INTRODUCTION
The procedures of the Carthage College Athletic Training Education Program (ATEP) are outlined in this document. All ATEP students are required to read and fully understand these procedures. If the student does not understand and/or has questions regarding this document, he/she is to address the Program Director prior to signing the Compliance Statement in Appendix E.

The following abbreviations are used in this document.

ATR = Athletic Training Room
ATS = Athletic Training Student
ATC = Athletic Trainer, Certified

The Carthage College ATEP reserves the right to make changes in its curriculum and procedural manual.
MISSION STATEMENT
The mission of the Carthage College Athletic Training Education Program (ATEP) is to prepare athletic trainers who will deliver quality athletic training services in a variety of employment settings. The Program is designed to develop academic competence, evidence-based practice, and clinical reasoning skills through a sequence of didactic and clinical experiences developing life-long learners. The Program emphasizes critical thinking; inter-professional collaboration; and patient and professional advocacy.

The underlying philosophy for the athletic training program is consistent with the mission of Carthage College, which is a commitment to provide a strong foundation in liberal arts for all of its students. Furthermore, we expect our athletic trainers and athletic training students to provide services while maintaining the highest standards of quality consistent with the National Athletic Trainers Association Code of Practice and the credentialing statutes of the State of Wisconsin.

ATEP GOALS
GOAL #1--Graduates will demonstrate the skills necessary for entry-level practice of athletic training.

Objectives:

- ATS will achieve academic competency within the knowledge areas specified by CAATE.

- The program will prepare students who are successful on the BOC exam.

- Students will demonstrate entry level skills in the clinical setting.

GOAL #2--The Program will provide an effective educational experience that keeps the ATS engaged in the learning process, successful Program completion, and timely employment.

Objectives:

- The ATEP retention rate will not be statistically different than the overall Carthage College institutional retention rate (81%).

- The graduation rate will not be statistically different than our CAATE benchmark institutions.

- The AT cohort will successfully gain employment or post-education placement with 6 month of graduation.

GOAL #3--Faculty, adjunct staff and preceptors will be held to the highest level of quality of instruction.
- Faculty and adjunct staff will score at or above the institutional average on ATEP course evaluations.

- Preceptors will effectively communicate, model professional behaviors, engage and mentor the ATSs during the assigned clinical rotations.

- The clinical sites will meet or exceed the expectations of the ATEP.
ATHLETIC TRAINING EDUCATION PROGRAM
ATHLETIC TRAINING EDUCATION PROGRAM ADMISSION, RETENTION & GRADUATION

Admission Policy
Due to the limited space that is available, applicants to the program are not guaranteed acceptance. The pool of applicants will be compared based on the following criterion:

1. Formal admission and acceptance by Carthage College Admissions office.
2. Grades earned in Carthage College’s courses: AT1020—Introduction to Athletic Training and AT2080—Structural Kinesiology.
3. Obtain a GPA 3.0/4.0
4. Personal interview with the ATEP Admission Committee.
5. High school grade point average, ACT scores, and class rank.

The ATEP application is due to the Program Director on April 1st of the applicant’s freshman spring semester.

Transfer Students
Transfer students will follow the same admission process. The Registrar accepts or rejects transfer credits based on institutional criterion. No athletic training course credits will be transferred. This information is forwarded to the Program Director of Athletic Training.

ATEP Student Athletes
ATEP students are encouraged to participate in collegiate sports during their freshman and sophomore years. The following guidelines are designed to help accomplish success in athletics and academics:

1. The intention on the part of a prospective student to participate in intercollegiate athletics shall not factor into the admissions decision for the athletic training program.
2. Students admitted to the athletic training program may participate in intercollegiate athletics.
3. Athletic training students shall limit their participation to one intercollegiate team.
4. Athletic training students who are members of an intercollegiate team shall participate during their team’s traditional season ONLY. Under no circumstances will athletic training student be permitted to participate in the non-traditional season when there are conflicting ATEP assignments/experiences.
5. Athletic training students who participate in intercollegiate athletics must, like all students, fulfill all the didactic and clinical program requirements before they can graduate. All such students are strongly encouraged to consult the program director
upon entering the program because effective planning is crucial to on-time graduation for these students.

6. All students are required to have at least one “equipment intensive” clinical experience (e.g. football or lacrosse). Athletic training students who participate in a fall sport will be required to a) work with lacrosse in the spring; b) return for a sixth semester in which they will be assigned to work with football; c) work with an equipment intensive sport during their high school rotation; or d) make another arrangement for an equipment intensive experience with the Program Director. Students with questions regarding this policy are encouraged to speak with the athletic training Program Director for clarification of their concerns. Each ATS athlete must complete ATS-Student Athlete Agreement (Appendix I).

Retention Policy
Once admitted into the program, athletic training students must maintain the following academic and clinical standards:

1. Maintain a minimum cumulative GPA of 3.0/4.0 in all course work.
2. Receive no grade lower than a “C-” in any Carthage College ATH course.
3. Successful completion of all required competencies and clinical proficiencies along with evidence of progression through the program.

The Program Director monitors student progression and adherence to the criterion. Any student with possible retention difficulty will meet with the Program Director, at his/her request, to discuss areas needing immediate improvement. All ATEP students meet with the Program Director during advising week to discuss their progress toward completion of the program.

Probation
Each semester the Program Director will determine each student’s compliance of the above mentioned retention policy. Students placed on probation are required to meet with the Program Director, within two weeks of notification, to determine the course of action needed to rectify the items in question. At the discretion of the Program Director, a student may be allowed to continue on probation; for a minimum of one semester, but no longer than two continuous semesters. If retention criterion is not met within the designated time, the ATS will be released from the ATEP.

Graduation Criterion
Graduation criterion entails a total of 138 credits, comprised of 56 within the Athletic Training major, as well as 82 outside of the EXSS and AT departments. Individual requirements are listed in the college catalogue.
ATEP Curriculum

Program Progression
The Carthage College ATEP emphasizes a practice-oriented education. The didactic courses are designed to teach cognitive and affective competencies providing the student with an understanding of science, theory, and technique related to the proficiencies. The practicum laboratory courses allow the student to develop the psychomotor skills needed to physically manipulate a device or perform a skill associated with the proficiencies. The clinical rotations give the student an opportunity to display their skills and knowledge in a decision-making environment, showing competency mastery through the integration of clinical proficiencies.

