The University of Texas at Arlington (UTA)

ATHLETIC TRAINING PROGRAM (ATP)

POLICIES & PROCEDURES HANDBOOK FOR THE MASTER OF SCIENCE IN ATHLETIC TRAINING (MSAT)

2017-2018 (Revised September 1, 2017)
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This document contains the policies and procedures related to the University of Texas at Arlington (UTA) Athletic Training Program (ATP). It is intended to be a reference for applicants, current graduate athletic training students (ATS), athletic training faculty and staff, clinical preceptors (CPs), and administrators. All persons involved in any aspect of the UT Arlington ATP should read and be familiar with all parts of this handbook.

The UT Arlington ATP and MSAT degree, are designed to prepare students to be successful entry-level athletic trainers. The student who envisions a career in the allied health profession of athletic training must accept certain responsibilities beyond those associated with successful academic performance and clinical proficiency. Students within the UT Arlington ATP are expected to possess and demonstrate appropriate professional behaviors throughout all phases of the education program, and to uphold the ethical standards outlined by the ATP contained in this manual, the affiliated sites, the National Athletic Trainers’ Association Code of Professional Ethics (http://www.nata.org), and the BOC’s Standards of Professional Practice (http://www.bocatc.org/resources/standards-of-professional-practice). Failure to uphold these ethical standards can result in probation, suspension or dismissal from the UT Arlington ATP.
MASTER OF SCIENCE IN
ATHLETIC TRAINING-

PROGRAM OVERVIEW
PROGRAM SUMMARY

The curricular sequence of the MSAT program is divided into two years. Students enter as a “Year 1” Athletic Training Student (ATS) and progress to a Year 2. The program incorporates didactic (classroom), laboratory, and clinical education components structured around the 5th edition of the Athletic Training Educational Competencies published by the National Athletic Trainers’ Association Education Council (NATA-EC) and the Role Delineation Study conducted and published by the Board of Certification (BOC). Completion of the ATP prepares students to sit for the Texas Advisory Board of Athletic Trainers’ (TABAT) State Licensure Exam for Athletic Trainers and the BOC Certification Exam.

MASTER OF SCIENCE IN ATHLETIC TRAINING OVERVIEW

A. Job Market Need

Based on data from the National Athletic Trainers’ Association (NATA), approximately 70 percent of athletic trainers possess at least a master's degree. Some athletic training work settings (e.g., colleges and universities) specifically require a master's degree for employment.

Traditionally, athletic trainers have been predominately employed in high schools, universities and professional sports settings. More recently, athletic trainers have expanded their work settings to include sports medicine clinics, hospitals, physician’s offices, industrial and occupational settings, military, performing arts, and public safety.

Employment opportunities for athletic trainers are projected to increase 37 percent from 2008 to 2018. This projected growth exceeds the average for all other occupations, and is based on the athletic trainers’ role in preventing injuries and reducing healthcare costs. As athletic trainers continue to expand their services, more employers are expected to hire athletic trainers to reduce overall healthcare costs through the prevention of work-related injuries. (Bureau of Labor Statistics: http://www.bls.gov/oes/current/oes299091.htm)

College of Nursing and Health Innovation

Dean: Dr. Ann Bavier, RN

Department of Kinesiology

Associate Dean and Chair: Dr. David Keller

Admins: Cindy Crissey, Cynthia Ontiveros

Information Technology: Edward Gonzales

Athletic Training Program (ATP)

Program Director/Graduate Advisor/Associate Clinical Professor: Dr. Paul Krawietz, ATC, LAT

Clinical Education Coordinator/Assistant Clinical Professor/Assistant Athletic Trainer: Meredith Decker, MS, ATC, LAT

ATP Faculty: Dr. Cindy Trowbridge, ATC, LAT, Associate Professor/Director Therapeutic Interventions Lab

ATP Faculty: Dr. Laura Kunkel, Associate Clinical Professor and Director of the Standardized Patient Lab and Athletic Training Inter-Professional Education

ATP Admin: Cynthia Ontiveros
HISTORICAL OVERVIEW: THE UT ARLINGTON ATP

During the spring semester of 2000, The University of Texas at Arlington gained approval for a new undergraduate major in athletic training. This major became the third undergraduate program to be offered through the Department of Kinesiology, which was housed in the School of Education (now the College of Education and Health Professions- COEHP). The other two programs include physical education teacher education (PETE) pedagogy and exercise science (EXSS). Dr. Lou Fincher was hired in August 2000 to become the Director for the newly created undergraduate Athletic Training Program.

The program received JRC-AT Candidacy status in September of 2000 and CAAHEP Accreditation in October of 2003. Since receiving initial accreditation, the UT Arlington ATP has grown and evolved into a well-respected program with a reputation for producing quality entry-level professionals. During this time, the program benefited greatly from the addition of two faculty members. Dr. Cindy Trowbridge was hired in September of 2004 when the Clinical Education Coordinator position was transitioned from a clinical faculty line to a tenure-track appointment. With a doctorate degree in physical medicine and rehabilitation from Brigham Young University, and ten years of athletic training clinical practice in the collegiate setting, Dr. Trowbridge has played a vital role in the program’s continued growth and development. In addition to teaching, Associate Professor Trowbridge also directs the UT Arlington Therapeutic Interventions Laboratory. Dr. Paul Krawietz joined the Department of Kinesiology faculty in January of 2006, having previously served as the Clinical Education Coordinator of the California State University, Long Beach ATP.

During the 2000’s, there were several changes in the athletic training staff employed by the Department of Intercollegiate Athletics. In August of 2007, the university hired Roy Rudewick, a UT Arlington alumnus, to serve as the Head Athletic Trainer. Prior to taking this position, Roy had been the Co-Head Athletic Trainer at Arlington Bowie High School, where he had served as a clinical instructor for the ATP for many years. Roy has brought great leadership to the UT Arlington Athletic Training Services department and a renewed enthusiasm in clinical education. Roy and his staff provide the UT Arlington athletic training students with quality clinical experiences and mentorship. Currently, Roy’s staff includes the following individuals: Gina Giammanco, Assistant Athletic Trainer; Alex Dean, Assistant Athletic Trainer; Wafaa Chatila, Assistant Athletic Trainer; Breanna Hamilton, Assistant Athletic Trainer; and Bao Duong, Assistant Athletic Trainer.

In 2008, the UT Arlington ATP underwent a self-study and site visit. The program maintained its accreditation and it was renewed for 10 years.

In 2009, Dr. Lou Fincher was promoted to the chair’s position of the Department of Kinesiology. Dr. Krawietz became Program Director beginning in September 2009. In addition, to further meet the needs of Athletic Training Students,

In the spring 2013, the ATP gained CAATE approval for a substantive change to offer the Master of Science in Athletic Training (MSAT) degree.

In the spring of 2014 Meredith Decker, MS, ATC, LAT was hired as a Clinical Assistant Professor. Ms. Decker earned her Bachelor of Science in Athletic Training degree from California University of Pennsylvania and her Master’s in Exercise Physiology with a Concentration in Athletic Training from Kent State University. Meredith was named Clinical Education Coordinator in the fall of 2014.
The Department of Kinesiology and the Athletic Training Program transitioned into the UT Arlington College of Nursing on September 1, 2014. The new college adopted the name of the College of Nursing and Health Innovation (CONHI). The department and program hired Cynthia Ontiveros, as a Senior Office Assistant in August 2015. In addition, upon the departure of Dr. Luzita Vela in May 2017, the department hired Dr. Laura Kunkel in September 2017 as an Associate Clinical Professor. Dr. Kunkel received her bachelors’ degree from Augustana College, her master’s from the University of Florida, and her doctoral degree from Texas Wesleyan University. In addition to teaching, Dr. Kunkel oversees the ATP’s Standardized Patient Lab and Inter-professional Education (IPE).

