

WEST VIRGINIA WESLEYAN ATHLETIC TRAINING PROGRAM



HANDBOOK of Policies & Procedures

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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 WVWC ATP is to prepare undergraduate athletic training students to sit for the BOC examination as per CAATE and BOC guidelines and requirements. Graduates will be proficient in all 5 domains of athletic training: Injury/Illness Prevention and Wellness Protection, Clinical Evaluation and Diagnosis, Immediate and Emergency Care, Treatment and Rehabilitation, Organizational and Professional Health and Well-being.

C. Program Goals

Upon completion of the WVWC ATP, the graduate will be able to:

1. Think creatively and critically
2. Communicate effectively in both the written and spoken word
3. Act responsibly and within the ethical, professional, clinical and legal parameters of the certified athletic trainer
4. Demonstrate citizenship and community involvement through service

II. Organizational Structure

A. Athletic Training Program Chain of Command

President of the College

Dean of the Faculty/VPAA

School of EXSC/AT Director

Director of Athletic Training

Faculty Athletic Trainers

SCHOOL OF EXERCISE SCIENCE/ATHLETIC TRAINING FACULTY AND STAFF

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CAATE ACCREDITED

ATHLETIC TRAINING PROGRAM

Introduction

The athletic training program major at West Virginia Wesleyan College is designed to provide students with theoretical knowledge and understanding of the profession of athletic training. The major blends classroom instruction and structured clinical experiences through a process that results in the student gaining eligibility to sit for the National Athletic Trainers' Association Board of Certification (BOC) examination upon graduation from Wesleyan. Students who graduate from the program and subsequently pass the BOC examination, will be qualified to be employed as athletic trainers in secondary schools, colleges and universities, professional athletic teams, sports medicine clinics, or in industrial preventative medicine clinics. In addition, students will be well prepared to pursue graduate level studies in athletic training and, upon completion of specified prerequisite coursework, advanced degrees in movement science, exercise physiology, physical therapy, physician assistant, medicine, health, and physical education. The program holds accredited status from the Commission on Accreditation of Athletic Training Education (CAATE).

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

As of 2020-2021, the college is no longer accepting applications for this program. The college has obtained CAATE and Higher Learning Commission approval to transition the professional athletic training program to the master's level. Cohort 2023 will be the last BSAT cohort of the program.

Program Application

Application materials must be completed and turned in to Program Director by February 15th of the Spring semester. Acceptance for all candidates will be provisional until grades are released for the spring semester and all criteria remain met. Candidates will be notified of their acceptance status by June 1st of each year.

Transfer students may apply by completing all program admission materials and turning them in to the Program Director by August 1st 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 Program Director and School Director. Final approval for all transfer athletic training credit will be at the discretion of the 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 Athletic Training Program (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 allow 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(s) to address any and all criteria that are lacking to the Program Director by August 1st. The petition will be reconsidered by the Program Director, School Director, and ATP faculty, and the student will be notified prior to the beginning of the fall semester. Program applications are available in the Program Director's office and are given to students in the fall semester course, EXSC 155 Introduction to Athletic Training.

During the fall semester, students are required to complete an orientation to the program with an assigned mentor, attend an in-service on universal precautions, and complete specified prerequisite coursework. Freshman and sophomore students are admitted to the program during the fall semester following their acceptance into the program.

Notice: The prospective athletic training student is strongly advised to consider fully the demands of extensive classroom and fieldwork demands of the ATP. Participation in varsity sports and/or other heavy extracurricular activities will make completion of the ATP within four years VERY difficult. Those who choose to participate in these activities will/may need to stay

for at least one semester or one full academic year to complete all requirements and the minimum six semester fieldwork experience. Every attempt will be made to accommodate these students; however, student-athletes and others that will have extensive time demands outside of the ATP are required to communicate this to the Program Director and academic advisor during the first semester at WVWC.

