



Athletic Training Program Student Handbook 2019-2020

This handbook outlines the rules and regulations that you as a student in the Athletic Training Program at West Liberty University must follow. As an Athletic Training Student (ATS), you are responsible for abiding by these rules and regulations as well as other rules established by the university. Every attempt will be made to adhere to these rules consistently. In extenuating circumstances, the program director and/or clinical education coordinator reserve the right to make decisions on an individual basis.

A Note to You as an Athletic Training Student:

After reading and signing the Student Policies Agreement form at the end of the document, you will have agreed to abide by the Code of Ethics (Section J) that governs the behavior of those working in this profession. This is a serious responsibility that you assume as a student in this program. While the contents of this handbook give you specific information about your conduct and behavior as a student, you should always remember that the Code of Ethics is your guide while you are preparing to become an athletic training professional. (See section on Athletic Training Code of Ethics)

Good Luck and we are pleased to have you in the Athletic Training Program.

Dr. Hanna

STUDENT HANDBOOK

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A. WLU Athletic Training Program Mission Statement

The Mission of the WLU ATP is to graduate a student that demonstrates effective communication and ethical decision making while always considering patient-centered values. In addition, the ability to practice and apply evidence-based medicine in patient care is vital. As well as providing a culture of peer mentoring and leadership that builds knowledge, strengthens clinical skill application, and facilitates an environment of continuous learning, while constantly advocating for the profession of athletic training in various health care settings.

B. WLU Athletic Training Program Outcomes

Objective #1: Students will demonstrate the ability to provide quality healthcare to a diverse patient population in various healthcare settings.

Objective #2: Students will understand the roles and responsibility of an Athletic Trainer across a variety of health care settings.

Objective #3: Students will develop the knowledge and skills necessary to interpret current evidence-based research and apply it to clinical practice.

Objective #4: Students will be able to communicate effectively to a variety people in various health care professions.

C. Progression in Program

1. Grade-Point Requirements

Successful completion of all required courses is necessary for you as a student in the Athletic Training major to progress in the program. You are expected to meet and maintain at least a 2.8 overall University GPA for all Core courses.

You must also earn at least a C or better in ALL athletic training program courses, as well as in other specified courses from the athletic training program. Violations of this policy will be dealt with on a case-by-case basis by the program director.

2. Student Pre-Clinical Physicals

All accepted athletic training program students are required to have submitted a completed “Mandatory Health form” and updated immunization records to the University Health Center prior to the return of the sophomore year. Failure to do so will delay the students’ participation in their clinical rotations. Further proof of health records or additional requirements might be expected for off-campus clinical rotations. This is dependent upon and individualized to each site, and students will be expected to comply.

3. Clinical Rotations

(Six Clinical Practicums over six semesters described below) All students are required to be familiar with the WLU Athletic Training Policies & Procedures Manual, Emergency Action Plan at each site as well as the NCAA Sports Medicine Handbook if indicated.

a. AT 200 Athletic Training Clinical Practicum I – 1 hour

This clinical rotation allows for the sophomore level student to gain experience in the profession of Athletic Training outside of the classroom and in the clinical setting. Under the supervision of a preceptor, the student will be challenged to transfer knowledge learned didactically and apply it in the clinical setting. Students will be expected to begin to understand and demonstrate the knowledge and skills identified in the Standards as designated by the CAATE (Commission on Accreditation of Athletic Training Education) and its eight content areas: Evidence-Based Practice; Prevention and Health Promotion; Clinical Examination and Diagnosis; Acute Care of Injury and Illness; Therapeutic Interventions; Psychosocial Strategies and Referral; Healthcare Administration; and Professional Development and Responsibility. A minimum of 75 clinical hours is required to earn credit for the class.

Prerequisites: AT 100: minimum grade “B”, AT 115: minimum grade “B.”

b. AT 205 Athletic Training Clinical Practicum II– 1 hour

This clinical rotation allows for the sophomore level student to gain experience in the profession of Athletic Training outside of the classroom and in the clinical setting. Under the supervision of a preceptor, the student will be challenged to transfer knowledge learned didactically and apply it in the clinical setting as well as build on current information learned in the first clinical practicum. Students will be expected to begin to understand and demonstrate the knowledge and skills identified in the Standards as designated by the CAATE (Commission on Accreditation of Athletic Training Education) and its eight content areas: Evidence-Based Practice; Prevention and Health Promotion; Clinical Examination and Diagnosis; Acute Care of Injury and Illness; Therapeutic Interventions; Psychosocial Strategies and Referral; Healthcare

Administration; and Professional Development and Responsibility. A minimum of 75 clinical hours is required to earn credit for the class.