The first MSAT class graduated in May 2016. This was also the last commencement ceremony with an undergraduate Athletic Training cohort earning a bachelor’s degree in Athletic Training due to the transition to the master’s degree. The program will undergo a self-study in 2017-18 and a site visit in 2018-19 to achieve reaccreditation.

THE UNIVERSITY OF TEXAS AT ARLINGTON- MISSION:

The University of Texas at Arlington is a comprehensive research, teaching, and public service institution whose mission is the advancement of knowledge and the pursuit of excellence. The University is committed to the promotion of lifelong learning through its academic and continuing education programs and to the formation of good citizenship through its community service learning programs. The diverse student body shares a wide range of cultural values and the University community fosters unity of purpose and cultivates mutual respect.

UTA COLLEGE OF NURSING AND HEALTH INNOVATION- VISION:

We provide innovative, exceptional education, research and practice opportunities to those committed to advancing health and the human condition.

UTA COLLEGE OF NURSING AND HEALTH INNOVATION- MISSION:

Our mission is to advance health and the human condition by working across disciplinary boundaries to prepare diverse populations of students to engage in critical inquiry and high quality practice.

UTA ATHLETIC TRAINING PROGRAM (ATP)- MISSION:

The Athletic Training Program at the University of Texas at Arlington is committed to providing quality education programs that focus on scientific theory, skill acquisition, application of skills, and professional behaviors via pertinent didactic and clinical education. Through faculty and clinical preceptor mentoring, graduates of the Athletic Training program are prepared to be competent, creative, caring clinicians who enhance best-practice patient healthcare, exercise sound judgment, and value lifelong learning.
### UT ARLINGTON ATHLETIC TRAINING PROGRAM (ATP)- OUTCOMES:

#### Outcome #1
Prepare students to have knowledge, skills, and clinical aptitude to successfully work as an entry-level Athletic Trainer

**Objectives:**

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<th>Course Level Assessment:</th>
<th>Program Level Assessment:</th>
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<td>1.1</td>
<td><strong>A. Clinical Proficiency evaluation</strong>&lt;br&gt;• Baseline measurement: All ATS will achieve a “competent” rating on all clinical proficiencies associated with the applicable clinical practical course&lt;br&gt;  o Clinical Practicum in AT (includes CIP 5, 7)&lt;br&gt;<strong>B. Standardized Patient Lab</strong>&lt;br&gt;• Baseline measurement: 90% of ATS will achieve an average “Competent” rating score on the SP Evaluation Form, Section: General Clinical Reasoning, Interpretation and Actions&lt;br&gt;  o All Clinical Practicum Courses in the long semesters</td>
<td><strong>A. Capstone</strong>&lt;br&gt;• Baseline measurement: All ATS will achieve a 75% or higher before graduating on the comprehensive capstone examination&lt;br&gt;  o KINE 5150/5224</td>
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<td>1.2</td>
<td><strong>A. Curriculum</strong>&lt;br&gt;• Baseline measurement: Mastery All students will earn an 80% or higher in all required courses in the AT curriculum</td>
<td><strong>A. Graduation Rate</strong>&lt;br&gt;• Baseline measurement: Number of people that graduate within 3 years as set by the US Department of Education (CAATE Insite)</td>
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<td>1.3</td>
<td><strong>A. BOC Exam</strong>&lt;br&gt;• Baseline measurement: 90% or higher of ATS will pass the BOC on the first attempt&lt;br&gt;<strong>B. TABAT/TDLR LAT Exam</strong>&lt;br&gt;• Baseline measurement: 95% or higher of ATS will pass the LAT on the first attempt</td>
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| 1.4 Demonstrate readiness to successfully work as an Athletic Training. | • **Final Clinical Practicum Course KINE 5160/5225-MSAT IIB Proficiency Form**
  “Overall Readiness to Enter the Profession” open ended question
  a. **Baseline Measurement**: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
|---|---|
| • **Graduate Exit Survey**
  a. **Baseline Measurement**: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
| • **Alumni Survey**
  a. **Baseline Measurement**: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
| • **Employer Survey**
  a. **Baseline Measurement**: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
Prepare students to use evidence based medicine to guide clinical practice, and foster active life-long learning in order to advance the profession.

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<tr>
<th>Objective</th>
<th>Course Level Assessment: Mastery versus non-mastery</th>
<th>Program Level Assessment: Mastery versus non-mastery</th>
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| 2.1       | • KINE 5420 White Paper on Epidemiological Data (Yr. 1 Summer)  
  o 100% of ATS will earn a score of:  
    = or > 80  
  • KINE 5431 Surgical Presentation (Yr 1 Spring)  
    o 100% of ATS will earn a score of:  
      = or > 80  
  • KINE 5343 CAPs (Yr 2, fall)  
    o 100% of ATS will earn a score of:  
      = or > 80  | • Graduate Exit Survey  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
| 2.2       | • KINE 5430 Special Test evaluation  
  o 100% of ATS will earn a score of:  
    = or > 80  
  • KINE 5431 Journal Club  
    o 100% of ATS will earn a score of:  
      = or > 80  
  • KINE 5434 Therapeutic Interventions 2: EB Moments  
    o 100% of ATS will earn a score of:  
      = or > 80  
  • SP Lab- Patient Education Related to EBP (Year 2 Fall)-ATS research current data related to patient ailment and better educate the patient | • Graduate Exit Survey  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed  
  • Employer Survey  
    o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
| 2.3 Implement patient-oriented outcome measures to assist with comprehensive patient care. | • **KINE 5344 Outcomes Project (Year 2 Spring)**  
  o 100% of students will get no grade lower than a “B” on their assignment  
  • **SP Lab (Year 2 Spring)**- ATS will implement patient rated outcomes measures during the evaluation to formulate appropriate intervention strategies during a SP encounter  
  o Baseline Measurement: 100% of students will earn a competent rating or higher on the rubric | • **Graduate Exit Survey**  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed  
  • **Employer Survey**  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
|---|---|---|
| 2.4 Participate in continuing education and professional activities. | • **SEU attendance (every semester)**  
  o 100% of students will obtain 5 SEUs per semester in each Clinical Practicum class | • **Graduate Exit Survey**  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed  
  • **Employer Survey**  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
Outcome #3
Prepare students to demonstrate professional, legal and ethical behaviors that comply with established standards for health care professionals.

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<th>Objective</th>
<th>Course Level Assessment: Mastery versus non-mastery</th>
<th>Program Level Assessment: Mastery versus non-mastery</th>
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| 3.1 Demonstrate knowledge in interpreting the NATA Code of Ethics, BOC Standards of Professional Practice, and documents related to the law and regulation pertaining to Athletic Training practice. | Exams in KINE 5333/KINE 5334 3.1 | **Graduate Exit Survey**  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
| |  
  - Capstone exam-Professional Responsibility domain | **Employer Survey**  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
| 3.2 Successfully implement NATA Code of Ethics and BOC Standards of Professional Practice and documents related to the law and regulation pertaining to Athletic Training practice. | ATS Professional Evaluation 3.2  
  - Baseline measurement: All students achieve an overall grade of 85% | **Employer Survey 3.2**  
  o Baseline measurement: 90% or greater of employers are satisfied with the professional, legal and ethical behaviors of graduates |
| | | **Graduate Exit Survey**  
  o Baseline measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
**Outcome #4**

Prepare students to value mutual respect and cultural differences associated with varied exposures and clinical job settings.

