapped, removed, sheared, or purposely broken. Following usage, needles or other contaminated sharps objects will be disposed of in a clearly marked biohazardous, sharps container. OSHA allows for one exception to the rule governing the disposal of needles, if the procedure requires that the contaminated needle be recapped or removed and no alternative is feasible, and the action is required by the medical procedure and in accordance with medical provider supervision. If such an action is required, then the recapping or removal of the needle must be done by the use of a mechanical device or a one handed technique. Shearing or breaking of used needles is prohibited. Any broken glass involved in an accident and visible contaminated with blood will be handled as a contaminated sharp.

7. *Work Area Restrictions:* In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, athletic training students are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages are not to be kept or placed on treatment tables, taping tables or countertops when blood or other potentially infectious materials are likely to be present. All procedures will be conducted in a manner that will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials.

8. *Specimens:* Specimens of blood or other potentially infectious materials, such as urine, will be placed in a container that prevents leakage during the collection, handling, processing, storage, and transport of the specimens. The container used for this purpose will be labeled or color-coded in accordance with the requirements of OSHA standards. It should be noted that this standard provides exemption for specimens from the labeling/color coding requirements of the standard, provided the facility uses Universal Precautions in the handling of all specimens and the containers are recognizable as container specimens. This exemption only applies while the specimens remain in the facility. If outside contamination of the primary container occurs, the primary container shall be placed within a secondary container that prevents leakage during the handling, processing, storage, transport, and/or shipping of the specimen.
9. *Contaminated Equipment:* Equipment that has become contaminated with blood or other potentially infectious materials shall be examined before servicing or shipping and shall be decontaminated as necessary unless the decontamination of the equipment is not feasible.
10. *Other Personal Protective Equipment:* All personal protective equipment used will be provided without cost to the athletic training student. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time that the protective equipment will be used. Examples of other PPE are:
 - One-way Pocket masks
 - Examination Gloves
 - Protective eyewear
 - Face shield
 - Protective Gowns

All personal protective equipment should be cleaned, laundered, and/or disposed of regularly by the user. All personal protective equipment will be removed before leaving the work area.

11. *Laundry Procedures:* All garments that are penetrated by blood shall be removed immediately or as soon as feasible. Decontamination will also take place after any blood or other potentially infectious material exposure has occurred. Approved decontamination products are to be available and provided by the facility.

Laundry contaminated with blood or other potentially infectious materials will be handled as little as possible. Such laundry will immediately be placed in appropriately marked bags. This laundry will not be sorted or rinsed in the area of use. It will then be

removed by the individual responsible for laundry using personal protective equipment, and washed separately in bleach. Any individual handling contaminated laundry will use personal protective equipment to prevent contact with blood or other potentially infectious materials.

Communication of Hazards

Hazards related to bloodborne pathogens are communicated through warning labels, as well as through training for athletic training employees/students with occupational exposure. Warning labels are required on containers of regulated medical waste, refrigerators and freezers containing blood or other potentially infectious material, and other containers used to store, transport, or ship blood or OPIM. The labels include the biohazard symbol and the word "biohazard". Red bags or red containers may be substituted for labels.

Handling Emergencies Involving Exposure

a) Accidents/Spills

1. Blood and other potentially infectious materials

- Isolate area where spill occurs-place hazard sign in front of spill or have a qualified individual stay at spill site to warn others.
- If necessary, put on gloves, mask, eyewear, and a fluid-proof gown.
- Apply an absorbent material to absorb the fluid.
- Place the absorbed material and all disposable clean-up items in a biohazard container.
- Clean area where spill occurred with: (1) soap and water, then (2) disinfectant.
- Remove and dispose of disposable personal protective equipment and clean and disinfect non-disposable items.
- Wash hands with soap and running water.

2. Alternative method:

- Retrieve a spill kit.
- Put on heavy-duty utility gloves.
- Saturate the area with diluted bleach and leave for 10 minutes.
- Remove any broken glass and discard in a sharps container.
- Wipe up excess materials with disposable towels.
- Discard wiped up material in regulated trash.
- Disinfect the area.
- Disinfect and remove gloves.
- Wash hands.