The curriculum is divided into three sequential levels; each encompassing three separate, but interrelated sections. The ATS will pass through each level, expanding their base of knowledge and skills, allowing them to take on additional duties and responsibilities. This sequential model ensures that the ATS is learning over time. Described below, each level consists of a didactic, practicum, and clinical rotation section.

<table>
<thead>
<tr>
<th>Level 1 —</th>
<th>Fall: ATH2190 Principles of Athletic Training; ATH2100 Practicum I; General Medical Conditions/Athletic Training Room Rotation</th>
<th>Spring: ATH 3040 Clinical Skills in Athletic Training I; ATH 3200 Practicum II; ATH4080 Administration of Athletic; UE/LE Sport Rotation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Level 2 —</td>
<td>Level 3 —</td>
</tr>
<tr>
<td></td>
<td>Fall: ATH 3033 Rehabilitation I; ATH 3070 Clinical Skills in Athletic Training II; ATH3300 Practicum III; EI/UE/LE Sport Rotation</td>
<td>Fall: ATH4600 Practicum V or ATH3510 Field Placement; EXS3720 General Medical Conditions</td>
</tr>
<tr>
<td></td>
<td>Spring: AT4044 Rehabilitation II; ATH4400 Practicum IV; Upper/Lower Extremity Sport Rotation</td>
<td>Spring: ATH4100 Pharmacology; ATH4600 Practicum V or ATH3510 Field Placement</td>
</tr>
</tbody>
</table>

Evaluation
The didactic courses are evaluated through written tests, student presentations, and written simulations. Successful completion is a minimum grade of 70%. Practicum laboratory courses utilize detailed skill evaluation forms verifying the student’s ability to perform the necessary skills. The student must show proficiency of each psychomotor skill before graduation is granted, although the student may progress to the next level with a minimum grade of 70%. Level-specific Clinical Rotation Evaluation forms evaluate the
clinical rotations. Each level is associated with specific teaching objectives with the purpose of proficiency synthesis and integration in a decision-making environment. The student will receive a minimum of three individual evaluations throughout the semester, so progress can be monitored and appropriate adjustments made. Successful completion is granted based on overall performance throughout the semester rotation. The student will not progress to the next level until the success criterion is met.

**Advising**
All ATSS meet with the Program Director during advising week each semester. Program progression will be discussed, along with clinical evaluations forms, staff ATC concerns and upcoming semester course selection. It is the responsibility of the ATS to schedule the advising appointment in a timely fashion. Sign-up sheets will be posted one week prior to advising week.

**Continued Education and Certification**
ATSS are responsible to keep their certifications in Professional Rescuer CPR and First Aid & Safety current. ATSSs should also be aware of current trends and techniques in the field of athletic training through journal reading and attending professional meetings/seminars.

**COMMUNICABLE & INFECTIOUS DISEASE POLICY**

**ATEP Requirements**
As part of the ATEP admission process, each ATS will pass a general physical examination from a licensed practicing health care provider (MD, DO, PA, NP) stating they are physically and mentally capable of performing the duties of an athletic training student. The following information will also be included in the student’s Healthcare Record.

- ATEP Physical Form
- Childhood Immunization Record (MMR, polio, DPT series)
- Annual Influenza Vaccination
- Tuberculosis Screen (every 12 months)
- 10 panel Drug Screen (upon entry into ATEP)
- Verification of the following additional vaccinations: Hepatitis B (3 dosages), Tetanus Boosters, Meningitis, Varicella

The Healthcare Record is placed in the ATS master file located in the Clinical Coordinator’s office. For Carthage College Institutional policy go to: [https://www.carthage.edu/orientation/medical-forms](https://www.carthage.edu/orientation/medical-forms).
**Technical Standards**
The technical standards set forth by the ATEP establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program’s accrediting agency (Commission on Accreditation of Athletic Training Education [CAATE]). Upon admission to the ATEP, the ATS is required to verify they understand and meet these technical standards or that they believe, with certain accommodations, they can meet the standards. A Statement of Compliance and if needed, a Request for Accommodations is to be signed by the ATS and placed in the ATS’s master file.

The ATEP Physical Exam form contains the technical standards established for the program. A licensed practicing health care provider (MD, DO, PA, NP) acknowledges the student meets these standards.

**Illness**
In the event of illness, the ATS is to contact their preceptor immediately. If she/he is unable to be reached, the Clinical Education Coordinator may be contacted. If the ATS is unable to place the call, they are to have someone else call for them. Upon ATC discretion, the ATS is to report to the school nurse for evaluation and possible referral. Under no circumstances is an ATS to report to work when ill. If an ATS is diagnosed with a communicable disease, a medical release is needed prior to their return to ATR duty. This is for the protection of the ATS and those working/using the ATR.

In case of an interruption in the progression of the ATEP due to illness or other unforeseen circumstances, the Program Director will work individually with the ATS to develop a return to ATEP activity plan.

**Health and Wellness Services**
The Health and Wellness Center is located on the second level of the Tarble Athletic and Recreation Center (TARC). A Registered Nurse and certified psychological counselor are available. Further information is available from the Dean of Students Office or the Health and Wellness Center.
CLINICAL ROTATION COMPONENT
CLINICAL ROTATION GENERAL INFORMATION

ATS Clinical Education Experience Attendance
ATSs are expected to follow all rules of ethics and conduct delineated in this handbook. If any ATS is dismissed from the clinical education experience for disciplinary behavior, his/her education in the AT Program may be terminated.

ATSs are to attend the clinical education experience at the time and facility designated by Clinical Education Coordinator. ATSs cannot miss courses to attend clinical education experiences without permission by their classroom instructor. Each clinical/lab course has a minimum and maximum hour requirement. If an ATS is short of that minimum hours the ATS will automatically receive a grade reduction for the course. Written permission from the Clinical Education Coordinator is require to exceed the maximum hour limit. All clinical education experiences must be educational in nature. ATSs will not replace professional athletic training staff or medical personnel. The ATS will not receive any monetary remuneration during this educational experience.