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<th>Objective</th>
<th>Course Level Assessment: Mastery versus non-mastery</th>
<th>Program Level Assessment: Mastery versus non-mastery</th>
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| 4.1 ATS has confidence, knowledge, and skill in implementing patient-centered care that considers the relevant socioeconomic, cultural and religious characteristics that are pertinent to a patient’s circumstances. | Cultural presentation pre/post survey | • Graduate Exit Survey  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed  
  • Employer Survey  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
| 4.2 Demonstrate effective and respectful communication with individuals, groups, professionals, and society. | ATS Professional Evaluation  
  • Baseline measurement: All students achieve an overall grade of 85% | • Graduate Exit Survey  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed  
  • Employer Survey  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
| 4.3 Demonstrate effective and respectful behaviors with individuals, groups, professionals, and society. | ATS Professional Evaluation  
  • Baseline measurement: All students achieve an overall grade of 85% | • Graduate Exit Survey  
  o Baseline Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
| 4.4 Demonstrate patient-centered care geared to individual patient situations and desired outcomes in accordance with best practices. | ATS Professional Evaluation  
- Baseline measurement: All students achieve an overall grade of 85%  
- SP Lab  
  Baseline measurement: SP Rubric ATS will on average score a competent rating on the general communication and patient centered skills portion of a SP encounter. | Employer Survey  
- Baseline  
  Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
|---|---|---|
| 4.5 Demonstrate knowledge and comfort in effective interprofessional collaborative practice competencies including interprofessional values/ethics, roles and responsibilities, communication and teamwork. | KINE 5130/5221 and 5150/5224 IPE Pre/Post Assessment  
- Baseline measurement: All ATS will achieve an 85% or higher on a IPE examination/quiz (related to communication and teamwork) | Graduate Exit Survey  
- Baseline  
  Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed  
  Employer Survey  
- Baseline  
  Measurement: All questions related to students perceived readiness to practice in the exit survey will be positively endorsed |
MSAT ADMISSIONS PROCESS

Master of Science in Athletic Training (MSAT) Program
Pre-Admission Procedures

The University of Texas at Arlington Master of Science in Athletic Training (MSAT) Program employs a secondary admission policy (meaning students apply to the university’s Office of Graduate Studies, but also must submit application materials secondarily to the MSAT program).

Application information, forms, and materials can be found here:

https://www.uta.edu/conhi/academics/kinesiology/grad-athletic-training/application-admissions.php

The program’s application process is divided into three major steps

1. Pre-Application Materials
2. Interview: In person/Skype
3. Post Interview Materials (which includes application to the Office of Graduate Studies)

See Appendix A for details.

Students are admitted under two circumstances:

1. UNCONDITIONAL ADMISSION

Applicants who meet all criteria (GPA, GRE, etc.) for admission are admitted on an “unconditional” basis.

2. CONDITIONAL (PROBATIONARY) ADMISSION

Applicants failing to meet the unconditional admission criteria may be considered for conditional/probationary admission, in which case the following additional criteria will also be considered by the MSAT Admissions Committee:

• Professionally relevant experience may be reviewed.
• A sample of technical writing may be requested.
• Student must maintain a 3.0 GPA in the first two semesters of enrollment in the graduate program.

RETENTION CRITERIA

MSAT students’ academic and clinical progress will be closely monitored each semester. In order to remain in the MSAT program, students must:

1. Maintain a cumulative GPA of 3.0 or higher.
2. Maintain a 3.0 GPA or higher in athletic training core courses.
3. Adhere to the NATA Code of Ethics, the BOC’s Standards of Practice, to the MSAT Policies and Procedure Manual, and to policies/regulations established at each assigned clinical site.

Students who fail to meet the retention criteria will be placed on probation in the MSAT program. If standards are not met by the end of the probationary period, the student will be dismissed from the program.

Students who earn a grade of C or lower in any required course must repeat that course and earn a grade of B or higher in order to remain in the program. Students will not be allowed to continue in the program until the course is
repeated. For example, if a student earns a “C” in a course only offered in the fall semester, he/she must wait until the course is offered again (the next fall) before proceeding in the program. Failure to repeat the course, or earn a grade of B or better, will result in dismissal from the program.

Drug Use/Screening

MSAT students should act responsibly at all times including in the classroom and at each affiliated site in regards to patients and patient care. MSAT students should not engage in drug or alcohol use or be under the influence of such during clinical education/field experience hours. Some affiliated sites (such as sports medicine clinics and hospitals) may require drug screening before the ATS can begin their rotation. More details will be provided by the Clinical Education Coordinator when applicable.

In addition, ATS who plan to sit for the EMT-B and/or EMT-A licensing exams must obtain a negative drug test as part of the application process. More details will be provided in KINE 5341 Immediate and Emergency Care I.

Criminal Background Check in pre-application

As part of the pre-admission procedures, applicants must complete a Criminal Background Check provided by the university. Note: A form is sent via email from UT Arlington with instructions. Any applicant with a criminal background will be evaluated on a case by case basis by the program faculty. As part of their evaluation, the faculty will consider the policies of the 1. BOC and 2. Texas License which state:

1. BOC Candidate Handbook- Applicants with a felony or misdemeanor:

The following section is taken from the BOC Candidate Handbook and serves as a reference for faculty and students concerning applicants and for enrolled students who may get a felony or misdemeanor violation during the course of their enrollment:

Section F. Applicants with a Felony or Misdemeanor

The affidavit portion of the exam application requires candidates to report any felony or misdemeanor conviction. During the application process, candidates must submit a written explanation, in their own words, of the events that led to the conviction(s), copy of court documents(s), including, but not limited to, an arrest report, sentence recommendation, compliance of all court requirements and proof of payment of all related fines.
If the case(s) were alcohol or drug related, the candidate may also be required to provide a current professional alcohol/substance abuse evaluation that is no older than 3 months. If an evaluation was not required by the court, the candidate must obtain an evaluation from a licensed alcohol/chemical dependency counselor at their expense. Documentation may be emailed, faxed or mailed. Please allow at least 5-7 business days for documentation to be reviewed. Candidates may request a predetermination of eligibility at any time by submitting their documentation to the BOC via email, fax or mail prior to submitting their application. The Professional Practice and Discipline Committee reviews all convictions. Candidates are notified in writing of the committee’s decision. Please review the Professional Practice and Disciplinary Guidelines and Procedures for details. Candidates who are granted eligibility to sit for the BOC exam should review their state’s practice act prior to sitting for the BOC exam. Their conviction(s) could affect their ability to obtain licensure in that state.

Source: BOC Exam Candidate Handbook,  
2. Texas Licensure for Athletic Training- Criminal History

Subchapter D. Criminal History and License Eligibility

60.40. License Eligibility for Persons with Criminal Convictions. (Adopted effective July 1, 2009, 34 TexReg 4326; amended effective July 1, 2010, 35 TexReg 5525; amended effective October 15, 2010, 35 TexReg 9080)

(a) Texas Occupations Code, Chapter 53 provides that the commission or executive director may suspend or revoke an existing license, disqualify a person from receiving a license, or deny a person the opportunity to be examined for a license if the person has been convicted of an offense listed under §53.021(a) or has a deferred adjudication that qualifies as a conviction under §53.021(d). Any such action shall be made after consideration of the factors listed in Texas Occupations Code, §53.022 and §53.023 and the guidelines issued by the department under §53.025.

(b) A person who is incarcerated because of a felony conviction is not eligible to obtain a license or renew a previously issued license under this chapter or any statute governing a program regulated by the department.

(c) Revocation Waiting Periods.

(1) A person whose license is revoked by operation of law under Texas Occupations Code §53.021(b) must wait until release from imprisonment before applying for a new license.

(2) A person whose license is revoked by order of the commission or the executive director must wait one year from the date of revocation before applying for a new license.

60.41. License Eligibility for Persons with Deferred Adjudications or Non-Conviction Activities. (Adopted effective July 1, 2010, 35 TexReg 5525)

(a) The commission may suspend, deny, revoke, or refuse to renew a license, if the commission determines a deferred adjudication makes the applicant or licensee unfit for the license. In making this determination, the commission shall consider the factors set forth in Texas Occupations Code §53.022 and §53.023 and the guidelines issued by the department under §53.025.

(b) The commission may determine a person ineligible for a license based on criminal history or other information that indicates lack of honesty, trustworthiness, or integrity to hold a license.

60.42. Criminal History Evaluation Letters. (Adopted effective July 1, 2010, 35 TexReg 5525)

(a) Pursuant to Texas Occupations Code Chapter 51, §51.4012 and Chapter 53, Subchapter D, a person may request the department issue a criminal history evaluation letter regarding the person's eligibility for a specific occupational license regulated by the department.