3. Sharps and contaminated broken glass or other sharp materials must be placed in a biohazard container. These items are never to be picked up by the hand, even when wearing gloves. Always use forceps or scoop and brush.

b) Emergencies Involving Patient Care

1. Unexpected bleeding; CPR; rescue breathing; airway obstruction; etc.

- The patient must be cared for immediately in these situations.
- Always use a protective barrier to prevent contact with body fluids.
- If treatment results in blood or other body fluids contaminating any area of student's skin or eyes or mucous membranes, these are to be washed with soap and running water as soon as possible. Mucous membrane contact with a patient's body fluids is an exposure incident and the student may request a post-exposure evaluation.
- If blood or other body fluids soak through clothing, then this clothing must be removed and skin underneath cleaned with soap and running water.
- The contaminated item of clothing is to be placed in a biohazard waste container.
- If at any time during this emergency it becomes possible to interrupt treatment and put on proper personal protective equipment (with no increased risk to the patient), then the student is to do so.

Hepatitis B Vaccination Policy

The program will comply with federal and national guidelines for Hepatitis B immunization. The program recommends to students to receive the Hepatitis B vaccination. Students are responsible for the cost associated with Hepatitis B vaccination. A Hepatitis B vaccination is not warranted under these conditions:

- The student has been previously immunized.
- An antibody test reveals a protective titer.
- The vaccination is medically contraindicated.
- The student chooses to decline the immunization, in which case he/she will be required to sign an Assumption of Risk Waiver Form.

Post-Exposure and Follow-up

When an athletic training student incurs an exposure incident, it should be reported to the Program Director, Clinical Education Coordinator and/or Preceptor. The staff of CCWV at the WVWC Student Health Center or local hospital facility will evaluate the individual. In the event that an athletic training student incurs an exposure incident at an off-campus affiliated site, the student should report to the nearest Emergency Department or their Primary Care Physician. All individuals who incur an exposure will be offered post "exposure evaluation and follow-up" in accordance with OSHA standard. The follow-up will include the following:

- Written documentation of the route of exposure and the circumstances related to the incident as soon as feasible following exposure. This is to be returned to the Program Director or Clinical Education Coordinator.
- For puncture injuries or cuts from sharps, expose, express (encourage bleeding if the wound is small) and thoroughly wash the wound area with soap and water for 15 minutes, minimum. If soap and water are not available, then an antiseptic (solution, wipe, spray) should be used.

- Wash any area exposed to blood or OPIM with tepid water and soap for at least 5 minutes. Alcohol-based hand rinses, gels, foams (containing 60+% alcohol) should be used on intact skin when water is not available.
- If splashes are to the eyes, irrigate eyes with clean water or commercially available eyewash solution for 15 minutes.
- If possible, the identification of the source individual and if possible the status of the source individual. The blood of the source individual will be tested after consent is obtained for HIV/HBV infection.
- Results of testing of the source individual will be made available to the exposed athletic training staff or athletic training student with the exposed individual informed about the applicable laws and regulations concerning disclosure of the identity and infection of the source individual.
- The individual will be offered the option of having their blood collected for testing of the individuals HIV/HBV serological status.
- The Program Director will be designated to assure that the policy outlined above is effectively carried out as well as to maintain records related to this policy.

Once these procedures have been completed, an appointment with a qualified healthcare professional is arranged for the exposed athletic training student to discuss the student's medical status. This includes an evaluation of any reported illness, as well as any recommended treatment.

Training

Training for athletic training students will be conducted annually and before initial assignment to tasks where occupational exposure may occur. Training will include the following:

- The OSHA Standard for Bloodborne Pathogens.
- Epidemiology and symptomatology of bloodborne disease.
- Modes of transmission of bloodborne pathogens.
- The exposure plan (i.e. points of the plan, lines of responsibility, how the plan will be implemented, etc.)
- Procedures that might cause exposure to blood or other potentially infectious material at this facility.
- Control methods to be used at the facility to control exposure to blood or other potentially infectious materials.
- Personal protective equipment available.
- Who should be contacted concerning exposure to blood or other potentially infectious material?
- Post-exposure evaluation and follow-up.
- Signs and labels used.

Record Keeping

The Athletic Training Program Director will maintain all records required by the OSHA standard. The athletic training faculty/preceptors will be responsible for conducting the bloodborne pathogen training to the athletic training students. All athletic training staff and athletic training students will receive annual refresher training within one year of the individual's previous training.

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