Clinical Rotation Schedule
All ATSs will be provided an on and off-site clinical rotation schedule at the beginning of each fall semester. In addition, a clinical rotation schedule is posted on the student message board located at the south end of the ATR. The ATS must have a minimum of one day off in every seven-day period.

Requirements for Clinical Rotation
Each ATS needs to provide a verification of TB test within the past 12 months, MMR vaccine, annual flu vaccine, Hepatitis B vaccine, negative 10-panel drug test and a criminal background check.

Curriculum
The clinical rotation provides the student an opportunity to synthesize their skills and knowledge in a decision-making environment showing skill mastery through the integration of clinical proficiencies. Progress is evaluated through preceptor mentoring and observation in the clinical rotation.

Clinical rotation experiences are contained within individual courses throughout the ATSS’ six semesters. See individual course syllabus for specific objectives. You are graded for your clinical rotation by your assigned preceptor. The grade earned is calculated into the corresponding practicum course. See course syllabus for grading criteria.

Classifications
On-site clinical rotations are categorized as the following: upper extremity, lower extremity, equipment intensive, and general medical. Off-site experiences include: high
school, physical therapy clinic, operating room, general practitioner, and orthopedic surgeon office. Preceptors include MDs, DOs, PA-Cs, NPs, ATCs and PTs. The ATS will also experience different populations including genders, various levels of risk, and protective equipment.

_It is the responsibility of the ATS to know their rotation assignment._ Clinical rotation assignments are the requirement of specific classes (see syllabi), impacting the grade the ATS is to earn. If an ATS does not report on time for their scheduled shift, the preceptor will notify the involved ATS and a memo will be placed in their ATEP file noting the event and a possible adjustment made to their grade. Disciplinary action may be taken at the discretion of the Clinical Coordinator.

Days off are to be requested in writing to the Clinical Coordinator at least one week in advance. The request does not guarantee approval. The assigned preceptor is to be informed prior to written request. If the ATS is unable to report for their shift due to an unforeseen reason, they must immediately notify the assigned preceptor.

The ATSs are not allowed to “switch” clinical assignments without prior approval of the Clinical Education Coordinator.

**Length of Clinical Rotation**
Each on-site clinical rotation lasts seven weeks. Within these rotations, off-site experiences will occur. Minimum and maximum hours are dictated by ATS level—Level I 10-15 hr/wk; Level II 15-20 hr/wk; and Level III 20-25 hr/wk. The Clinical Education Coordinator must give written permission for deviation from the hours listed above.

Off-site clinical rotations are ATS Level specific: Level I—local high school (3), orthopedic office (1), ATC Physician Extender (2); Level II—orthopedic surgeon office (2), operating room (2), ATC Physician Extender/NP (1); Level III—general practitioner (2), operating room (0-1); PT clinic & local high school (one semester).

Level I – II off-site rotations are usually half day rotations. It is expected that when a class conflict exists with the off-site rotation assignment, communication with that professor will be made at least 2 weeks in advance to notify them of your absence. Each ATS will complete daily journal logs summarizing their experiences for each of their off-site placements. ATs will meet with their peers and Clinical Education Coordinator weekly to have a group discussion regarding each ATS’s experience.

Level III off-site rotations are arranged with the assigned preceptor (20-25hr/wk). Bi-weekly group peer meetings will allow the ATSs to share their experiences, discuss questions and comments.

See Appendix E for clinical progression and requirements.
**Warning, Suspension, and Dismissal**

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

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

2. After a second unexcused absence, the Preceptor will notify the ATS that they will be contacting the Clinical Education Coordinator to discuss the incident and come to a resolution. A reduction in course grade may be issued at the discretion of the Clinical Education Coordinator.

3. After a third unexcused absence, a conference will be scheduled between the ATS, Preceptor, Clinical Education Coordinator, and Program Director to discuss all incidents. A third unexcused absence may result in the ATS being removed from the site resulting in failure of the clinical rotation course.

**CLINICAL ROTATION EXPERIENCE**

**ATS-Student Athlete**

Participating in athletics does not exempt the ATS from the clinical portion of the ATEP curriculum. All components of the clinical portion of your education are mandatory. The exception for ATS-athlete is the timing of this portion of the requirement. The expectation of familiarity, repetition of skills and practice remains consistent for ATS-athletes and ATS-nonathletes.

The ATS-athlete is required to:

- Attend scheduled off-site clinical rotations & off-site peer discussion group
- Attend all on-site Physician Presentations & present injury cases
- Gain experience through ATR interactions that will support didactic learning objectives

You will be assigned preceptor during your season. You will be responsible to develop a plan with the preceptor to manage your time allowing for sufficient skill acquisition and practice. This experience is a portion of your practicum lab course grade.
ATS Clinical Rotation Procedure

Prior to or on the ATS’s first day at a new clinical rotation, the ATS must complete an orientation with their Preceptor to review expectations, HIPPA/FERPA, EAP/BBP and any other relevant policies at that site. Completion of this orientation will be annotated on the Clinical Rotation Orientation form.

If snow or flooding or any other act of nature prevents an ATS from attending the clinical education experience, the ATS will arrange to make up the clinical time with his/her instructor as necessary. In the event that a sudden conflict, illness, or emergency arises, the ATS must (i.e., death in the immediate family, hospitalization) contact the Preceptor as soon as possible.

ATSs are responsible to communicate with the Preceptor on a daily basis regarding the hours of operation for the Preceptor related to the assigned clinical education experience. The ATS and Preceptor must work out an attendance schedule to meet the minimum number of hours required by the enrolled practicum course. ATSs are expected to be present at all designated hours. In the event an ATS needs to miss his/her assigned clinical time, arrangements should be made with Preceptor prior to missing the clinical time. Unexcused absences and tardiness to clinical education experiences will be reflected in the ATS’s final clinical evaluation by the Preceptor and will negatively impact the ATS’s grade in their clinical application course.