Prerequisites: AT 200: minimum grade “C.”

c. AT 300: Athletic Training Clinical Practicum III – 2 hours

Building on the first year of clinical experiences, students will continue to be challenged to transfer knowledge gained in the classroom and apply it in the clinical settings. Under the supervision of a preceptor, the students will be expected to demonstrate the knowledge and skills identified in the Standards as designated by the CAATE (Commission on Accreditation of Athletic Training Education) and its eight content areas: Evidence-Based Practice; Prevention and Health Promotion; Clinical Examination and Diagnosis; Acute Care of Injury and Illness; Therapeutic Interventions; Psychosocial Strategies and Referral; Healthcare Administration; and Professional Development and Responsibility. A minimum of 150 clinical hours is required to earn credit for the class.

Prerequisites: AT 205: minimum grade “C.”

d. AT 305: Athletic Training Clinical Practicum IV – 2 hours

Building on the first year of clinical experiences, students will continue to be challenged to transfer knowledge gained in the classroom and apply it in the clinical settings. Under the supervision of a preceptor, the students will be expected to demonstrate the knowledge and skills identified in the Standards as designated by the CAATE (Commission on Accreditation of Athletic Training Education) and its eight content areas: Evidence-Based Practice; Prevention and Health Promotion; Clinical Examination and Diagnosis; Acute Care of Injury and Illness; Therapeutic Interventions; Psychosocial Strategies and Referral; Healthcare Administration; and Professional Development and Responsibility. A minimum of 150 clinical hours is required to earn credit for the class.

Prerequisites: AT 300: minimum grade “C.”

e. AT 400: Athletic Training Clinical Practicum V – 2 hours

Senior level students will now have four semesters of clinical practicum cohort entering their final year of the program. The students will continue to be challenged to transfer knowledge gained in the classroom and apply it in the clinical settings. Under the supervision of a preceptor, the students will be expected to demonstrate the knowledge and skills identified in the Standards as designated by the CAATE (Commission on Accreditation of Athletic Training Education) and its eight content areas: Evidence-Based Practice; Prevention and Health Promotion; Clinical Examination and Diagnosis; Acute Care of Injury and Illness; Therapeutic Interventions; Psychosocial Strategies and Referral; Healthcare Administration; and

Professional Development and Responsibility. At the senior level it is to be expected the student will be polishing the skills of a successful clinician such as evaluation skills, critical thinking and problem solving, exercise and rehabilitation prescriptions and appropriate decision making when diagnosing injuries and choosing modalities for treatment plans. A minimum of 150 clinical hours is required to earn credit for the class.

*Senior Exit Exam: Students will take a Board of Certification (BOC) Mock Exam during AT400. A passing score of 80% will be required for Program Director endorsement of the application for the BOC exam while the student is enrolled in the last semester prior to graduation. If the student does not earn at least an 80%, a retake opportunity will occur at the beginning of AT405 in the Spring semester of the Senior year.

**The Senior Exit Exam does not affect graduation requirements for the major, only endorsement to apply for the BOC exam.

Prerequisites: AT 305: minimum grade “C.”

f. AT 405: Athletic Training Clinical Practicum VI – 2 hours

Senior level students will now have four semesters of clinical practicum cohort entering their final year of the program. The students will continue to be challenged to transfer knowledge gained in the classroom and apply it in the clinical settings. Under the supervision of a preceptor, the students will be expected to demonstrate the knowledge and skills identified in the Standards as designated by the CAATE (Commission on Accreditation of Athletic Training Education) and its eight content areas: Evidence-Based Practice; Prevention and Health Promotion; Clinical Examination and Diagnosis; Acute Care of Injury and Illness; Therapeutic Interventions; Psychosocial Strategies and Referral; Healthcare Administration; and Professional Development and Responsibility. At the senior level it is to be expected the student will be polishing the skills of a successful clinician such as evaluation skills, critical thinking and problem solving, exercise and rehabilitation prescriptions and appropriate decision making when diagnosing injuries and choosing modalities for treatment plans. A minimum of 150 clinical hours is required to earn credit for the class.

Prerequisites: AT 400: minimum grade “C.”

4. Clinical Hours Policy

All students are to meet the minimum requirements for clinical hours based on their current level of clinical practicum class for which they are enrolled. All 200 level classes require completion of a minimum of 75 clinical hours and all 300 and 400 level classes require completion of a minimum of 150 hours. However, students most likely exceed

these minimums and should expect this to occur. These hours are inclusive to actual hours of work and not travel or hotel time on trips. A student's maximum hours of clinical work should not include more than 20 hours a week in any Practicum or 300 hours per semester or 600 per year.

D. Attendance Policy

1. Class Attendance

You are expected to attend all class meetings. Attendance is checked at the discretion of each professor. Specific attendance requirements are delineated in each course syllabus. It is your responsibility to obtain assignments and materials missed during any absence.

2. Clinical Attendance

You are prohibited by the CAATE standard #59 to receive any compensation whatsoever for your clinical education experiences and work related to that of your clinical education experiences.

You are required to attend all clinical experiences per the specific site's schedule. It is to be treated like a work schedule for a real, paying job.

You are expected to make these schedules with your Clinical Preceptor and adhere to them during the semester. Failure to do so could result in a change in your grade and possibly removal from the program. If you have another job, it is your responsibility to arrange your clinical site hours with your preceptor.