(b) A person may request the department issue an evaluation letter regarding whether the person may be eligible for a license if the person has a conviction or deferred adjudication for a felony or misdemeanor offense, or if there is other information that indicates that the person may lack the honesty, trustworthiness or integrity to hold a license issued by the department.

(c) To request an evaluation letter, the person must:

(1) submit the request using a department-approved form; and
(2) pay the required fee of $25.

(d) A person must submit a separate evaluation letter request and fee for each specific occupational license in which the department will evaluate the person's eligibility.

(e) An evaluation request is not considered to be a complete request until all required information is received. No evaluation letter will be issued for an incomplete request. The entire process from receipt of the completed request to the issuance of an evaluation letter will not exceed 90 days.

(f) The department will issue an evaluation letter in response to each criminal history evaluation letter request. The evaluation letter will state the department's determination on each ground of potential ineligibility.

(g) The department is not bound by its determination if:

(1) the requestor fails to disclose known information that is relevant to the evaluation; or

(2) there is a change in the person's circumstances after the evaluation letter is issued.

(h) The department's determination is not a contested case under Government Code, Chapter 2001, and the determination may not be appealed. The department's determination does not prohibit or prevent a person from enrolling or attending an educational program, taking a licensing examination, or applying for a license.

Source: PROCEDURAL RULES OF THE COMMISSION AND THE DEPARTMENT
16 Texas Administrative Code, Chapter 60
(effective October 1, 2016)

Source: https://www.tdlr.texas.gov/procrules.htm#6030

MSAT ADDITIONAL ATS COSTS AND RESOURCES

MSAT students will incur tuition, university fees, and CONHI fees. In addition, there are additional program specific costs.

See APPENDIX B: MSAT Tuition, Fees, Additional Cost, and Resources

Equal Opportunity/Non Discrimination Policy


It is the policy of The University of Texas at Arlington that to the extent provided by these applicable laws no person shall, on the basis of race, color, national origin, religion, age, sex, disabilities or veteran status, be denied employment or admission, be excluded from participation in, be denied the benefits of or subject to discrimination under, any program or activity that it sponsors or conducts. It is also the University’s policy to maintain an environment free from discrimination on the basis of sexual orientation.
Academic Advising

All MSAT students will receive academic advising from Dr. Paul Krawietz, ATP Director and Graduate Advisor. Advising information will be conducted once each semester electronically or in person. All students will have an “Academic Advising” service indicator (hold) placed on their MyMAV account before registration. Students eligible to register will have the service indicator removed by Dr. Krawietz. Athletic Training Students are allowed to register on the first day of open registration each semester.

Graduation Requirements

To complete the Master of Science in Athletic Training degree, the student must meet the below criteria:

1. Grade “B-” or better in all MSAT courses (including clinical courses- Clinical Athletic Training I-VI).
2. Adhere to all Athletic Training Policies and Procedures and standards/ethical codes identified in this document
3. Complete all clinical rotations, including the General Med rotation
4. Successfully complete all proficiencies and earn 1240 clinical hours (cohort entering 2016)/1270 (cohort entering 2018)

NOTE: the student is responsible for completing courses in MSAT and for fulfilling all requirements for graduation.

Academic Digression Report Policy

Athletic Training Students are expected to monitor their academic performance throughout the program and seek guidance from available sources (including the instructor) if their performance drops below satisfactory levels. ATP faculty reserve the right to complete an academic digression report if a student grade falls below 80% in any components of a course (including, but not limited to quizzes, tests, practical exams, etc.). Academic digression reports will be filled out by instructor, reviewed with student, and filed with Program Director. Academic digressions are not meant to be punishment, but are used to make the student aware of academic shortfalls in the AT Program. After three academic digression reports, the ATP faculty will meet with the student to discuss academic standing and progress throughout the remainder of the program.

ATS CONDUCT POLICIES

STUDENT CONDUCT:

PROFESSIONAL CONDUCT & CONFIDENTIALITY POLICY

UT Arlington Athletic Training Student (ATS), are expected to conduct themselves professionally at all times. This includes appearance, timeliness, and overall actions and behaviors. In addition, at your clinical sites, ATS are expected to conduct themselves professionally and politely by addressing everyone, including: athletes, parents, athletic trainers, physicians, administrators, other healthcare providers, and others with respect. By being a member
of the UT Arlington ATP students assume the responsibility of behaving as a health care professional and agree to abide by the following including but not limited to:

- All policies listed in this policy/procedure document
- Applicable policies for students enforced by the University of Texas at Arlington, including the UT Arlington Honor Code
- The NATA Code of Ethics, and the BOC Standards of Professional Practice
- Applicable policies of the Texas Athletic Trainers Athletic Trainers Licensing Act
- Policies listed on your course syllabus
- Policies identified at each specific affiliated site and clinical preceptor

The following behaviors are highlighted each year during in-service. UT Arlington Athletic Training Students are expected to:

- Document clinical hours regularly by using A-TRACK, and complete all clinical proficiencies before the identified deadline each semester. The clinical preceptor and CEC must approve both hours and proficiencies.
- Realize that the clinical preceptor will complete a performance evaluation at midterm and at the conclusion of the rotation; Problematic areas related to professionalism identified by the clinical preceptor are subject to remediation, probation, and/or permanent suspension.
- Commit to a schedule of attendance at the clinical site and to be accountable (i.e. “I will be there when I say I will be there”).
- Be on time. If an emergency causes one to be late, it is the student’s responsibility to contact the clinical preceptor and make him/her aware of the situation. Find out how your CP wants you to contact them (phone call, text, email, etc.)
- Be proactive at the clinical site (i.e. learn what can be done without being told or reminded).
- Refrain from giving unsolicited advice to physicians, coaches, staff athletic trainers, or others who have more training. Students are expected to participate in meaningful conversations with the sports medicine staff pertinent to athletic training (e.g. discuss management, rehab, taping, etc. of injuries that occur)
- Refrain from using vulgar and obscene language or offensive social colloquialisms (e.g. cussing, inappropriate slang).
- Follow the UT Arlington Dress Code, to be groomed, and to dress professionally (clean and appropriate garments) at clinical sites, when attending continuing education programs, or representing the UT Arlington ATP.
- Romantic relationships with high school students are prohibited and will result in termination from the program.
- Avoid gossip and refrain from sharing one’s personal life with any high school students (including on Facebook and other forms of social media); Do not “friend” high school students on Facebook or other forms of social media;
- Romantic relationships between ATS and athletes/patients are highly discouraged in any setting due to the potential conflict of interest. However, if an athletic training student does begin a relationship (with a college age or older) patient or athlete, the MSAT student shall notify the Clinical Education Coordinator clinical reassignment and be proactive in the prevention of a conflict of interest
• Always practice ethical behavior including confidentiality (federal law prohibits students from discussing medical issues with anyone other than appropriate medical personnel). If in doubt ask the clinical preceptor or a UTA ATP Faculty member. ATS must sign the “Confidentiality Statement for ATS”
  
  o See Appendix C Confidentiality Statement

• Recognize that the ATP educational facilities and other associated labs are professional health care and teaching venues. ATS are responsible for keeping it clean and are to avoid bringing food or lid-less drinks into the facility. Food may not be eaten in PEB 200 or PEB 202.

• ATS have the privilege of a student lounge in PEB 308 for food. Likewise, the lounge should be kept clean. If the room is not kept clean, access to the lounge will be terminated. If you open the door using your swipe card, and it is outside of normal hours, then close the door and ensure that it is locked before exiting the building. Students also have swipe card access to PEB 303- and likewise are responsible for ensuring security by closing the door after vacating to room.