Clinical Hour Scheduling & Log

Prior to or on the first day of the new clinical rotation, the ATS will give the preceptor their Clinical Hour Log (Appendix D) with all their assigned off-site experiences listed. It is at this time the ATS’s seven week clinical hours are scheduled. Throughout the clinical education experience the ATS must document the number of hours directly supervised by a Preceptor on the Clinical Hour Log. These logs will need to be signed by their assigned Preceptor weekly. The hours can be rounded to the nearest 15 minutes. The following hours cannot be included when documenting hours on the Clinical Hour Log:

<table>
<thead>
<tr>
<th>Hours NOT INCLUDED in clinical hour log</th>
<th>Hours to INCLUDE in clinical hour log</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Time spent traveling with a team.</td>
<td>- Onsite preceptor supervised experiences</td>
</tr>
<tr>
<td>- Academic hours.</td>
<td>- Offsite preceptor supervised experiences</td>
</tr>
<tr>
<td>- Unsupervised hours</td>
<td>- Onsite MD presentations</td>
</tr>
</tbody>
</table>

The following are the minimum and maximum clinical rotation hours are based on ATS level:

- Level I (sophomore)—10-15 hr/wk
- Level II (junior)—15-20 hr/wk
- Level III (senior)—20-25 hr/wk

The total weekly ATS clinical hours include both the on-site AND off-site experiences. It is imperative that total weekly hours are discussed at the beginning of the rotation when the ATS hands in the Clinical Hours Log.
Completed sheets are turned into the Clinical Coordinator for placement into the student’s program file. New log sheets can be found in the front of the log book. If a low supply of these sheets is found, report it to the Clinical Education Coordinator.

**Documentation & Feedback**

Each ATS will attend weekly group clinical experience meetings with the Clinical Coordinator. The ATS will journal his/her experience on an Off-Site Clinical Rotation Journal (Appendix F) and share his/her experience with their peers. These journals will be placed in the ATS clinical education file.

Each Level III ATS will meet biweekly with their peers and the Clinical Education Coordinator to review their experiences and share comments on their respective placement. The ATS will journal his/her experience in a notebook.

**GRAND ROUNDS PHYSICIAN PRESENTATIONS**

These educational experiences are part of the ATEP curriculum therefore, attendance is mandatory for all ATSs. There are two forms of physician presentation; the athlete is physically in attendance and the ATS will present his/her specific case or the ATS will present evidence found based on a PICO question for the physician to shared their clinical experience. See Appendix J.

**Criterion for patient presentation**

The ATS presents a current patient that he/she has done the initial evaluation. Areas of focus include:
--Subjective and objective information presented in appropriate format and sequence
--Differential diagnosis: have rationale to support your diagnoses
--State a treatment plan
--Do not state lack of findings unless essential to the diagnosis
--Confirm findings with patient prior to presentation
--Review case with preceptor prior to presentation
--Do not read off documentation...know your patient
--Confirm physician diagnosis and treatment plan
--Verify compliance of follow through

**Criterion for PICO presentation**

The ATS presents evidence found from a PICO search based on a current patient. Format of presentation includes:
-PICO question
-inclusion/exclusion of research criterion
-findings
-patient outcome, if implemented
-discussion of MD’s clinical experiences
These presentations will be assigned by your preceptor and evaluated by the Clinical Coordinator. Afterwards, there will be a discussion with the ATS pointing out presentation strengths and areas needing improvement.

The schedule can be found on the Carthage ATR Google Calendar. ATSs will keep a journal noting what they learned from each of these experiences. Classroom discussions will be held periodically to share ATSs’ thoughts.

Each ATS will present an athlete case to a Carthage Team Physician during the on-site visits—Level I (1x), Level II (3x), Level III (1x). Professional attire is required for the ATS presenters.

ATHLETIC TRAINING STUDENTS RESPONSIBILITIES

Expectations
The clinical experience provides the ATS with opportunities to practice and integrate the cognitive learning with the associated psychomotor skills. The ATS is expected to satisfy the clinical rotation component as part of the current course load.

Each ATS will attend a fall clinical rotation review session. This will give the ATS the opportunity to review the ATEP and Clinical Education Manual and ask any questions they may have regarding the policies and procedures. The ATS will read and sign a Statement of Compliance & Confidentiality (Appendix G). This is returned to the Clinical Education Coordinator and placed in the ATS academic file.

Absence or Tardiness
If illness or emergency delays or results in an absence for a scheduled clinical rotation the ATS must call as soon as possible to inform the Clinical Preceptor and Clinical Coordinator.

Professionalism
ATSs are expected to act in a professional manner during their clinical rotations. They are to follow the NATA Code of Ethics. Confidentiality is mandatory for all that is seen and heard during the clinical rotation. ATSs represent Carthage College and the profession of athletic training.

Any breach of the Code of Ethics or lack of professionalism will result in a strict penalty. The Clinical Coordinator will determine the penalty on a case-by-case basis.

Attire
The ATS will dress professional adjusting specific attire to the clinical rotation site. On-site the ATS will wear a red polo that is purchased at the time of ATEP acceptance.
Khaki pants and polo shirts are to be worn in the physical therapy clinic and the high school setting. Dress pants and button shirts are worn in the medical offices. Appropriate footwork does not include sandals.

**ATS Grievance**

If the ATS has a grievance related to the clinical rotation site or Clinical Preceptor a meeting with the Clinical Education Coordinator should be scheduled to rectify the situation.

**HEALTH INSURANCE PRIVACY & ACCOUNTABILITY ACT (HIPAA) AND FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)**

HIPAA regulates how a patient's private health information (PHI) can be shared protecting medical records and other individually identifiable health information. FERPA protects the privacy of student education records (including athlete files used in the athletic training room). The Act applies to any school that receives federal funds. Do not discuss any clinical site activities (injuries, treatments, doctor’s reports).