It is your responsibility to keep accurate and updated time sheets or a spreadsheet of actual times worked at each clinical rotation. Time sheets or the spreadsheet can each be obtained from the clinical coordinator. Tardiness and leaving early must be documented with the reason why and the clinical supervisor's signature.

Time sheets will be inspected at the clinical coordinator's visit. Failure to complete these time sheets properly and accurately will result in no credit for those clinical hours in question, and you must make up those hours. Any discrepancy in time recorded on the time sheet and the time you actually worked could result in an UNEXCUSED absence and will be handled on an individual basis with the clinic education coordinator.

a. Excused Absences

In each clinical rotation you are permitted a total of three excused absences that you do not need to make up. You will be granted an excused absence for the following reasons:

1. Other WLU activities that could be academic in other classes or extracurricular-related such as athletics, theater, etc. You must provide a note from the corresponding professor for a valid excuse to miss.
2. A death in the immediate family.
3. Injury or illness. Should you be absent longer than two consecutive days because of injury or illness, you will be required to obtain a physician's excuse stating the date of the physician's visit and the specific recommendation that you should not attend clinical rotation for a given number of days. Additionally, the program director reserves the right to require a physician's excuse for any questionable absence.

b. Unexcused Absences

The following are considered UNEXCUSED absences and will count toward your three available to miss during the semester:

1. Any absence for reasons other than those stated above.
2. Absence because of injury or illness greater than two consecutive days without a physician's excuse.
3. Failure to follow the call-off policy. (See Call-Off Policy)
4. Any tardiness that exceeds the limit of three per clinical rotation. (See Clinical Tardiness Policy)
5. Failure to call the clinical supervisor at the site when you will be more than 30 minutes late for work. (See Clinical Tardiness Policy)
6. Leaving early without prior approval from the clinical supervisor at the site.
7. Any discrepancy between time recorded on the time sheet and time actually worked.
8. Any dismissal by the clinical supervisor at the site because of inappropriate and unacceptable behavior.

Time missed because of an unexcused absence must always be made up. Any quizzes or tests missed will be receive the grade of "0" (See Make-Up Time Policy).

* The program director and/or the clinical coordinator may deal with any unexcused absence at his/her discretion. Most incidences will follow the Disciplinary Policy of the WLU Handbook and will be handled according to the disciplinary policy. (See Disciplinary Procedure.).

c. Calling off during your clinical rotation

1. If you should be absent from a clinical rotation for any reason, please try to notify your preceptor at least an hour ahead of scheduled starting time.

*Failure to follow this procedure exactly will result in an UNEXCUSED absence.

d. Clinical Tardiness

Tardiness is defined as arriving at the clinical area any time later than the scheduled starting time, regardless of the reason. If you realize that you will be more than 30 minutes late to work, you must notify your preceptor immediately. If he/she is not available, a message should be left with the clinical site.

Tardiness is neither tolerated nor professional; however, you are permitted two incidents of tardiness before receiving an UNEXCUSED absence, providing that the above notification procedure was followed. Failure to follow this procedure will result in an UNEXCUSED absence. Any UNEXCUSED absence will be handled according to the disciplinary policy (See Disciplinary Procedure.).

The reason for any tardiness must be documented on your time sheet and signed by your preceptor. The time missed must also be made up. Arrangements will be made between you and the preceptor. (See Make-up Time)

e. Expected Hours of Work

You are prohibited by the CAATE standard #59 to receive any compensation whatsoever for your clinical education experiences and work related to that of your clinical education experiences.

Work times are dependent upon your site location, the athletic team to which you have been assigned, and your preceptor. Many times, your schedule will be determined by the starting and ending times of athletic practices and events.

The preceptor at each site will determine starting and finishing times. Be prepared for sudden changes in work schedules as practices and games might be changed because of weather or the head coach's needs. **THIS IS YOUR EDUCATION AND CLINICAL PRACTICUM ROTATION. IT IS TO BE TREATED AS SUCH.**

You are required by the CAATE standard #58 to have at least one day off in a seven day period. This will be addressed by your preceptor at your clinical site rotation, while individual schedules are being constructed.

f. Make-up Time

Any unexcused absence from a clinical rotation must be made up. It is your responsibility to schedule this make-up time with both the clinical coordinator and the preceptor at the site. Any assignment missed as a result of any absence must also be completed. A grade of “0” will be given for any quiz or test missed because of an unexcused absence. Failure to make up the missed hours in a timely fashion will be handled according to the disciplinary policy (See Disciplinary Procedures).

g. Illness during Clinical Attendance

If you become ill during clinical practice, you should notify your preceptor and proceed as directed by the clinical supervisor. If the preceptor permits you to leave because of illness, it will be considered an excused absence, and the hours must be made up if you have exceeded three excused absences. If you leave the clinical site, the clinical coordinator should be notified that day. (See Excused Absences Policy)

h. Injury during Clinical Attendance

If you are injured in any way during a clinical experience, you must report the injury to the preceptor and to the clinical coordinator at WLU. You must then follow the procedure required by the clinical site. If such procedures involve emergency room services or other treatment, you will be responsible for any expenses incurred. (See Health Insurance Explanation)

i. Extended Illness/Injury Policy

The following duties listed below are necessary for the completion of each clinical rotation. On a daily basis, any or all of these might be required. The full spectrum of duties necessary in the practice of athletic training may include more, but these are some of the more common ones:

1. Moving and lifting patients/athletes
2. Moving and lifting water coolers and ice chests
3. Pushing and pulling wheelchairs
4. Obtaining histories from patients
5. Stocking the training room shelves with equipment and supplies

6. Loading and unloading medical and travel supplies on trips.

You will not be able to participate in a clinical rotation unless you can perform the aforementioned tasks.