Students who wish to combine athletic training with a second major in teacher education must fulfill all requirements of both the athletic training major and the teacher education program, including the specific requirements for the desired teaching field(s). This combination will require more than four years to complete.

Selection Criteria and Process

Admission into the athletic training major is selective and limited. The number of students accepted into the program each year is based on the availability of clinical supervisors and quality clinical instruction. Students must meet all the following eligibility requirements for formal admission into the athletic training major:

1. A cumulative grade point average of 2.5 or higher.
2. Completion of following courses (no grade <“C”): BIOL 151, 152; PHED 165; EXSC 155, 160, 163.
3. Submission of a written application, including two letters of recommendation.
4. Successful completion of an interview with the ATP faculty and clinical instructors.
5. Completion and documentation of 60 observation hours and required first-year clinical competencies.
6. Proof of American Heart Association Basic Life Support (BLS) CPR/AED Certification or American Red Cross CPR for the Professional Rescuer Certification.
7. Attendance at an approved Universal Precautions/OSHA in-service.
8. Documentation of a valid physical examination, evidence of vaccinations, and signed Hepatitis B informed consent/refusal form.
9. Technical Standards requirement form signed in appropriate space.

Selection Committee

The committee in charge of collecting and reviewing all written applications to the WVWC Athletic Training Educational Program, as well as conducting interviews of each candidate, shall be made up of:

ATP Director

2 Faculty Athletic Trainers

2 to 4 Staff Athletic Trainers

School of EXSC/AT Director

Additional committee members may include:

1-2 Licensed Physical Therapist(s) or Athletic Trainer(s) from a local Sports Medicine Clinic
1-2 Member(s) of the WVWC Athletic Department

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 August 1. 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.

Academic and Clinical Program

Once the student has been formally admitted into the program, he or she will be assigned an academic advisor within the program faculty and staff. Students formally begin the clinical requirements in the fall semester following acceptance into the program. Students are required to complete a minimum of 6 full semester clinical practicums.

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” in the required courses within the major.
2. Maintain a minimum of a 2.75 cumulative GPA after completion of the first year of formal admittance in all required athletic training courses through completion of the program. **Students must also maintain institutional standards for graduation – *See requirements for graduation.*
3. Demonstrate continual progress in attainment of the required clinical competencies (each semester) and minimum 6 semesters of clinical fieldwork.
4. Remain in good judicial standing with West Virginia Wesleyan College.

Graduation Requirements

To graduate from the ATP with a BSAT students must meet the following criteria:

1. Completion of the required course of study (120 credit hours) with a minimum cumulative grade point average of 2.5, and a minimum athletic training coursework grade point average of 2.75 (with no grade of less than “C”).
2. Completion of a minimum of six semesters of athletic training clinical experience under the direct supervision of an approved clinical supervisor/clinical instructor.
3. Completion of all necessary application materials for graduation from the College.

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. 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.

Interested High School or Transfer Applicants May Contact:

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

**ATHLETIC TRAINING
DEGREE REQUIRED COURSES**

EXSC 164 Emergency Care of the Athlete	4 credits
EXSC 155 Introduction to Athletic Training	1
EXSC 160 Athletic Training I	3
EXSC 163 Taping Lab	1
PSYC 101 General Psychology	3
BIOL 151 Human Anatomy & Physiology I w/lab	4
BIOL 152 Human Anatomy & Physiology II w/lab	4
EXSC 211 Athletic Training Practicum I	1
EXSC 212 Athletic Training Practicum II	1
EXSC 213 Clinical Techniques in AT I	4
EXSC 214 Clinical Techniques in AT II	4
EXSC 240 Fundamentals of Human Nutrition	3
EXSC 220 Psychology of Injury or	3
EXSC 261 Foundations of Sport & Exercise Psychology	3
EXSC 276 Therapeutic Modalities in Athletic Training	3
EXSC 303 Organization & Administration of Health Professions	3
EXSC 305 General Medical Conditions of the Phys Active	2
EXSC 311 Athletic Training Practicum III	1
EXSC 312 Athletic Training Practicum IV	1
EXSC 313 Clinical Techniques in AT III	4
EXSC 320 Exercise Physiology	3
EXSC 325 Kinesiology	3
EXSC 360 Foundations of Strength & Conditioning or	3
EXSC 331/338 Exercise Testing & Prescription/Lab	4
EXSC 372 Rehabilitation Techniques in Athletic Training	3
EXSC 340 Advanced Topics in Nutrition	3
EXSC 396 Clinical Internship in Athletic Training	1
EXSC 403 Senior Seminar in Athletic Training I	1
EXSC 404 Senior Seminar in Athletic Training II	1
EXSC 411 Athletic Training Practicum V	1
EXSC 412 Athletic Training Practicum VI	1
Total	70-71 credits