**Confidentiality**

In dealing with people, common sense and following the HIPAA/FERPA regulations must be your guideline. Always stay within the limits of your position and knowledge. Do not discuss any clinical site activities (injuries, treatments, doctor's reports, etc.) with others. The confidentiality of the medical atmosphere is paramount. **You may not release information to anyone regarding an athlete. This includes the health status of an athlete, open the athlete's file for inspection, copy or reproduce any reports for anyone but the athlete, pass authorized information by telephone or use X-ray or test results for demonstration or instruction without prior, written permission.**

These guidelines must be adhered to strictly.

All athletic training personnel will respect client confidentiality. Any medical information regarding patients is not to be shared with anyone. This includes, but is not limited to, other patients, coaches, parents, or students. Any breach of client confidentiality will be penalized by immediate probation and a possibility of release from the ATEP.

**CLINICAL ROTATION GOALS & EVALUATIONS**

**Beginning of Clinical Rotation**

At the beginning of each seven-week rotation, the ATS will collaborate with their preceptor to agree on a minimum of one clinical rotation goal and one PICO question. These goals are to enhance the academic learning objectives of their current AT courses. The PICO question will be formulated in the practicum course. It is suggested that the ATS bring course syllabi to preceptor meeting. See Appendix C for evaluation.
The evaluation is two part:

--at the beginning of the rotation to list goals (due to Clinical Coordinator by Friday of 1st week). At least one goal must be a PICO question to be researched.

--at the end of the rotation to evaluate completion of goals and ATS professional growth assessment (ATS-preceptor meeting completed and due to Clinical Coordinator by Friday of 7th week)

Please use a SMART format for all goals:

S=specific M=measurable A=attainable R=related to academic objective T=time based.

SMART goals:

Specific: Initial injury shoulder SOAP evaluation

Measurable: One acute & two chronic

Attainable: Does your rotation provide that many opportunities for shoulder evaluations?

Related: Have they covered shoulder? Blue sheet completed? Is this a blue sheet opportunity?

Time based: By end of 7 week rotation (date) or are you spacing goals throughout the 7 weeks?

Example of past goals: ATS will do more shoulder evals

**Expected** SMART goal: ATS will complete one initial SOAP evaluation of a chronic shoulder injury (including short and long term goals) by 10/1/16. The ATS will follow pt through RTP or until the end of their rotation. ATS will follow EBM using the PICO format.

Example of past goals: Feel more comfortable doing evals.

**Expected** SMART goal: ATS will approach and initiate three athlete interactions each day in the ATR. They will rate their comfort and confidence level at the beginning of their rotation through the *ATS Confidence Survey*. By 10/23/16 the ATS will score their comfort and confidence level 5 points higher (on a 1-10 Likert scale) than the first day of their rotation. ATS beginning level scored at 40/60.

**End of Clinical Rotation**

The Preceptor will complete the 2nd part of the ATS Clinical Rotation Evaluation. The Preceptor will evaluate the completion of ATS goals and their professional growth assessment. Based on the criterion in evaluation form, the Preceptor will annotate the grade earned by ATS. This is due to the Clinical Education Coordinator by the Friday of the 7th week.
Clinical Preceptor Evaluation
The ATS will complete a Preceptor Evaluation (Appendix B). It is important that the ATS considers what they are evaluating. This is NOT a course evaluation…it is an evaluation of the clinical portion of their education. The ATSs are to focus on the clinical rotation goals and the mentorship of their preceptor.

A Likert scale of 1 – 10 is used to assess the preceptors. Any score 1,2,3 would indicate below average levels; a score of 9 or 10 suggests a high level of preceptorship. All these scores will need comments to support the score.

CONTACT INFORMATION

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APPENDIX A

Clinical Rotation Proficiency Evaluations
ATHLETIC TRAINING STUDENT

CLINICAL ROTATION GOALS AND EVALUATION

ATS:___________________________________________________________
Preceptor:____________________________________
Year: 20_____        Rotation:  Fall  Spring   Practicum
Course:___________________________
Location/Sport:____________________________________________________
Experience: Protective  UE LE  Gen Med

Primary ATS Learning Style:
________________________________________________________________________________________

THIS SECTION IS TO BE COMPLETED AT THE BEGINNING OF THE CLINICAL
ROTATION.

Confirm Review:   ☐ Expectations  ☐ HIPPA/FERPA  ☐ EAP/BBP

The preceptor and ATS will collaborate to agree on a minimum of one clinical rotation goal and one
PICO question that enhance the ATS's academic learning. If needed, ATS should bring course syllabi
to the goal setting meeting. **All goals should follow the SMART format (Specific, Measurable,
Attainable, Realistic, Time-based)**

1._______________________________________________________________________________________________________
   _______________________________________________________________________________________________________

2._______________________________________________________________________________________________________
   _______________________________________________________________________________________________________

PICO:____________________________________________________________________________________________________
   _______________________________________________________________________________________________________

I have discussed the above goals with my preceptor and agree to work towards accomplishing
these by the end of this clinical rotation. Completion of these goals are a component of my
practicum course grade. I have reviewed clinical rotation expectations, HIPPA/FERPA, and
EAP/BBP with my preceptor and understand the need for my compliance.

ATS Signature: _________________________  Date:__________________________
**THIS SECTION IS TO BE COMPLETED AT THE END OF THE CLINICAL ROTATION**

Based on your preceptor’s observations and experiences, he/she has graded you on the following scale:

1 = Never    5=Always

**Professionalism**

Punctual for all assigned clinical hours and dressed professionally

1  2  3  4  5

Adheres to policies and procedures

1  2  3  4  5

Maintains patient confidentiality

1  2  3  4  5

Demonstrates time management skills

1  2  3  4  5

Demonstrates the ability to work cooperatively with personnel of all levels

1  2  3  4  5

**Clinical Skill Improvement**

Receives and responses to constructive criticism while conveying respect for preceptor’s opinion

1  2  3  4  5

Demonstrates an eagerness to learn and improve skills

1  2  3  4  5

Takes an active role in learning and displays ownership

1  2  3  4  5

Accepts responsibility for actions

1  2  3  4  5
**Communication**

Communicates in an organized and logical manner

1  2   3   4
5

Exhibits confidence with skills and knowledge

1  2   3   4
5

Effectively communicates ideas and information in writing using professional terminology

1  2   3   4
5

Recognizes the effects of nonverbal communication

1  2   3   4
5

Comments on the above scoring and additional insight:

_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

ATS Strengths:

_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

ATS Areas for Improvement:

_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

**Preceptor Grading**

Professionalism, skill improvement and communication will be tabulated into the base grade earned. The quality of the PICO and Clinical Rotation Goals will be considered. Any warnings or disregard of the ATEP Manual guidelines is calculated as a deduction of this grade.