Should an extended illness/injury occur that prevents you from performing at full capacity as listed above, the following procedures must be followed:

1. Notify the clinical coordinator and preceptor of your site as soon as possible.
2. Written documentation from your physician including the time expected to be absent from the clinical rotation clinical must be faxed to the clinical coordinator as soon as possible and no later than five days after work has begun being missed.
3. Missed time is expected to be made up after you obtain a physician's release stating that you are able to perform all duties with no limitations.
4. You may not return to the clinical setting without the prior approval of the clinical coordinator or program director.

Should the illness or injury require you to be absent from the clinical rotation longer than one month, your situation must be reevaluated before you may re-enter the rotation. Re-entry depends on your clinical/academic performance prior to the illness or injury. If your clinical/academic performance was less than satisfactory, you may not be able to re-enter the program. Re-entry will be the decision of the program director/clinical coordinator and the academic administration at the institution and will be evaluated on an individual case basis.

You must make up any time missed because of extended illness or injury. It is your responsibility to make these arrangements with the clinical coordinator. Failure to make up the missed time could result in dismissal from the program.

j. Inclement Weather Policy

When inclement weather causes driving conditions to be hazardous, attendance at clinical rotation is left to your discretion. You should call the preceptor at the site to discuss road conditions. Missed time will need to be made up when missed.

E. Composite Clinical Performance Evaluation

This section entails the entire clinical practicum experience. If any aspect of the following subsections is deemed to be incomplete or inadequate by the clinical coordinator, the situation will be handled individually. Other appropriate university personnel could become involved as necessary.

1. Grading

Each clinical site could have the following items graded regularly throughout the semester:

1. Student notebooks, any written or oral projects, assignments, or quizzes (assigned at that particular site, which is at site coordinator's discretion)
2. Final evaluation and grade from clinical site
3. Performance Skill Objectives

a. Student Notebooks

Each student will be responsible for keeping a log of his/her clinical- rotation experiences. It will be at the discretion of the clinical coordinator as to what information needs to be included during each experience. This will be provided to you based upon your rotation year in the program. You will be given a format to follow prior to starting your clinical rotation.

b. Clinical Academic Assignments

You are responsible for the completion of any projects, assignments, quizzes, or tests that may be given to you during a clinical rotation. The clinical coordinator or the preceptor at the site may make assignments. You will be given advance notice of any quiz or test. Any missed assignment must be completed, but any quiz or test missed because of an unexcused absence will receive a grade of "0."

c. Final Evaluation Forms

A final evaluation form will be completed at the end of your clinical experience at each site. These forms are located on ATrack. You and the preceptor for your clinical site will complete these.

F. Clinical Rotation Rules and Guidelines

1. Appearance/Dress Code

As a student, you represent both West Liberty University and the profession of Athletic Training. You are expected to dress and conduct yourself in a professional, responsible manner. Your clothing is to be appropriate and in accordance with whatever site you are assigned. You must wear appropriate clothing at all times or face reprimand from the necessary parties involved.

*You may be expected to purchase clothing for your clinical site depending on the site. Students are highly encouraged to raise funds as an AT club for items such as these.

*You must be wearing approved apparel for your clinical sites, especially game coverages per your site.

West Liberty University Clinical Athletic Training Program Dress Code

As an athletic training student, you represent both West Liberty University and the profession of Athletic Training during your clinical rotations. You are expected to dress and conduct yourself in a professional, responsible manner. Your clothing is to be appropriate and in accordance with professional standards. You must wear appropriate clothing at all times.

1. Site-specific shirt/T-shirt/polo (cannot have another school's name/logo).
2. No skirts or dresses for day-to-day operations. No low-cut fitting shirts or tank tops
3. Shirts should be tucked in, and belts are highly recommended.
4. Khaki or athletic type shorts/pants. Shorts cannot be shorter than mid-thigh. No jeans.
5. Shoes worn should be safe and comfortable. Sandals, flip-flops, clogs, slippers, open-toed shoes, or heels are not permitted for day-to-day operations. Socks must be worn at all times. Open-toed shoes and heels are permitted when worn as part of a formal outfit.
6. No holes in any clothing.
7. Hair must be neat and clean. Hair must not come in contact with the patient. Beards, moustaches and sideburns must be neat and trimmed.
8. Jewelry should not be excessive. Earrings, rings, and necklaces should be kept to a minimum. Only small earrings may be worn. No visible piercings beyond the ears.
9. Tongue and nose piercings are to be removed during your rotations.
10. Cosmetics must convey a professional appearance. Make-up should not be excessive. The length of the fingernails must promote patient and employee safety. Nail polish must be appropriate and in good repair.
11. No hats are to be worn during inside-event coverage.
12. If you are working with a sport that has specific dress requirements, you must adhere to the team's dress code.