- students interested in pursuing pre-medicine, pre-physical therapy or pre-physician assistant preparation **are recommend to take CHEM 161, 163L, 165, 167L or CHEM 131, 133L, 132, 134L**
- strongly recommended to all ATs: **PSYC 230 or MATH 115**

ATHLETIC TRAINING PROGRAM SUGGESTED COURSE SEQUENCE

FRESHMAN YEAR:

FALL:

Introduction to Athletic Training (1)
Human Anatomy & Physiology I (4)
General Studies (10)

15 hrs

SPRING:

Athletic Training I (3)
Athletic Training Taping Laboratory (1)
Emergency Care of the Athlete (4)
Human Anatomy & Physiology II (4)
General Studies (3)

15 hrs

SOPHOMORE YEAR:

FALL:

Clinical Techniques in AT I (4)
Fundamentals of Human Nutrition (3)
Athletic Training Practicum I (1)
General Studies (7)

15 hrs

SPRING:

Clinical Techniques in AT II (4)
Athletic Training Practicum II (1)
Psychology of Injury (3)
Therapeutic Modalities (3)
General Studies (4)

15 hrs

JUNIOR YEAR:

FALL:

Rehabilitation Techniques in AT (3)
Exercise Physiology (3)
Clinical Techniques in Athletic Training III (4)
Athletic Training Practicum III (1)
General Studies (4)

15 hrs

SPRING:

Kinesiology (3)
Athletic Training Practicum IV (1)
General Medical Cond. of the Phys. Act. (2)
General Studies (9)

15 hrs

SUMMER PRIOR TO SENIOR YEAR:

Clinical Internship in Athletic Training (1)

SENIOR YEAR:

FALL:

Senior Seminar in Athletic Training I (1)
Advanced Topics in Nutrition (3)
Athletic Training Practicum V (1)
Org. & Admin of Health Prof (3)
General Studies (7)

15 hrs

SPRING:

Senior Seminar in Athletic Training II (1)
Athletic Training Practicum VI (1)
Foundation of Strength & Conditioning (3/4)
or Ex Testing & Prescription w/ lab
General Studies (9-10)

15 hrs

BOC References 2022-23

BOC Exam references can be found here:

[Exam Preparation Tools](#)

[BOC Exam References](#)

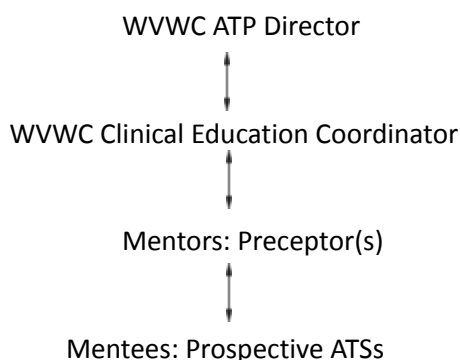
ATP MENTORING PROGRAM

PURPOSE: To assist the prospective Athletic Training Student in his/her orientation to the WVWC Athletic Training Program. To support, facilitate, and guide the student through his/her first semester/year in the WVWC Athletic Training Program.