Grade: _____

**Clinical Rotation Goals**

Each ATS has a minimum of one goal listed to accomplish by the end of the rotation. For each goal not accomplished, a one grade reduction is taken.

**Y/N Deduction(s)**
**PICO**
One PICO is chosen by the ATS at the beginning of the rotation. The ATS is to submit a summary of their PICO including research specifics and findings. If this is not completed, a one grade reduction is taken.

**Y/N Deduction**

Final Grade: _____  Preceptor Signature:_____________________________

*I have reviewed this evaluation with my preceptor and have no further questions regarding its content.*

ATS Signature:_____________________________  Date:_________________________
APPENDIX B

Clinical Preceptor Evaluation
ATHLETIC TRAINING PRECEPTOR EVALUATION

Preceptor: ___________________________  Rotation Date: _______________

What percent of your clinical rotation time was spent on (needs to add up to 100%):

_____% One-on-one ATC teaching/mentoring
_____% Autonomous athletic training functions
_____% Observation (practice/games/ATC)
_____% Underclassmen mentoring/Peer learning
_____% Other tasks (give examples) ________________________________
_____% Idle time

IN THE FOLLOWING SECTION ANY 1, 2, 3 OR 9, 10 MUST BE ACCOMPANIED BY EXPLANATIONS

1 = Strongly Disagree  5 = Neither Disagree or Agree  10 = Strongly agree

Professionalism

The Preceptor:

Demonstrates self-confidence

1 2 3 4 5 6 7 8 9 10

______________________________________________________________

______________________________________________________________

Is a positive role model for athletic training students

1 2 3 4 5 6 7 8 9 10

______________________________________________________________

Respects the role and responsibilities of other health care professionals

1 2 3 4 5 6 7 8 9 10

______________________________________________________________
Assists students in understanding their professional responsibilities

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

Communication Skills
The Preceptor:
Clearly outlined goals for this clinical rotation

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

Is clear and specific when communicating to the students

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

Provides feedback in a timely fashion

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

Corrects the student tactfully (appropriate time and place)

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
Encourages student to ask questions and is positive in responding

1  2  3  4  5  6  7  8  9  10

Mentoring Abilities

The Preceptor:

Took advantage of teachable moments

1  2  3  4  5  6  7  8  9  10

Related classroom information to clinical application

1  2  3  4  5  6  7  8  9  10

Provides the freedom to practice/learn a skill with guidance to limit/protect athlete

1  2  3  4  5  6  7  8  9  10

Provides positive reinforcement for student accomplishment

1  2  3  4  5  6  7  8  9  10

Has the ability to relate information in a way that enhanced my clinical experience
Clinical environment

The equipment and supplies were adequate to meet the objectives of the clinical experience

There was ample time to meet the goals of the rotation

List two of your clinical rotation goals and if you successfully accomplished them.

What are the preceptor’s strengths?
Where can the preceptor use improvement?

____________________________________________________________

____________________________________________________________

____________________________________________________________

Additional comments on this clinical rotation:

____________________________________________________________

____________________________________________________________

____________________________________________________________

List two strengths and weaknesses of the Carthage College ATEP. Have these changed since your last preceptor evaluation?

____________________________________________________________

____________________________________________________________

____________________________________________________________

If you could change one thing about your ATEP experience what would it be?

____________________________________________________________

____________________________________________________________

THANK YOU FOR YOUR INPUT
ATHLETIC TRAINING STUDENT

CLINICAL ROTATION GOALS AND EVALUATION

ATS: ___________________________ Preceptor: ___________________________

Year: 20_____ Rotation: Fall Spring Practicum
Course: _______________________

Location/Sport: ___________________ Experience: Protective UE LE Gen Med

Primary ATS Learning Style:
__________________________________________________________________________

__________________________________________________________________________

THIS SECTION IS TO BE COMPLETED AT THE BEGINNING OF THE CLINICAL ROTATION.

Confirm Review:  ☐ Expectations  ☐ HIPPA/FERPA  ☐ EAP/BBP

The preceptor and ATS will collaborate to agree on a minimum of one clinical rotation goal and one PICO question that enhance the ATS's academic learning. If needed, ATS should bring course syllabi to the goal setting meeting. All goals should follow the SMART format (Specific, Measurable, Attainable, Realistic, Time-based)

1. __________________________________________________________________________
   __________________________________________________________________________

2. __________________________________________________________________________
   __________________________________________________________________________

   PICO: _________________________________________________________________________
   __________________________________________________________________________

I have discussed the above goals with my preceptor and agree to work towards accomplishing these by the end of this clinical rotation. Completion of these goals are a component of my practicum course grade. I have reviewed clinical rotation expectations, HIPPA/FERPA, and EAP/BBP with my preceptor and understand the need for my compliance.

ATS Signature: ___________________________ Date: ___________________________
Based on your preceptor’s observations and experiences, he/she has graded you on the following scale:
1 = Never    5=Always

**Professionalism**

Punctual for all assigned clinical hours and dressed professionally
1  2  3  4
5

Adheres to policies and procedures
1  2  3  4
5

Maintains patient confidentiality
1  2  3  4
5

Demonstrates time management skills
1  2  3  4
5

Demonstrates the ability to work cooperatively with personnel of all levels
1  2  3  4
5

**Clinical Skill Improvement**

Receives and responses to constructive criticism while conveying respect for preceptor’s opinion
1  2  3  4
5

Demonstrates an eagerness to learn and improve skills
1  2  3  4
5

Takes an active role in learning and displays ownership
1  2  3  4
5

Accepts responsibility for actions
1  2  3  4
5
**Communication**

Communicates in an organized and logical manner

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Exhibits confidence with skills and knowledge

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Effectively communicates ideas and information in writing using professional terminology

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Recognizes the effects of nonverbal communication

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Comments on the above scoring and additional insight:

_________________________________________________________________________________________________________

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ATS Strengths:

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

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ATS Areas for Improvement:

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

**Preceptor Grading**

Professionalism, skill improvement and communication will be tabulated into the base grade earned. The quality of the PICO and Clinical Rotation Goals will be considered. Any warnings or disregard of the ATEP Manual guidelines is calculated as a deduction of this grade.