The dress code at each clinical site may vary; however, the WLU athletic training program dress code is the minimum expectation. If a clinical site allows for attire that violates the WLU athletic training program dress code, students are expected to follow our stringent guidelines. If a clinical site requires attire that goes beyond the WLU athletic training program minimum requirements, the student must follow the sites dress code.

Dress Code Violations:

If you arrive at a clinical site inappropriately dressed, the Preceptor at the site reserves the right to send you home to change into the appropriate attire. You will be required to make up the time. Further violations will result in more severe penalties, which will be handled by the clinical education coordinator.

Should you arrive at a clinical site inappropriately dressed, the preceptor may send you home to change into appropriate attire. You will be required to make up any missed time.

Failure to abide by dress code policy could result in decreased a grade, loss of academic progress, or other measures deemed necessary.

2. Specific Rules and Regulations

You are required to abide by the specific rules and regulations **set forth by the clinical site to which you are assigned**. Other WLU athletic training program regulations include:

1. Outside Telephone Calls: You are permitted to use phones only with prior permission. You may make outside local calls or telephone your adviser or clinical coordinator for related clinical or university business; however, any personal calls must be approved prior to making them. *Social calls and texting are prohibited. It is prohibited to be on the sidelines of an event making any type of call other than summoning the EMS or patient-related aid.* If you need to make a call that can't wait, obtain permission to leave the sidelines or court. **Do not make calls or be on cell phone while covering events or practices. It is extremely unprofessional and WILL affect your grade.**
2. Follow your clinical schedule regarding vacation and days for holidays as determined by the clinical coordinator prior to the beginning of the clinical rotation. ***You will not follow the West Liberty University school calendar during clinical rotations. And you will be expected to be at the university for coverage of your team should it run into breaks and holidays.***
3. You are to present yourself in a professional manner at all times and abide by the previously set rules and regulations of your assigned clinical site. Failure to do so can result in dismissal from the program.

4. There is to be absolutely no trash talking or engagement in conversation with opposing team players, coaches, staff or officials other than medically related topics.

3. Impaired Thinking

Impaired thinking constitutes a risk to patient safety. Impaired thinking is evidenced by an inability to make appropriate judgments and carry out athletic training tasks in relation to situations that arise. Impaired thinking may be the result of fatigue, anxiety, sleep deprivation, medication use, illegal drug use, alcohol use, etc.

A preceptor who determines that you are exhibiting evidence of impaired thinking can ask you to leave the clinical area and consult with the program director. You will be given an unexcused clinical absence. (See Unexcused Absences). If drug or alcohol use is responsible for the impaired thinking, you will be permanently dismissed from the program.

a. Drug/Alcohol Use

1. Drug and Alcohol Use at Affiliated Clinical Sites is Prohibited
 - a. If you are at a clinical site under the influence of drugs or alcohol or use drugs or alcohol, you will be **immediately and permanently dismissed** from the Athletic Training Program and will suffer any other university consequences regarding this behavior.

4. Criminal Background Check

Background checks may be required for West Liberty University Athletic Training Students based upon your clinical assignment for that semester. If the background check reveals a conviction or other information relevant to the position, you may be disqualified from holding that position. Your background report may contain the following information:

- Criminal records (fingerprints)
- Civil records
- Social Security verification
- Credit reports
- Employment history

5. Pregnancy Policy

Should you discover that you are pregnant during a clinical rotation, it is recommended you notify the program director as soon as possible so necessary arrangements can be made—mainly for the appropriate health of the child. Should the pregnancy interfere with your ability to complete your rotation at that site, all efforts will be made to accommodate you, but no guarantees can be made.

6. Infectious Disease Policy

Students understand they must not attend their clinical rotation at anytime should they acquire any contagious personal illnesses or infectious diseases of any kind. Furthermore, students are to follow communication and clinical attendance policies with their clinical preceptor as detailed in the call off procedures.

Because of the nature of the healthcare profession, students participating in required clinical education experiences will find themselves at risk for exposure to infectious diseases. Because you interact with many athletes (or patients), you could inadvertently transmit disease organisms from one person to another. Therefore, following the Standard Precautions (transmission-based precautions) set in place to reduce the transmission of disease organisms is required. This may require the use of gloves, gowns, and/or masks depending upon the type of transmission and the setting in which you are assigned. Trainings are on an annual basis within the athletic training program and completions of these trainings by the students are kept on file with the clinical coordinator.