• Athletic Training Students represent the UT Arlington ATP. Any violation of the:

  o UTA ATP Policy and Procedure Manual;
  o Applicable policies for students enforced by the University of Texas at Arlington, including the UT Arlington Honor Code;
  o The NATA Code of Ethics, and the BOC Standards of Professional Practice;
  o Applicable policies of the Texas Athletic Trainers Athletic Trainers Licensing Act;
  o Policies listed on your course syllabus;
  o Policies identified at each specific affiliated site and clinical preceptor;
  o Professional Conduct and Confidentiality Policy;

may result in a **warning (disposition or digression form), suspension, or dismissal from the program.**

**PROFESSIONAL CONDUCT DIGRESSION REPORT POLICY**

In the event of a professional conduct issue, the appropriate faculty, staff, administrator, or clinical preceptor will complete a digression report form identifying a breach from professional behaviors as defined by the documents listed above. After three professional conduct digression reports, the ATP faculty will meet with the student to discuss their standing and progress throughout the remainder of the program. Upon receiving three conduct digression reports, the student may be subject to suspension or dismissal from the ATP.

**ATTENDANCE POLICY**

**Class:**

Each ATS is expected to perform to the best of his/her ability in the classroom. The theoretical concepts and clinical skills learned in class provide the foundation for growth and development as an athletic trainer. All Athletic Training Students are expected to attend class regularly, turn in assignments, and take exams on schedule. While in class, students are expected to remain attentive. The nature of AT Education is reliant upon demonstration – students are expected to be attentive during all demonstration sessions. Points may be deducted from your athletic training class grades for unexcused absences (see various course syllabi). If an ATS anticipates missing class due to an athletic training clinical assignment or other reason, notify your instructor in advance. It is **the student’s**
responsibility to contact each course instructor. Remember, you have chosen Athletic Training as your profession and your career. Strive for excellence! Everything you learn will improve the care you are able to give your athletes and patients.

**UT Arlington MSAT Sport Lecture Series in Sports Medicine:**

Each semester, several presentations will be scheduled on various topics related to athletic training/sports medicine. These programs will be presented by athletic trainers, physicians, or other allied health professionals who are local, regional, or nationally recognized experts in their particular area of specialty. The schedule of lectures will be posted early each semester. All students within the ATP/MSAT are expected to attend a minimum of number of hours of Supplemental Education Units (SEUs). The hours are documented on the SEU Cover page, signed by the student, and validated with an attendance certificate. Likewise, when guest speakers are scheduled to speak, students are expected to act professionally during the talk. In addition, the course instructor may institute dress requirements (typically polo and khaki pants).

**Supplemental Education Units (SEU's):** There are a variety of continuing education opportunities offered each semester through the Department of Kinesiology, the Athletic Training Education Program, Ben Hogan Sports Medicine, and many other sports medicine institutions or organizations. You are expected to obtain a **minimum of 5 contact hours of continuing education** outside of scheduled class activities. Opportunities will be posted as they are developed. These continuing education hours must be documented on the SEU Documentation Form found on ATrack. Note: Documentation verifying your attendance must be attached to the SEU Documentation Form (i.e. CEU certificate, attendance record, flyer, presentation notes, or signature of presenter). Only 1 hour of these SEU's may be completed online. All SEU’s require proof of purchase or attendance to count as credit towards the 5 total SEU’s needed in a semester. The SEU breakdown is as follows:

1 SEU:
- Any 1-2 hour lecture/talk on or off campus
- SP Lab training session
- Airport pick ups (NATA leaders)
- MSAT Interview Committee

2 SEU's:
- Any full day SEU event -multiple lectures/talks (i.e. one day of the DFW Symposium)

3 SEU's:
- Attending a multi-day conference (i.e. SWATA Competency Workshop, DFW Symposium)

**Capstone Exam Requirement**

The Capstone exam is a course requirement in KINE 5150/5224 Clinical Athletic Training V. Students who do not score an average of 75% or greater on the capstone, must undergo remediation with a faculty member and sit for the exam upon approval of that faculty member (see procedures below). Upon passing the capstone exam, students may then apply to take the BOC exam. If the student fails to take the exam during this time period, the ATP program may require the student to repeat a capstone exam before
granting permission to sit for the BOC exam, during the time in the program. All students who did not pass the capstone exam in KINE 5150/5224 will need to take Capstone Exam B during the spring semester by spring break, as part of a requirement for KINE 5160/5225 Clinical Athletic Training VI. Failure to pass capstone exam B, the student will take capstone exam C by the end of the semester. Failure to take capstone exam C or pass it will result in a grade of an “I” or “Incomplete” in KINE 5160/5225. Student will also lose 5% points toward their grade in clinical practicum.

Capstone Retake Procedures:
1. Meet with Meredith Decker for domain diagnostic evaluation
2. Develop remediation plan for all domains less than 75%
   a. Complete Plan of Action Form and study calendar
3. Meet with faculty member who teaches domain content; faculty member must approve plan of action and study calendar
4. Student is instructed on the procedures to complete each domain
5. Student must pass each domain specific assessment (quiz, exam, etc); Pass 75% or above
6. Schedule capstone exam retake with Meredith Decker

Capstone – Domain Enhancement Procedures:
ATS who successfully pass the capstone the first time will also meet with Meredith Decker to discuss a study plan to assist with any domains that were lower than the minimum. The procedures are:
1. Meet with Meredith Decker for domain diagnostic evaluation
2. Develop remediation plan for all domains less than 75%
   a. Complete Plan of Action Form and study calendar

BOC EXAM AND TDLR EXAM INFORMATION

A. BOARD OF CERTIFICATION (BOC) EXAM TO EARN THE ATC CREDENTIAL

According to the BOC:

“Exam Requirements. In order to attain BOC certification, an individual must complete an entry level athletic training education program accredited by the Commission on Accreditation of Athletic Training Education (CAATE) and pass the BOC certification exam.

In order to qualify as a candidate for the BOC certification exam, an individual must be confirmed by the recognized Program Director of the CAATE accredited education program.”
After the application to take the exam is approved, the applicant may register. According to the BOC:

“Candidates who are enrolled/registered in their final semester prior to graduation are eligible to sit for the BOC exam. The registration steps are as follows:
• Step 1 – Register: Candidate logs in to BOC Central™ to register for the exam
• Step 2 – Pay: Candidate pays for exam and receives an automated email immediately from the BOC stating registration and payment were received.
• Step 3 – Schedule: 3-7 business days after the last registration date, candidate receives an email from testing@castleworldwide.com with instructions on how to schedule exam. Candidate logs in to Castle website and selects exam site/date/time.”

Further details about taking the exam and the application process will be discuss in Clinical Athletic Training 5150/5224. For reference, the following link can be accessed:  http://www.bocatc.org/candidates

**B. TEXAS DEPARTMENT OF LICENSURE AND REGISTARTION (TDLR) EXAM TO EARN THE LAT CREDENTIAL**

UT Arlington students will follow Method D – CAATE-Accredited Program when applying for the Texas exam to become a Licensed Athletic Trainer.

The law states that ATS “who are within two semesters of being awarded, a baccalaureate or post-baccalaureate degree in athletic training from a college or university which holds accreditation from a nationally recognized accrediting organization that is approved by the board (Commission on Accreditation of Athletic Training Education). The college or university held/ will hold accreditation during your matriculation and at the time your degree was/is conferred.

There are three sections of the exam: an online jurisprudence exam, an online (written) content exam, and an in-person practical exam. The practical exam is typically held on a Sunday morning in December and April.

MSAT students who elect to sit for the LAT exam must complete the jurisprudence and online exams successfully before being allowed to register for the practical exam. Further details about taking the exam and the application process will be discussed in Clinical Athletic Training 5150/5224. For reference, the following link can be accessed:  https://www.tdlr.texas.gov/at/atforms.htm

**Standardized Patient (SP) Requirement**

All ATS will be required to participate in one SP sessions each long semester.