Grade: ____

**Clinical Rotation Goals**

Each ATS has a minimum of one goal listed to accomplish by the end of the rotation. For each goal not accomplished, a one grade reduction is taken.

Y/N Deduction(s)
**PICO**
One PICO is chosen by the ATS at the beginning of the rotation. The ATS is to submit a summary of their PICO including research specifics and findings. If this is not completed, a one grade reduction is taken.

**Y/N Deduction**

Final Grade: _____  
Preceptor Signature:______________________________

I have reviewed this evaluation with my preceptor and have no further questions regarding its content.

ATS Signature:______________________________  
Date:_______________________________
APPENDIX D

Clinical Rotation Hour Log
# 2019-2020 ATS CLINICAL ROTATION SCHEDULE LOG

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**THIS FORM IS DUE TO YOUR PRECEPTOR BEFORE/ON YOUR 1ST DAY OF ROTATION**

Preceptor Sign-off

Signatures:

- Preceptor
- Resident
- Program Director

Date: 

Signature: 

Preceptor

Date: 

Signature: 

Resident

Date: 

Signature: 

Program Director

Date: 

Signature:
# CLINICAL PROGRESSION & REQUIREMENTS

<table>
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<tr>
<th>SEMESTER</th>
<th>CLINICAL EXPERIENCE</th>
<th>REQUIREMENTS</th>
<th>ELIGIBILITY</th>
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| PRE-ADMISSION | The first semester provides students interested in athletic training the opportunity to observe the professional role of the athletic trainer in three activities; clinical athletic training room, athletic practice and athletic competition. The student has the flexibility to choose any AT supervised event during the seven week ATH1020 Intro to AT course. The experiences are documented through an observation journal. Each of the three activities must be attended for successful course completion. | • Attend a practice, competition and clinical athletic training room experience.  
• Log each experience through an observation journal summary. | • Enrolled in ATH1020 Introduction to Athletic Training  
• Completion of American Red Cross Bloodborne Pathogen training |
| Level 1-   | GOALS:  
1. Master the skills associated with ATH2100 Practicum I; general medical, first aid, emergency care, equipment fitting, environmental condition, and lower leg/foot/ankle evaluation. This is provided by a placement in the college athletic training room setting with a preceptor.  
2. Gain insight into the professional role of the AT in the high school setting.  
3. Understand the need for effective communication between healthcare professionals. | • Complete the required 10-15 hr/wk with assigned preceptor.  
• Attend three off-site high school rotations and submit Off-site Observation Log  
• Attend Off-site Peer Discussion group to share experience with peers.  
• Attend all MD Presentation meetings.  
• CIP “blue sheet” testing for ankle, foot and lower leg; environmental conditions; equipment selection and fitting; and emergency care.  
• Review and completion of ATS Clinical Rotation Goals & Evaluation forms. | • Admission into ATEP  
• Completion of background check, immunization documentation, physical exam, confirmation of technical standards.  
• Annual flu vaccine and TB verification  
• Signed Statement of Compliance  
• Concurrent enrollment in ATH2100 & ATH2190 |
| FALL       |                                                                                                                                                    |                                                                             |                                                                                                                                                                                             |
| Level 1-   | GOALS:  
1. In addition to the areas listed above, master the skills associated with ATH3200 Practicum II; evaluation of head/neck, pelvis/thigh, knee and shoulder. This placement is with a preceptor covering two of the following categories—upper extremity, lower extremity and/or equipment intensive sport.  
2. Gain insight into the professional role of the AT in the orthopedic physician’s office.  
3. Acquire communication skills needed to collaborate with team physicians and other medical health professionals.  
4. Practice evidence based medicine. | • Complete the required 10-15 hr/wk with assigned preceptors.  
• Attend two AT physician extender rotations and minimum of one orthopedic surgeon clinic and submit Off-site Observation Log  
• Attend Off-site Peer Discussion group to share experience with peers.  
• Attend all MD Presentation meetings and present 1 case and 1 PICO to physician.  
• CIP “blue sheet” testing for head/neck, pelvis/thigh, knee and shoulder.  
• Review and completion of ATS Clinical Rotation Goals & Evaluation forms. | • Successful completion of ATH2100 & ATH2190  
• Concurrently enrollment in ATH3040 & ATH3200  
• Successful completion of American Red Cross CPR for Healthcare Professionals course |  
| SPRING     |                                                                                                                                                    |                                                                             |                                                                                                                                                                                             |
| Level 2 — FALL | GOALS: | • Complete the required 15-20 hr/wk with assigned preceptors.  
• Attend one operating room experience and two orthopedic physician clinics; and submit Off-site Observation Log  
• Biweekly rehab placement  
• Attend Off-site Peer Discussion group to share experience with peers.  
• Attend all MD Presentation meetings and present 2 case and 1 PICO to physician.  
• CIP "blue sheet" testing for therapeutic modalities and evaluation of face, spine, elbow/wrist/hand.  
• Review and completion of ATS Clinical Rotation Goals & Evaluation forms. |
| Level 2 — SPRING | GOALS: | • Complete the required 15-20 hr/wk with assigned preceptors.  
• Attend one operating room and one AT physician extender experience. Submit Off-site Observation Log  
• Biweekly rehab placement  
• Attend Off-site Peer Discussion group to share experience with peers.  
• Attend all MD Presentation meetings and present 2 case and 1 PICO to physician.  
• CIP "blue sheet" testing for rehabilitative skills and strength/condition program  
• Review and completion of ATS Clinical Rotation Goals & Evaluation forms. |
| Level 3 — FALL/SPRING | GOALS: | • Complete the required 20-25 hr/wk with assigned preceptors.  
• Attend a minimum of two general practitioner clinics. Submit Off-site Observation Log  
• Attend Off-site Peer Discussion group to share experience with peers.  
• Attend biweekly Field Placement Peer Discussion meeting.  
• Attend all MD Presentation meetings and present 1 case/PICO to physician.  
• CIP "blue sheet" testing for mental health and nutrition.  
• Review and completion of ATS Clinical Rotation Goals & Evaluation forms. |

1. In addition to the areas listed above, master the skills associated with ATH3070 and ATH3033; evidence based use of modalities, foundational rehabilitation techniques and evaluation of the face, spine and elbow/wrist/hand. This placement is with a preceptor covering an equipment intensive sport AND upper or lower extremity sport.