7. HIPAA Training

This HIPAA training will be offered annually at WLU and must be completed each year prior to your beginning a clinical rotation or observation hours. Because this training is mandatory, your completion of it is documented and kept on file by the Program Director at West Liberty University. **Failure to complete this training will prohibit you from attending your clinical site until the training is complete, and it could affect your clinical practicum grade.**

8. Universal Precautions

This BBP training will be offered annually at WLU and must be completed each year prior to your beginning a clinical rotation or observation hours. Because this training is mandatory, your completion of it is documented and kept on file by the Program Director at West Liberty University. **Failure to complete this training will prohibit you from attending your clinical site until the training is complete, and it could affect your clinical practicum grade.**

Because medical history and examination cannot reliably identify all patients infected with HIV and other blood-borne pathogens, blood and body fluid precautions should be consistently used for all patients. This approach, previously recommended by CDC and referred to as “universal blood and body fluid precautions” or “universal precautions,” should be used in the care of all patients, especially including those in emergency-care settings in which the risk of blood exposure is increased and the infection status of the patient is usually unknown. **In any case, you are required to wear gloves, change them as necessary, and wash your hands after every patient to reduce the chances of transmitting an infectious organism. There are no exceptions to this requirement.**

1. All healthcare workers should routinely use appropriate barrier precautions to prevent skin and mucous-membrane exposure when contact with blood or other body fluids of any patient is anticipated. Gloves should be worn for touching blood and body fluids, mucous membranes, or non-intact skin of all patients and for handling items or surfaces soiled with blood or body fluids. Gloves should be changed after contact with each patient.
2. Hands and other skin surfaces should be washed immediately and thoroughly if contaminated with blood or other body fluids. Hands should be washed immediately after gloves are removed.
3. All healthcare workers should take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures, when cleaning used instruments, during disposal of used needles, and when handling sharp instruments after procedures. Athletic training students should seldom if ever come in contact with any of these. However, if the situation arises, to prevent needle-stick injuries, needles should not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After they are used, disposable syringes and needles, scalpel blades, and other sharp items should be placed in puncture-resistant containers for disposal; the puncture-resistant containers should be located as close as practical to the use area.
4. Although saliva has not been implicated in HIV transmission, to minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags, or other ventilation devices should be available for use in areas in which the need for resuscitation is possible.
5. Healthcare workers who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient care equipment until the condition resolves.
6. Pregnant healthcare workers are not known to be at greater risk of contracting HIV infection than healthcare workers who are not pregnant; however, if a healthcare worker develops HIV infection during pregnancy, the infant is at risk of infection resulting from perinatal transmission. Because of this risk, pregnant healthcare workers should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission.
7. Implementation of universal blood and body-fluid precautions for ALL patients eliminates the need for use of the isolation category of “Blood and Body Fluid Precautions” previously recommended by the CDC for patients known or suspected to be infected with bloodborne pathogens. Isolation, precautions (e. g. , enteric, “AFB”) should be used as necessary if associated conditions, such as infectious diarrhea or tuberculosis, are diagnosed or suspected.

****Taken from (with some changes): Recommendation for Prevention of HIV Transmission in Health Care Settings, U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control, Atlanta, Georgia 30333.**

9. CPR Certification

All students participating in a clinical rotation must have current CPR certification. A copy of the current CPR certification card will be kept in the student file, and the original should be with the student at each clinical site. Trainings and classes to provide this certification are offered at WLU.

10. Health Insurance

Health insurance is a requirement for all clinical rotations.

If you do not own insurance or are not covered, you must make arrangement with the clinical coordinator to obtain some form of coverage.

G. Additional Costs

1. Malpractice Insurance

All athletic training program students are required to carry student professional malpractice insurance through West Liberty University. The university has arranged for a blanket coverage policy. A copy of this will be with the program director.

2. Student Housing

Arrangements for housing will be made by the clinical education coordinator and the university prior to the school year commencing or during any sort of break to allow you to be on campus with athletic teams during non-academic times. This is expected as part of your clinical experience and your athletic training program education.

3. Other Probable Expenses

The following items are a list of expenses that could be incurred as an AT Student once you are officially accepted into the major.