1. SP session is schedule by SP Coordinator and ATS
2. ATS arrives at appointed time to PEB 306 (SP Lab)
3. ATS and SP will be filmed
4. Shortly after the completion of session, ATS will be able to access the video of session. The ATS will complete the self-evaluation form
5. SP Coordinator and ATS will establish follow up appointment date
6. The SP Coordinator also completes the SP Assessment Form
7. ATS meets with SP Coordinator to go review recorded session together for feedback
“STUDY HALL” POLICY- PROBATIONARY STATUS OR AT-RISK

Athletic training students who are currently on probation or are at risk of being on probation may be required to attend mandatory study hall sessions arranged through the Program Director. The number of study hall hours required each week will be assigned on a case-by-case basis, although the average assignment usually requires six hours per week. In addition, the CEC may limit the number of clinical hours the ATS is earning at their site in an effort to promote additional study time. **A student’s unwillingness to follow this study hall policy will result in suspension from the ATP/MSAT program until such time that they either agree to abide by the policy or are no longer considered an at-risk student.**

COURSE SEQUENCE

**Master of Science in Athletic Training (MSAT)**

*Previous to 2017 = 52 Semester Credit Hours (SCH)*
*2017 and beyond = 57 Semester Credit Hours (SCH)*

The MSAT at University of Texas at Arlington is an intensive, 52 (previous to 2017) or 57 semester credit hour (SCH) (as of June 2017) program. A list of courses and sequencing can be found in:

*Appendix D: MSAT Course Sequences*

**Academic Integrity**

**Academic Integrity and Scholastic Dishonesty**

The University of Texas at Arlington strives to uphold and support standards of personal honesty and integrity for all students consistent with the goals of a community of scholars and students seeking knowledge and responsibility. Furthermore, it is the policy of the University to enforce these standards through fair and objective procedures governing instances of alleged dishonesty, cheating, and other academic/non-academic misconduct.

**What is Academic Integrity?**

Academic integrity is defined as being in firm adherence to a code or standard of values. It is a commitment on the part of the students, faculty and staff, even in the face of adversity, to five fundamental values:

- Honesty
- Truth
- Fairness
- Respect
- Responsibility
"From these values flow principles of behavior that enable academic communities to translate ideals into action" (The Center for Academic Integrity, 1999). Unfortunately, when these ideals are not translated to each and every one in the academic community, academic dishonesty is inevitable.

**What Constitutes Scholastic Dishonesty?**

Scholastic dishonesty includes, but is not limited to, cheating, plagiarism, and collusion on an examination or an assignment being offered for credit. Each student is accountable for work submitted for credit, including group projects.

**Cheating**

- Copying another's test or assignment
- Communication with another during an exam or assignment (i.e. written, oral or otherwise)
- Giving or seeking aid from another when not permitted by the instructor
- Possessing or using unauthorized materials during the test
- Buying, using, stealing, transporting, or soliciting a test, draft of a test, or answer key

**Plagiarism**

- Using someone else's work in your assignment without appropriate acknowledgement
- Making slight variations in the language and then failing to give credit to the source

**Collusion**

- Without authorization, collaborating with another when preparing an assignment

**University of Texas at Arlington Honor Code**

“I pledge, on my honor, to uphold UT Arlington's tradition of academic integrity, a tradition that values hard work and honest effort in the pursuit of academic excellence.

I promise that I will submit only work that I personally create or that I contribute to group collaborations, and I will appropriately reference any work from other sources. I will follow the highest standards of integrity and uphold the spirit of the Honor Code.”

Source: [http://www.uta.edu/conduct/academic-integrity/](http://www.uta.edu/conduct/academic-integrity/)

Per university policy, any student suspected of academic dishonesty is to be reported to the Office of Student Conduct.
STUDENT GRIEVANCE POLICIES

The UT Arlington student grievance policies are utilized for any grievances involving grades, or matters other than grades:

A. Grievances Related to Grades

It is the student’s obligation to attempt to resolve the matter with the individual with whom the grievance originated. Individual course instructors retain primary responsibility for assigning grades. The instructor’s judgment is final unless compelling evidence shows discrimination, preferential treatment or procedural irregularities. If an athletic training student wishes to appeal, their request must be submitted at:

https://www.uta.edu/coed/_downloads/educleadership/forms/Grade%20Grievance%20Form.pdf

The student has one calendar year from the date the grade is assigned to initiate the grievance. The normal academic channels are program director, department chair, academic dean, and the provost. However, before considering a grievance, the department chair or dean will refer the issue to a departmental or school committee of faculty. If the committee cannot reach a decision that is acceptable to all parties involved, the matter will follow the remaining academic channels. The decision of the provost is final.

B. Grievances Other Than Grades

It is the student’s obligation to attempt to resolve the matter with the individual with whom the grievance originated. Grievances involving clinical education matters other than grades are appealed to the clinical education coordinator, program director, the department chair, the academic dean if appropriate, then to:

https://www.uta.edu/conduct/students/grievance-policy.php

If the individual is not satisfied with the resolution, an appeal may be made in writing to the Vice President for Student Affairs. Any further action will be determined by the Vice President of Student Affairs (UTA Catalog).
MASTER OF SCIENCE IN ATHLETIC TRAINING:

CLINICAL EDUCATION POLICIES
**CLINICAL PLACEMENT PREREQUISITES**

Documentation of the following prerequisites is required before a student can be placed in the clinical setting for directed clinical experience:

1. Current certification (Healthcare Provider or Professional Rescuer or similar) in CPR/AED and First Aid (may be done through American Red Cross, American Heart Association, etc.)
2. Completion of blood-borne pathogen training
3. Proof of immunization against measles, rubella, diphtheria, tetanus, and hepatitis B
4. Policies & Procedures Acknowledgement Form
5. Signed confidentiality form and Media release form
6. Membership in NATA (Student Member status)- which will allow access to A-Track (on online clinical education management system)(the ATS may start at a clinical site, and the deadline may be extended based on NATA discounts)
7. A criminal background check (CBC) will be conducted by the ATP. Also a CBC may be required through a local independent school district once your clinical assignment has been made. In addition, some sites may require drug screening and/or tuberculosis testing. When screening/testing is applicable based on the assignment by the CEC, more details will be provided concerning this requirement.

**CLINICAL EDUCATION REQUIREMENTS: GUIDELINES AND STANDARDS**

The clinical education portion of the UT Arlington ATP consists of four long semesters and two 11-week summer semesters of clinical education coursework and clinical experience rotations (see Table 1 below).

Students must be enrolled in a clinical education course in order to be assigned to a clinical experience rotation. This also means that students must be enrolled in a clinical education course to earn clinical education hours (see Clinical Hour Policy).

The completion requirements for each clinical education course are outlined within each of the clinical course syllabi. The clinical Athletic Training courses involve the formal instruction and evaluation of specific clinical skills (psychomotor competencies) and clinical integrated proficiencies (CIPs). Once students have demonstrated competency (80%) with a specific skill, they may begin using that skill in their clinical education rotation(s).

Clinical proficiencies represent the integration of both knowledge and clinical skills into the students’ daily clinical practice in such a way as to include clinical decision-making. With the exception of KINE 5120 and KINE 5223, all clinical courses involve the formal evaluation of specific clinical proficiencies.
The UT Arlington ATP follows the **learning over time** model, which requires students to progress from **skill acquisition** (psychomotor skills) to **skill application** to **skill integration** (proficiencies). Following this model, students’ clinical proficiencies are always evaluated the semester after the associated psychomotor skills are evaluated.

**Example:**

**Year I fall semester:** students learn, and are evaluated on, knee special tests (i.e. Lachman, Apley’s compression, etc.) in KINE 5221 Clinical Athletic Training II

**Year I spring semester:** students are evaluated on their ability to perform a thorough knee evaluation in their clinical education rotation through KINE 5222 Clinical Athletic Training III

Ideally, the clinical proficiencies are best evaluated in “live”, “real-world” **injury situations**. Since it is not likely that you will encounter every possible injury or illness during the course of your clinical rotations at UT Arlington, your Clinical Preceptor (CP) may choose to evaluate certain clinical proficiencies using “mock” **patient scenarios**. It is your responsibility to capitalize on opportunities to demonstrate your proficiencies in real patient encounters.