INTRODUCTION: Students participating in the program will be assigned two separate Preceptors for two separate two-week rotations. Contact information for their assigned Preceptor will be provided by the Clinical Education Coordinator. The assigned Preceptor list and rotations will additionally be available on Blackboard under each section of EXSC 155. Students will then be responsible for making the initial contact with their respective Preceptor.

REQUIRED HOURS: A minimum of 20 hours is required. Hours should occur on a weekly basis throughout the students' total four weeks of rotations. Hours should include: General Athletic Training Facility hours, practice coverage, and game coverage, as per Preceptor assignment as much as possible.

MENTOR PROGRAM ORGANIZATIONAL FLOW CHART:



OBJECTIVES OF THE PROGRAM:

1. To coordinate positive student experiences in the AT facility, team practices and events.
2. To facilitate a relationship with the Preceptors.
3. To facilitate a relationship with the Athletic Training Department faculty and staff.
4. To enhance a continuing orientation to college, student athletic training life, and WVWC.
5. To help the prospective ATS form a positive identification to the WVWC ATP.
6. To motivate and inspire the prospective ATS to continue in the WVWC ATP.
7. To provide support to the prospective ATS that will strengthen their desire and contribute to their successful completion of their chosen college degree program and graduation.

8. To provide a better understanding of the field of Athletic Training.

STUDENT RESPONSIBILITIES:

1. Dress Code will remain consistent with the ATP dress code and Athletic Training Services dress code.
2. Attendance: Minimum 20 hours for the semester. Maximum 25 hours. Hours spread over the ENTIRE semester; therefore, weekly attendance. Hours must be documented on an hour sheet. Hours should specify what type of experience received (i.e., ATF, practice, game, what sport).
3. During each observation time, prepare a list of 3-5 questions to ask your Preceptor. Document these Q&A.
4. Keep a journal summarizing your AT Department experiences.
5. Complete skill competency check-offs with an upper class athletic training student or preceptor as appropriate and assigned.
6. Come prepared: bring journal, hours sheet, check-off book, blank writing paper, and a writing utensil.
7. It is the **student's responsibility** to have his/her mentor initial weekly hours, Q&A, journal entries, etc.
8. Ask questions, be proactive, don't sit and stare, get involved, have fun, and LEARN!
9. No cellular phones.

PRECEPTOR RESPONSIBILITIES:

1. Documentation: initial and date all of the following: Q&A, check-offs, journal entries, hour sheets.
2. Educate students in the following areas: how to make ice bags/ how to secure it to a body part with wrap, treatment time, how to make a moist heat pack/use correct layers, treatment time, how to make ice cups/how to treat using ice cups, how to fill a hot/cold whirlpool/treatment time/temperature/ how to clean whirlpools, indications/contraindications for cold and thermal treatments, all used medical documentation in the facility include how, why and when it is used.
3. Orient students to the daily Athletic Training Facility operational and functional responsibilities, such as: how to do laundry, how to check water level for battery in the golf carts, restocking of all used medical supplies, all medical documentation filing procedures, what is maintained in each file and why, all facility logs, documentation sheets, how to appropriately maintain a neat and clean treatment/taping area in an Athletic Training Facility, how to clean and maintain medical devices and rehabilitative equipment, review OSHA BBP training, HIPAA review
4. Be proactive, interact in a positive way, meet goals, have fun, and TEACH! Keep it PROFESSIONAL. Mentees should feel involved in the operations of the facility and

not used to complete clerical or janitorial tasks. Be certain the experience is educational in nature.

5. **Please feel free to assist your mentee in any other areas you feel would help to orient them to the Athletic Training Facility and the WVWC Athletic Training Program. **You can also assist your mentee with some of their academic deficiencies (i.e., Anatomy reviews, etc.); it's a great review for them and for you!