**Estimated cost is a general idea for students to prepare. Costs are not standardized and may be subject to change.

Fee Description	Estimated Cost**	Additional Information
Textbooks (dependent on class and semester)	\$200-300/semester	
Apparel (at least one polo per year)	\$30-50/year	More apparel can be purchased through the AT club as fundraisers.
NATA Dues	Up to \$78.00/annual fee	\$78 1/1-6/30, \$58 7/1-12/31
ATrack	\$90.00/lifetime subscription or \$45/year	Separate subscription fee to track clinical hours; recommend \$90 for new students
Cadaver Lab Fee (AT 340, 345)	\$100	(\$50/semester junior year)
Criminal Background Check	\$45	Castle Branch
Drug Test	\$40	Castle Branch
TB (Tuberculosis Testing)- <i>Required</i>	\$5-\$30	Available at Student Health Services (Mon and Tues) Cost-\$5. Otherwise student is advised to go to Primary Care physician or Urgent Care facility
Hepatitis B (3 part series) with titer- <i>Required</i>	Cost dependent on individual health care coverage	See Primary Care physician or Urgent Care facility
Varicella (proof of disease or vaccination) with titer - <i>Required</i>	Cost dependent on individual health care coverage	See Primary Care physician or Urgent Care facility
Other immunizations – <i>Highly Recommended</i> Refer to Student Health Services	Cost dependent on individual health care coverage	See Primary Care physician or Urgent Care facility
Transportation (to clinical sites)	Students are required to have transportation to clinical sites. Sites vary depending on location. Carpooling is encouraged.	Lack of transportation is not an excuse to miss clinical site rotations. You are expected to have transportation.
First-Aid/CPR Card	Initial one free from a required class	Subsequent updates are student responsibility ~\$25-30.

H. General Information/Activities

1. Student Employment

Employment during the course of study is the choice of the student and mandates good time-management skills. You will not be discouraged from employment, **but you will also not be excused from clinical rotations for work-related issues.** *You are a student first and foremost, and your clinical rotation is your education, and requirements should be scheduled around work—not the other way around.* It is up to you to have good communication with your employer and your preceptor about potential conflicts. These conflicts will be dealt with individually by the clinical education coordinator.

2. Athletic Participation

The WLU athletic training program wants to try to provide you with the best collegiate experience possible. The athletic training program will not prohibit you from participating on an athletic team, although it will require some extra planning and commitment if you choose to do so. The athletic training program will do everything it can to schedule clinical times appropriately. It should be noted that academics come first, especially in the off-season. But the athletic training program would never ask you to miss an in-season game or practice to work clinical hours. This scheduling will be dealt with by the clinical education coordinator on a sport-specific and clinical site-specific basis.

3. Athletic Season

Your education comes before athletics. You can expect to have some conflicts if you choose to do both. Arrangements will be made to lessen your load during in-season sports. The clinical education coordinator will try to be as flexible as possible with everyone, **but there are no guarantees.** Conflicts need to be communicated to the clinical coordinator immediately to eliminate any confusion. You will probably miss some practices and games as a result of your **off-season** schedule with athletics and your clinical requirements. The key is good communication among you, the coach, and the clinical coordinator.

4. Student Health Reporting Policy

You must notify the program director at West Liberty University and the preceptor at the clinical site of any and all contracted diseases or health problems that might or could jeopardize an athlete's and/or coworker's health at each clinical site.

If you are involved with a blood and/or body fluid exposure, you must have follow-up testing at your personal physician's office, local hospital, or county health department. You are responsible for any expenses incurred.

You must agree to and sign a release for information to be reported to the program director relating to exposure follow-up testing and/or treatment for blood and/or body fluid exposure. All of this information will be treated in strictest confidence and shall be used solely to determine whether you should be removed from clinical rotation to protect the employees and/or athletes of the clinical site.

5. Professional Association Membership

You are required to join the National Athletic Trainers' Association as a student member during your time as an ATS at WLU. You may obtain an application online at www.nata.org. Questions regarding these organizations should be addressed to the program director.

6. ATrack Subscription to Log Clinical Hours

You are required to subscribe annually to A Track online in order to log your clinical hours throughout the school year and during your time at WLU. You may subscribe online at www.atrackonline.com and purchase the lifetime subscription or annual subscription. You will need to subscribe August 1 prior to each academic year, if annual subscription. Questions regarding this subscription should be address to the clinical education coordinator.

I. Disciplinary Procedures

West Liberty University Academic Standards are to be upheld at all times. The faculty has the responsibility for seeing that all students receive credit for work they have done.

Should academic dishonesty be suspected or occur within a non-AT course, it will be dealt with per university policy and procedure.

Should academic dishonesty be suspected or occur within an AT course (core or elective course), it will be dealt with per university policy and procedure. (refer to Policy on Academic Dishonesty in the University Catalog).

Academic Dishonesty

- A. Types of academic dishonesty (refer to Policy on Academic Dishonesty in the University Catalog) subject to immediate Program dismissal are:
 - 1. Cheating
 - 2. Fabrication
 - 3. Collaboration
 - 4. Destruction of reference sources and/or denying others access to learning materials
 - 5. Plagiarism
 - 6. Misrepresentation of statistics

*****If any of 1-6 are proven, it will result in expulsion from the program and possible expulsion from the university in accordance with the university policy and procedures. Each incident will be handled on an individual basis.***

With the exception of the circumstances described in Section I-A, the following process will be used for disciplinary matters other than academic dishonesty.. The purpose of this process is to correct your behaviors so that you can successfully complete the program.