**Clinical Proficiencies**

Timeline of Clinical Integration Proficiencies (CIPs) throughout the program:

<table>
<thead>
<tr>
<th>Fall Year 1</th>
<th>Spring Year 1</th>
<th>Fall Year 2</th>
<th>Spring Year 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>CIP 1 (part 1)</td>
<td>CIP 4 – LE</td>
<td>CIP 1 (part 2)</td>
<td>CIP 5</td>
</tr>
<tr>
<td>CIP 2</td>
<td>CIP 7</td>
<td>CIP 3</td>
<td>CIP 6 (part 2)</td>
</tr>
<tr>
<td>CIP 6 (part 1)</td>
<td>CIP 8</td>
<td>CIP 4 - UE</td>
<td>CIP 9</td>
</tr>
<tr>
<td>CIP 9</td>
<td>CIP 9</td>
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</tbody>
</table>

**Graded components of each CIP:**
- Foundational Behaviors
- Associated Skills

Each student is required to complete clinical proficiencies each semester that coincides with information instructed on in previous semesters. This document is to be completed by the end of the semester (date specified in the Clinical Packet) and is submitted with a paper copy. An overall grade of for each proficiency will be given, but the total of those grades for all required CIPs will go towards the final grade for Proficiencies. If a student receives a score below a 70% on a proficiency, he or she will have to remediate that proficiency in the following semester. Failure to complete any proficiencies will result in an “Incomplete” in the associated Clinical Practicum course until the skills are completed and a 5% deduction in overall course grade.
Milestones

Purpose: Milestones are significant points in student development through an educational program. The milestones are used with a competency-based approach in many forms of medical education, especially residency and fellowship programs. For the purposes of this program, the milestones will be used to assess behaviors related to the practice of athletic training.

The milestones are broken down into six major areas:
- Patient Care
- Medical Knowledge
- Systems Based Care
- Practice Based Learning and Improvement
- Professionalism
- Interpersonal and Communication Skills

Scoring: Preceptors for each rotation will assess each student on all milestones. Milestones will be graded based off of the student’s score in relation to the level that should be attained that semester. Each milestone indicates when a student should reach a Level 4. If a student does not score a Level 4 by the designated semester, he or she will lose points towards that milestone and will have to create remediation plan to successfully reach that milestone at the next rotation. A rubric will be provided to the students to detail the scoring of the milestones form. Milestones are due by the last day of a rotation and a 1% deduction in the course grade will result for each day late.

Milestone Reporting:

For each reporting period, review and reporting will involve selecting the level of milestones that best describes each student’s current performance level in relation to milestones. Milestones are arranged into levels. Selection of a level implies that the student substantially demonstrates the milestones in that level, as well as those in lower levels (see Reporting Form diagram below). A general interpretation of Milestone levels for athletic training is below:

**Level 1**: The student demonstrates milestones expected of a incoming student with beginner knowledge and education related to athletic training.

**Level 2**: The student is advancing and demonstrates additional milestones, but is not yet performing at a mid-program level (in between Year 1 and Year 2).

**Level 3**: The student continues to advance and demonstrate additional milestones, consistently including the majority of milestones targeted for program completion.

**Level 4**: The student has advanced so that he or she now substantially demonstrates the milestones targeted for program completion. This level is designed as the graduation target.

**Level 5**: The student has advanced beyond performance targets set for graduation and is demonstrating “aspirational” goals, which might describe the performance of someone who has been in practice for several years.

**N/A**: Some milestones may not be able to be assessed at a site. If that is the case, please initial in the N/A box.
The Clinical Preceptor must sign off on each Milestone Scoring Sheet associated with each skill by initialing which box they feel best suits the level the student performed that particular milestone at. Boxes are also present in between levels and can be checked if the Preceptor feels that a student may demonstrate skills or behaviors in between two levels. The Preceptor will provide a score (select a level) for how the student performed each Milestone, as well as a comment regarding the reason behind the assigned score. If a score of a ‘3’ or less is given, the CP is to comment on what improvements the student can make related to an increased score on that particular milestone.

*Year 1 students: Since the student will have more than one Preceptor during this semester, the sheet should reflect scores and comments from each Preceptor at each rotation.

**TABLE 1. Clinical Education Coursework and Rotations**

<table>
<thead>
<tr>
<th>Level</th>
<th>Semester</th>
<th>Clinical Course</th>
<th>Clinical Hours</th>
<th>Clinical Experience Rotation</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Summer</td>
<td>KINE 5120</td>
<td>50</td>
<td>Three rotations will occur throughout the first year and will include a variety of the following settings:</td>
</tr>
<tr>
<td></td>
<td>Fall</td>
<td>KINE 5130/5221</td>
<td>275</td>
<td>• Collegiate/University</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• High School</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• PT or Physician Clinic</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• Professional/Semi-Pro Sports</td>
</tr>
<tr>
<td></td>
<td>Spring</td>
<td>KINE 5140/5222</td>
<td>275</td>
<td>General Medical hours will occur throughout the second summer at a specified general medical clinic. This will start in the summer of 2018, for the cohort who entered in 2017.</td>
</tr>
<tr>
<td>II</td>
<td>Summer</td>
<td>KINE 5223</td>
<td>30</td>
<td>Rotations may be on or off campus and will satisfy the needs to meet CAATE requirements. Career specific assignments are ideal at this time if all CAATE requirements are met.</td>
</tr>
<tr>
<td></td>
<td>Fall</td>
<td>KINE 5150/5224</td>
<td>275</td>
<td>A 5-week full-time clinical immersion period will take place during this semester at the student’s assigned clinical site.</td>
</tr>
<tr>
<td></td>
<td>Spring</td>
<td>KINE 5160/5225</td>
<td>365</td>
<td></td>
</tr>
</tbody>
</table>

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**CLINICAL EDUCATION ATTENDANCE REQUIREMENTS**

The hours you spend in the UT Arlington athletic training facilities or other clinical settings are just as important as those spent in the classroom. **While completing clinical education rotations in the UT Arlington athletic training facilities, students are expected to follow the policies and procedures established by the UT Arlington Department of Athletics Athletic Training Program. While completing off-campus clinical education rotations students are expected to follow the policies and procedures established by that particular clinical facility** (i.e., dress, assignment schedule, etc.).

You are expected to arrive on time wearing the designated clinical uniform and behave in a professional manner as described by this manual, your CP, the NATA Code of Ethics and the BOC Standards of Professional Practice. Remember, your clinical experience gives you the opportunity to apply what you have learned in the classroom toward the actual care of patients and athletes, while also developing clinical decision-making skills. Take advantage of every opportunity for learning. Be proactive in your quest for knowledge. Don’t be afraid to ask questions.

**Clinical Absence Policy**

Attendance at a clinical rotation is mandatory on clinical immersion days and throughout the entirety of the full-time immersion period. Each student’s schedule will vary depending on his or her site/sport assignment. Absences at a clinical site will be treated in the same way as they are for missing class.

The Clinical Preceptor must approve all absences from a clinical site. Any long term absences, more than a day, must be approved by the Clinical Education Coordinator. “Excused” absences are at the discretion of the CP, and include, but are not limited to jury duty, an illness (accompanied by a doctor’s note), military service, and family emergencies.

Any other absence, or those that are not deemed “excused” by the CP, will be considered personal absences. Each student is limited to (2) personal absences per semester.

ALL absences, both excused and personal, must be accompanied by written communication with the student’s CP and the CEC no less than 48 hours prior to the absence (unless an unexpected medical or family emergency arise). If a medical injury or illness occurs, an appropriate doctor’s note must be provided to the CP and CEC for the absence to be considered excused. The note must be signed by the healthcare provider treating the student and must include the student’s name, date of treatment, condition.
being treated/reason for absence, and all necessary contact information for the clinic and healthcare provider. If a long term medical illness or injury arises that will result in a prolonged period of absences, more than a day, a doctor’s note will need to be provided to the CEC explaining the length of time the student is expected to be absent.