2. Gain a greater appreciation of anatomy and surgical techniques through surgical observation.

3. Acquire communication skills needed to collaborate with team physicians and other medical health professionals.

4. Practice evidence based medicine.

1. In addition to the areas listed above, master the skills associated with ATH4400 and ATH4044; manual therapies, gait assessment, strength/conditioning programs and goal setting. This placement is with a preceptor covering an equipment intensive sport, upper or lower extremity sport.

2. Gain a greater appreciation of anatomy and surgical techniques through surgical observation.

3. Acquire communication skills needed to collaborate with team physicians and other medical health professionals.

4. Practice evidence based medicine.

1. In addition to the areas listed above, master the skills associated with ATH4100, ATH4600 and EXS3720; mental health, pharmacology, and nutrition. This placement is with a preceptor covering a general medical rotation.

2. Experience autonomy through a preceptor-supervised field placement in a high school and physical therapy setting.

3. Acquire communication skills needed to collaborate with team physicians and other medical health professionals.

4. Practice evidence based medicine.

Successful completion of ATH3040 & ATH3200  
Concurrently enrollment in ATH3033, ATH3300 & ATH3070  
Annual flu vaccine and TB verification  
Completion of American Red Cross Bloodborne Pathogen training  
Signed Statement of Compliance
APPENDIX F

Off-site Journal Log & Orientation Form
Preceptor/ ATS Expectations

HIPAA/FERPA Review

EAP/BBP Review

Pre-session Reflection: What is the purpose of the education session? What do you hope to learn through participating in the education session: about the topic? About the team?

Reflection Question #1: Who was involved?

Reflection Question #2: What was the value in learning with other professionals? What were the benefits of and challenges to learn together in this experience?

Reflection Question #3: What did you learn about your professional role and the role of others in the context of the session?

Reflection Question #4: What could have been different during this session to enable additional interprofessional learning about, from and with each other?

Reflection Question #5: How will you apply what you learned today in the future?

ATS: ____________________________ Grade Experience: _______ (1-100)
APPENDIX G

Statement of Understanding & Compliance
STATEMENT OF COMPLIANCE & CONFIDENTIALITY

I have read the Carthage College Athletic Training Education & Clinical Education Manual and agree to follow the procedures as outlined in the document. I fully understand that any deviation from these procedures may result in disciplinary action or removal from the Carthage College Athletic Training Program.

All athletic training students are bound to the NATA Code of Ethics when working with athletes. All students are specifically reminded that Principle 1 section 1.3 of the Code of Ethics states the following:

Members shall preserve the confidentiality of privileged information and shall not release such information to a third party not involved in the patient’s care unless the person consents to such release or release is permitted or required by law.

A student’s signature on this form indicates that he/she has read this document in its entirety. The student agrees to abide by all the information set forth in this manual and in the NATA Code of Ethics.

____________________________________    ______________________________________    __________20__
Print Student Name   Student Signature      Date
APPENDIX H

ATS – Student Athlete Agreement
ATS-Student Athlete Agreement

Participating in athletics does not exempt the ATS from the clinical portion of the ATEP curriculum. All components of the clinical portion of your education are mandatory. The exception for ATS-athlete is the timing of this portion of the requirement. The expectation of familiarity, repetition of skills and practice remains consistent for ATS-athletes and ATS-nonathletes.

The ATS-athlete is required to:

- Attend scheduled off-site clinical rotations & off-site peer discussion group
- Attend all on-site Physician Presentations & present (3) cases
- Gain experience through ATR interactions that will support didactic learning objectives

You will not be assigned an onsite rotation during your competition season. You will be responsible to manage your time allowing for sufficient skill acquisition and practice.

I, ____________________________________________________________, have read and understand the above ATEP explanation and agree to abide by this policy. The inability to manage the demands of both academics and athletics may result in failure to complete the requirements of the coursework and I accept the consequences that may result.

_______________________________________________________________________    _____________________,20___
Signature        Date
APPENDIX I

Grand Rounds Presentation Summary
GRAND ROUNDS PRESENTATION SUMMARY

ATS: ___________________________ PRECEPTOR: _______________________ DATE: ____________

PHYSICIAN: ___________________________ INJURY: ______________________________________

INITIAL SOAP  PROGRESS/FOLLOWUP  PICO CASE
(ATS’s previous presentation)  (see other side)

Case related questions for physician.

1. ________________________________________________________________

2. ________________________________________________________________

Differential diagnosis:
_____________________________________________________________________________________

Anticipated treatment plan:
_____________________________________________________________________________________

Preceptor verification signature: ____________________________________

_____________________________________________________________________________________

Case presentation:
Comprehensive Yes No
N/A
Accurate/error free documentation Yes No
N/A
Ancillary documentation on-hand for physician to review Yes No
N/A
Professional Yes No
N/A
Did ATS verify pt comprehension? Yes No
N/A
Did ATS follow-up to ensure pt compliance with case outcome? Yes No
N/A

Case outcome:
RTP   Rehab   Limited Activity   Diagnostic Testing   Surgical   Follow-up
Other
PICO CASE PRESENTATION

PICO Question:

Sources (Cite Properly):

Summarize your PICO findings:

Preceptor verification signature
COMPLETE AFTER PHYSICIAN DISCUSSION

What additional expert input did you receive from the physician?

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________