PROGRAM CLINICAL EDUCATION COORDINATOR RESPONSIBILITIES:

1. Facilitate Preceptor/freshman student relationship.
2. Facilitate faculty/staff/new student relationships.
3. Provide support to Preceptors and new students.
4. Relay pertinent information regarding Preceptor/new students to ATP Director.
5. Mediate any problems between Preceptor/new student.
6. Report any unethical occurrences to the ATP Director.

WEST VIRGINIA WESLEYAN COLLEGE

Athletic Training Program

CONFIDENTIALITY STATEMENT

Patient confidentiality is of the utmost importance. At no time should that confidentiality be breached. Other than their supervisors and overseeing physician(s), students should not discuss confidential patient/athlete information to anyone (including the media, fans, professional scouts, roommates, parents, boyfriends/girlfriends, etc.). When in doubt, the student should consult his/her clinical supervisor, and understand that this supervisor 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 permission of the clinical supervisor. All students must comply with the provisions of the Health Information 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 and agency information in confidence. I understand that any violation of the confidence 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.

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 individuals 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 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 the 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** by the end of the first semester of the junior year. 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 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 junior and senior-level 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 or no later than 15 minutes following your last class of the day. 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 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. Restock 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. Restock 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 the 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 clipboard. 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 to 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

- 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 gray).
- Color cohesiveness must be maintained.
- All shirts must be tucked in at all times. If the shirt comes untucked 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 Program Director 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.

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, the outermost layer should have the 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 of 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. Also see, *Clinical Experience Guidelines* for more information.

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

the 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 AT Practicums I – VI 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. Involvement in summer camp work is also encouraged. Volunteer or paid work with hospital-based or private clinics can also greatly enhance the student's understanding of health care administration. Students are also encouraged to assist (with permission) BOC certified athletic trainers at high school football practices in the preseason (including pre-season physical exams) and/or games on Friday nights. As partial fulfillment of the ATP curriculum, students will be required to research and possibly observe surgeries. All School of EXSC/AT students are required to complete a 120 hour clinical internship at an approved facility in the summer following their junior year.

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, the 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 of 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

WVWC ATP

Graduate Student Clinical Instruction and Supervision Policy

Graduate students are beneficial to maintaining the quality of the clinical instruction of the undergraduate athletic training student. The main goal of the use of graduate athletic trainers is to establish a network of undergraduate and graduate students, in cooperation with the Undergraduate and Graduate Athletic Training Program Directors, to provide on-site athletic training clinical and proficiency skill experience.

The initial step in the development of this network requires all graduate athletic training students (GATS) within the WVWC Athletic Training Department to undergo a training and mentoring program while on campus. This process will be ongoing and will minimally involve: the Undergraduate Athletic Training Program Director (ATPD), Clinical Education Coordinator (CEC), and ATP Faculty and Staff. GATS who are eligible to be Preceptors upon entering Wesleyan, will be afforded the opportunity to do so.

Evaluation of clinical proficiencies and competencies may only be signed off on by those GATS who meet the qualifications to be a Preceptor. Non-credentialed GATSs will be permitted to only provide clinical experiences with an UATS in the presence of a Preceptor meeting CAATE standards.

Supervision of the GATS will be conducted using a multiple level approach. The following methods will be used to ensure quality of clinical instruction and athletic training student supervision:

1. Attendance at August In-service training is mandatory. During this time, the AT Program Policy and Procedures Manual will be reviewed. Additional policies related to daily operation of the ATF will be reviewed. It is essential that GATS are present at this training event to ensure they are aware of operations of the WVWC Athletic Training Program.
2. Attendance at ALL weekly ATP staff meetings is required. Absences must be approved by the CEC or ATPD in advance if possible. Emergency situations will be reviewed on an individual basis.
3. Attendance at all ATP meetings and in-service training sessions is mandatory.
4. Any email correspondence between GATS and UATS must include the CEC.
5. Random visits of the CEC or ATPD.
6. The CEC or ATPD will conduct weekly discussions of related clinical issues as part of the graduate clinical practicum and seminar course series.
7. All evaluations completed by GATS will be reviewed with the UATS being evaluated and the CC (mid-term and final clinical assignment evaluations).
8. At the end of the clinical assignment, the GATS will schedule a meeting with the CEC to review end of the season requirements (including but not limited to: end of season injury statistics, treatment statistics, and clinical instruction issues and concerns).