Inappropriate Behaviors

B. The following list contains examples of inappropriate behaviors that may result in disciplinary procedures:

i. Academic

1. Excessive tardiness
2. Failure to report an absence
3. Insubordination
4. Failure to maintain academic proficiency
5. Under the influence of alcohol or drugs in an academic setting
6. Abusive language

ii. Clinical

1. Dress code violations
2. Performing the duties of an athletic trainer without the direct supervision of a preceptor
3. Failure to maintain proper hygiene
4. Failure to maintain clinical proficiency
5. Excessive tardiness
6. Failure to report an absence
7. Insubordination
8. Under the influence of alcohol or drugs in an academic setting
9. Abusive language
10. Unsafe clinical practice

C. Types of Disciplinary Actions for those items listed in I-B

1. First Offense:

Student is given an oral reprimand and written documentation of the offense is given to the student. A written account is filed in the student's record. The student will be deferred to university administration for reprimand and university policy will ensue. Any missed time must be made up. A written report is placed in the student's permanent file. The student may be placed on probation within the athletic training program at the discretion of the program director.

2. Second Offense:

Written documentation of the offense is given to the student. The student is then permanently dismissed from the program, and a written report is placed in the student's permanent file. The student will no longer be permitted to be a part of the athletic training program.

D. Permanent Dismissal from a Clinical Site

You may be permanently dismissed from a clinical site for unsafe clinical practice any time during the semester. In such cases a grade of "F" will be given for the course in which the unsafe practice occurred, and you will be permanently dismissed from the program.

Reasons for unsafe clinical practice include, but are not limited to, the following:

1. Failure to attain the required level of cognitive or motor skills
2. Inadequate preparation
3. Inaccurate documentation
4. The inability to perform motor skills safely
5. Violation of institutional or professional codes of conduct
6. Unethical/Unprofessional behavior
7. Under the influence of drugs or alcohol
8. Inability to establish rapport with patients or staff
9. Lack of integrity, initiative, interest, or dependability

You will be afforded due process according to West Liberty University policy in cases of dismissal for unsafe practice. (Section I-B and I-C). If you choose to appeal the decision, the Clinical Coordinator will keep you out of the clinical areas until the appeal process is completed. If the results of the appeal allow you to remain in the course, you will be given the opportunity to make up the clinical time.

J. NATA Code of Ethics

PREAMBLE

The National Athletic Trainers' Association Code of Ethics states the principles of ethical behavior that should be followed in the practice of athletic training. It is intended to establish and maintain high standards and professionalism for the athletic training profession. The principles do not cover every situation encountered by the practicing athletic trainer, but are representative of the spirit with which athletic trainers should make decisions. The principles are written generally; the circumstances of a situation will determine the interpretation and application of a given principle and of the Code as a whole. When a conflict exists between the Code and the law, the law prevails.

PRINCIPLE 1:

Members shall respect the rights, welfare and dignity of all.

1.1 Members shall not discriminate against any legally protected class.

1.2 Members shall be committed to providing competent care.

1.3 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 without a release unless required by law.

PRINCIPLE 2:

Members shall comply with the laws and regulations governing the practice of athletic training.

2.1 Members shall comply with applicable local, state, and federal laws and institutional guidelines.

2.2 Members shall be familiar with and abide by all National Athletic Trainers' Association standards, rules and regulations.

2.3 Members shall report illegal or unethical practices related to athletic training to the appropriate person or authority.

2.4 Members shall avoid substance abuse and, when necessary, seek rehabilitation for chemical dependency.

PRINCIPLE 3:

Members shall maintain and promote high standards in their provision of services.

3.1 Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity, or services.

3.2 Members shall provide only those services for which they are qualified through education or experience and which are allowed by their practice acts and other pertinent regulation.

3.3 Members shall provide services, make referrals, and seek compensation only for those services that are necessary.

3.4 Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge.

3.5 Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.

3.6 Members who are researchers or educators should maintain and promote ethical conduct in research and educational activities.

PRINCIPLE 4:

Members shall not engage in conduct that could be construed as a conflict of interest or that reflects negatively on the profession.

4.1 Members should conduct themselves personally and professionally in a manner that does not compromise their professional responsibilities or the practice of athletic training.

4.2 National Athletic Trainers' Association current or past volunteer leaders shall not use the NATA logo in the endorsement of products or services or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.

4.3 Members shall not place financial gain above the patient's welfare and shall not participate in any arrangement that exploits the patient.

4.4 Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try to influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.

<https://www.nata.org/membership/about-membership/member-resources/code-of-ethics>

K. STUDENT POLICIES AGREEMENT

(To the student: After carefully reading this page, print and complete the required information. Sign it and return it to the clinical coordinator or program director prior to the beginning of the 2019-2020 school year)

I, the undersigned, have read, received an explanation of, and understand the guidelines contained in this handbook.

I also understand that I must comply with and follow these guidelines and policies during the period of my enrollment as an Athletic Training Program student at West Liberty University.

In accordance with West Liberty University's clinical affiliation agreement, I grant permission for West Liberty University's athletic training program faculty to discuss both my academic standing and clinical progression with any or all of the program's clinical affiliates.

DATE

SIGNATURE

PRINTED NAME

I, the undersigned, give West Liberty University my permission to release my medical records to clinical sites as necessary.

DATE

SIGNATURE

SOCIAL SECURITY #