Failure to comply with the above requirements will follow a three strike approach, as outlined below.

1. First offense: Verbal notification given. Written notification of offense placed in GATS educational file.
2. Second offense: meeting with ATPD, MSAT Director, and CEC. Formal documentation placed in GATS educational file. Documentation may result in an inability to provide a positive letter of recommendation in the future.

3. Third offense: removal of ATS from supervision of GATS. Formal documentation placed in the educational file. Positive letter of recommendation will not be provided by ATPD, MSAT Director, nor CEC.

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 Athletic Training Student must maintain a minimum 2.5 overall GPA in the sophomore year and a **minimum of a 2.75 GPA within required courses of the ATP**. Additionally, the student must achieve a final grade of "C" or better on all required coursework within the major and show continual progress of a 6-semester sequence of clinical experience.

If the student drops below these requirements or the student's actions are not in accordance with the program policies and requirements, the consequences are outlined below.

I. **Definitions:**

Probation: "subjection of an individual to a period of testing and trial to ascertain fitness (as for a job or school)" – during a probationary period, said student will be permitted to continue to complete observation hours and perform ATS duties as assigned in the WVWC Athletic Training Department until he/she proves himself to the faculty/staff; failure to ascertain fitness before the termination of the probationary period will lead to suspension.

Suspension: “to debar temporarily from any privilege, office, or function” – suspensions will be for a minimum of a week depending upon the offense/problem, and will be kept part of the student’s permanent record.

II. Academic Violations:

1. Failure to meet minimum GPA requirements:

The student will be given a period of one academic semester to attain the required minimum GPA during which time the student will be placed on probation. As terms of the student’s probation, the student will be required to meet with the ATP Director, Clinical Education Coordinator, and his/her clinical supervisor to determine the student’s assigned clinical duties, which will be limited to a maximum of ten clinical hours per week, no travel. The student should use this additional time to focus on and correct academic deficiencies. Should the student be involved in other co-curricular activities (i.e., Greek life, athletic teams), the leader/director of the co-curricular organization could also be involved in the meeting and decisions regarding the extent of clinical experience.

If, at the end of the probationary period, the student has not met the minimum GPA requirements, the student will be either suspended from the program until a time at which the minimum GPA requirements are met or a graduated corrective action plan will be implemented on an individual case basis. If suspended, the student will not be permitted to continue with the athletic training course progression. Any courses or experiences the student misses as a result of this suspension will need to be made up in order to be eligible for the BOC examination. In accordance with policies stated in the College Catalog, courses are required to be taken in sequence. Any disruption in the normal sequence may result in the student not completing the program requirements within 4 years. When the student has met the minimum GPA requirements, the student may petition to be readmitted to the program.

2. Failure to receive a “C” or better in any required athletic training course.

All students formally accepted into the athletic training program must achieve a "C" or better final grade in the required coursework within the major. Any student who fails to achieve a "C" or better in a required course will be required to repeat the course in the next available academic semester that the course is offered. Independent study or contract courses will not be allowed. This delay may have additional implications in terms of clinical experiences and assignments which may result in extending the amount of time needed to complete all program requirements and be eligible for graduation from the Athletic Training Program. The student must also meet with the ATP Director, Clinical Education Coordinator, and his/her clinical preceptor to determine the student’s assigned clinical duties, which will be limited to a maximum of ten clinical hours per week and no travel away from campus. The student should use this additional time to

focus on and correct academic deficiencies. The student's probationary period will end at which time the student earns a "C" or better in the particular course.

3. Failure to receive a "C" or better in any required athletic training course that has been repeated at least once:

An attempt to repeat a required athletic training course which does not result in a grade of "C" or better, will result in the student being expelled from the athletic training program.

4. 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.

5. 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").

5. 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 they choose. If re-admitted to WVWC and the student wishes to be readmitted into the ATP, the student will need to petition for readmission to the 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 the student. Once reviewed, the student will be notified of the committee's decision in writing.

III. Violation of Policies

Each student will be provided a list of Athletic Training Student requirements and responsibilities (refer to "Athletic Training Student Requirements and Responsibilities"). Each student will be expected to adhere to these policies and present himself or herself in a professional manner. If in such case an athletic training student violates athletic training policies, the following procedures will be enacted and enforced:

1. Clinical Experience

Tardiness and Absence

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 asking for letters of recommendation for scholarships, internships, employment, etc.

The quality of the educational experience while actively observing rehabilitation programs, treatments, and clinical assignment hours are arranged according to the number of students that are available at a particular time. When one does not show up or is late, learning opportunities are lost. Given below are the policies that will be enforced with no exceptions, regarding tardiness and absenteeism:

a. Tardiness Policy

First offense – If a student is no more than 10 minutes late, the student will be given the “benefit of the doubt”

Second offense – Counseling meeting with Clinical Education Coordinator and Preceptor, suspension period of 1 week, during which the student will be assigned to the athletic training facility. This suspension will be reflected in the evaluation grade.

Third offense – Suspension of all clinical/field experiences for the remainder of the semester/clinical experience. A complete suspension from the clinical experience will result in a failing grade for the clinical experience course.

b. Absence Policy

Specific circumstances (weddings, family events, religious events, etc.) may allow a student to miss his/her clinical hours. If it is known that a student will not be

able to attend scheduled clinical hours, the student must request to be excused from the clinical experience 48 hours prior for a practice event and a 1 week notice for a game event to his/her respective clinical supervisor and the Clinical Coordinator. The Preceptor and Clinical Education Coordinator will discuss the request and reach a decision as to whether or not the student will be excused. Should the request be denied, the student will be expected to be present at the clinical experience. Failure to be present will result in the unexcused absence policy being enforced. As stated above, the clinical experience is an educational experience that serves to prepare the student for professional service after graduation.

Absence from Clinical Experience:

First Offense – Conference meeting with Clinical Education Coordinator, student, and Preceptor. At this time, the student will be allowed to explain his/her absence. If deemed excused, no further action will be taken. If deemed unexcused, a warning will be given to the student and added to the student's file.

Second Offense – Conference meeting with Clinical Education Coordinator, student, and Preceptor. At this time, the student will be allowed to explain his/her absence. If the explanation is deemed as unexcused, the student will be suspended from the clinical experience for 2 weeks. During this 2 week time, the student will be assigned to the athletic training facility. Written notification will be placed in the student file stating the student has accrued 2 unexcused absences. The suspension will be reflected in the evaluation grade as a 1% reduction per day up to a total of a 10% overall reduction.

Third Offense – Conference meeting with Program Director, Clinical Education Coordinator, student, and Preceptor. At this time, the student will be allowed to explain his/her absence. If the excused is deemed as unexcused, an immediate suspension from all clinical experiences will ensue. As a result, the student will not be given credit for the clinical experience and will be required to make up the clinical experience in order to maintain good standing within the athletic training program and be eligible for the BOC examination.

This policy is designed to address the professional responsibility of the student to communicate with the Preceptor. This policy is designed to take into account extenuating circumstances which may arise and cause the student to be tardy or miss his/her clinical assignment. Valid reasons will be considered as long as patterns of tardiness and excuses do not present themselves. Failure to communicate with the Preceptor will force the faculty/staff member to count the absence/tardiness as unexcused.

The above policy applies to each of the 6 semester periods of field experiences. **All of the above can be avoided if the student communicates with the Preceptor.** All conferences will be documented and kept as part of the student's personal file. The intent of a policy this rigid is to serve as a deterrent to problems associated with missing clinical experiences.

2. Uniform/Dress Code Policy:

The faculty and staff of the Athletic Training Program 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.

a. Dress Code Violation – practice/athletic training facility coverage

- a. First offense – He/she will be given two (2) options: (a) go change into proper attire or (b) be considered absent (automatically considered unexcused). Formal documentation will be placed in the student's permanent file.
- b. Second offense – 2 week probation period, in which the student will be assigned to the athletic training facility. A meeting with the Clinical Education Coordinator, Preceptor, and athletic training student will be set. Formal documentation will be placed in the student's permanent file. The final evaluation grade will be a 1% reduction per day up to a total of a 10% overall reduction.
- c. Third offense – 4 week suspension period. A meeting with the Program Director, Clinical Education Coordinator, Preceptor, and athletic training student will be set. Formal documentation will be placed in the student's permanent file. Final evaluation letter grade reduced by two (2) letter grades or a maximum of 20%.

Any offense more than the third may result in greater suspension time including, but not limited to suspension from the remainder of the clinical experience. Should the student be suspended from the remainder of the clinical experience, the student will not be given credit for the experience and will be required to make up the experience in order to be eligible to graduate from the ATP and be eligible for the BOC examination. This may result in an extension in the amount of time needed to complete all program requirements.

b. Dress Code Violation - Game/professional event

- a. First offense – 1 day suspension, automatic unexcused absence, formal notification in student policy.

- b. Second offense – 1 week suspension and an additional automatic unexcused absence. A meeting with the Clinical Education Coordinator, Preceptor, and athletic training student will be set. Formal documentation will be placed in the student’s permanent file.
- c. Third offense – A meeting with the Program Director, Clinical Education Coordinator, Preceptor, and athletic training student will be set. Formal documentation will be placed in the student’s permanent file. Expulsion from the Athletic Training Program will be enforced.

Should an athletic training student accumulate more than 1 unexcused absence, the “Absence Policy” procedures will be enforced. See above for more details.

Should the athletic training student be suspended from the remainder of the clinical experience, the student will not be given credit for the experience and will be required to make up the experience in order to be eligible to graduate from the ATP and be eligible for the BOC examination. This may result in an extension in the amount of time needed to complete all program requirements.

c. Clinical Labs:

Athletic training students will dress according to faculty preference for clinical labs. In general, students should dress in shorts and t-shirts, with layers over in case of inclement weather.

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 conferences 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 WWC 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.

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 the 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 appropriate 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 visibly 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 the 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 individual's 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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ATP Clinical Education Experiences

The following references and statements provide policies and information respective to an athletic training student's clinical education experience requirements.

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 211 ATHLETIC TRAINING PRACTICUM I
- EXSC 212 ATHLETIC TRAINING PRACTICUM II
- EXSC 311 ATHLETIC TRAINING PRACTICUM III
- EXSC 312 ATHLETIC TRAINING PRACTICUM IV
- EXSC 411 ATHLETIC TRAINING PRACTICUM V
- EXSC 412 ATHLETIC TRAINING PRACTICUM VI

Minimum/Maximum Hour Requirement: The program's minimum/maximum hour requirement is incorporated into each clinical experience course and; thus, cumulatively results in a program minimum/maximum clinical hour requirement.

The minimum/maximum clinical education hour requirements are as follows:

EXSC 211:	Min: 120	Max: 160
EXSC 212:	Min: 120	Max: 160
EXSC 311:	Min: 150	Max: 250
EXSC 312:	Min: 150	Max: 250
EXSC 411:	Min: 150	Max: 250
EXSC 412:	Min: 150	Max: 250

Program Min: 840 Program Max: 1320

Clinical Education Relief Time: The athletic training program requires that athletic training students completing clinical education courses have a minimum of one day each week/every seven day period with no clinical education assignment or requirement.