If a student exceeds (2) personal absences or does not communicate with the CP about an absence prior to 48 hours, a deduction of 5% of the course grade will occur in the Clinical Practicum course. Multiple offenses may result in a Digression Report.

**Other Scheduled Clinical Education Experiences:**

Athletic Training Students will be given the opportunity to volunteer for additional clinical assignments (important dates or special events) within the UT Arlington athletic training facilities or other clinical settings. These experiences are designed to give you additional opportunities for experiential learning and will provide a great opportunity to earn additional hours toward the clinical hour requirement. Based on the number of events hosted by UT Arlington each year, the CEC will determine and announce how many events are required each semester. This requirement constitutes a portion of the student’s grade for each clinical practicum.

**Other Involvement Outside of Your Assigned Site**

A student’s assigned clinical site will always take precedence over other clinical education experiences. A student is not limited from attending another clinical education site and gaining experience and hours, however this needs to be approved by both the current CP and CEC via email. Once the CP confirms that attendance at the other clinical site does not interfere with their current site, the student will then need to reach out to the CEC and obtain permission to attend the site. When reaching out to the CEC, the student should provide a rough weekly schedule of how often they are going to attend the site (include days and estimated hours). The CEC will be the one to approve the hours on A-track. If the CEC is unaware of the attendance or did not approve the involvement at the other site(s) and finds out through the hour log on A-track, the CEC reserves the right to delete those hours.

**CLINICAL HOUR POLICY**

AT students who entered the program before 2017 must earn a minimum total of 1240 clinical education hours and AT students entering in 2017 must earn a minimum total of 1270 hours in order to meet the program completion and graduation requirements of the UT Arlington ATP. These minimum hour requirements are spread across clinical education courses (5120-5160 or 5120-5225 based on entry into the program).
**Minimum - Maximum hours**

*Current students (and all future students):*

**IA Summer:** (Minimum = 50; Maximum = 80)

**IA Fall:** (Minimum = 275; Maximum = 475)

**IB Spring:** (Minimum = 275; Maximum = 475)

**IIA Summer:** (Minimum = 30; Maximum = 50 – only applies to current Year 1 students and future cohorts)

**IIA Fall:** (Minimum = 275; Maximum = 475)

**IIB Spring:** (Minimum = 365; Maximum = 500)

*A 5 week full-time clinical immersion will take place during this semester.

Program Total: 1240/1270

Students are strongly encouraged to start their clinical assignments when their associated placements begin. Attendance at pre-season practices and trainings are encouraged (but not required of Year 2’s), even if these begin prior to the start of the semester, either in August or January. Students assigned to a clinical rotation that exceeds the end of the semester (i.e. basketball during winter break, baseball post-season playoffs, etc.) will be strongly encouraged (but not required) to continue with that clinical assignment. Any conflicts with these assignments must be addressed with the Clinical Education Coordinator (CEC).

Athletic training students may access a summary of their clinical hours at any point during the long semester while enrolled in the program. If students fall behind in their clinical hours accumulation, they will be notified and a plan will be established to get the student back on track for completion of 1240/1270 hours prior to graduation. If it is determined that the athletic training student is in danger of logging an excess of hours with a clinical rotation, the Clinical Education Coordinator will contact the Clinical Preceptor (CP) for that clinical rotation and develop a plan so the student can maintain a balance between clinical hours and academics.

Any AT student that does not meet the semester hour requirements will receive an “I” in that particular Clinical Practicum and will not be eligible to enroll in the upcoming practicum course; therefore it is highly recommended that students complete the remainder of these hours prior to the start of the semester. Further, financial aid could be impacted if students are unable to enroll in a required number of credit hours, due to an incomplete grade. The grade change and access to the subsequent practicum course will occur once the student has completed the required hours. Note: this process may take several weeks. A grade penalty will also be enforced for the associated clinical practicum course.

**CLINICAL COMPLIANCE POLICY**

In order to comply with CAATE standards, students are required to complete clinical education forms and tasks by the applicable deadlines set forth by the Clinical Education Coordinator. Students that do not meet the deadlines are subject to the following disciplinary actions:
1st offense and 2nd offense: reduction in grade associated with the missed form; form will still need to be completed. The exact point deduction will be detailed in each Clinical Practicum course syllabi.

3rd offense and more: one-week suspension from clinical site and digression report

Each offense is carried over into the following semesters and will accumulate throughout the full two years. Suspension and return to clinical sites will be communicated with the appropriate Clinical Preceptor(s). Further offenses will result in possible probation and/or suspension from the program as determined by the Clinical Education Coordinator and Program Director.

Student/CP Clinical Contracts:
At the beginning of each rotation, students are required to meet with their CP and create a rotation long schedule to follow each week. The schedule will consist of specific days and times that the student is expected to attend the clinical site. The schedule will be part of a grade in Clinical Practicum and failure to comply with the designated schedule will result in a reduction in grade for Clinical Practicum. More than one offense will result in a digression report with the CEC. The program understands that in some circumstances, the schedule will vary week to week. The schedule is merely a guideline and minimum hours in the contract should be met each week. Schedule changes are at the discretion and approval of the CP and CEC. Violations will occur if a student does not have an excused absence approved by the CEC and CP (see Clinical Absence Policy).

**A minimum of 15 hours per week must be accrued by each student each week throughout the duration of the rotation. Further details of the student’s clinical schedule is agreed to by the student, Clinical Preceptor, and Clinical Education Coordinator in the Clinical Schedule Agreement document.

Each semester, students will be given a Clinical Packet pertaining to their level in the program. Details and specifics about the individual and general clinical rotations are outlined in this packet. Students must comply with the deadlines and timelines outlined in the Clinical Packet, as well as any policies that are stated.

LOGGING OF CLINICAL HOURS

Each clinical practicum course requires the completion of clinical education experience hours under the supervision of a Clinical Preceptor (CP). It is the student’s responsibility to complete the documentation of clinical education experience hours each week in ATRACK. The weekly clinical education experience hours must be approved online by your CP. Once students’ hours have been entered, CPs will access the weekly hour submissions to approve them. Students are recommended to print and keep a copy of each weekly hour report after it has been approved. It is the student’s responsibility to maintain up to date clinical hour records. Students must input clinical hours each week by Sunday at 11:59 PM of that week. Students will have 7 days from the day of any given clinical rotation to input the hours. Hours not logged for that particular week by this date and time will not be able to be logged and will not count towards the global 1240/1270 hours. The CEC will not make any exceptions for anyone who has failed to log their
hours on time. Students can not edit hours after they are submitted, so in the event that an error is identified by the student or CP, the student will need to contact the CEC so the changes can be made to the hour log.

Hours that can be logged:
- Anything involving your assigned site for that semester
- Events at other affiliated sites – identified and approved by the CEC via email
- Events at UT-Arlington
- General medical hours at affiliated sites
- SP lab – only those ATS that attend training and volunteer as a model
- Surgical observations
- Injury clinics (i.e. Fall Saturday AM clinics)

-Hours that cannot be logged:
(We highly recommend that ATS keep a personal log for their records and/or resume)
- Events at non-affiliated sites, with the absence of your CP
- Volunteer events (i.e. 3-day breast cancer walk, kid’s triathlon, etc)
- CEU’s
- Research hours
- Internships arranged outside of affiliated sites

**If uncertain about an event, contact the CEC for clarification

OUTSIDE EMPLOYMENT POLICY

The UT Arlington ATP understands that some students must obtain a part-time job to fulfill financial responsibilities, but students must also meet the requirements of the clinical courses. Therefore, the athletic training student’s clinical education experience takes precedence over any outside employment. Students are allowed to hold part-time jobs provided they do not interfere with the clinical aspect of the program. A maximum of 10 hours per week is recommended. Clinical experiences may take place at any point during a given day, weekends included. Students are required to be at their clinical sites on designated clinical immersion days and on Fridays. Exceptions to this must be approved by both the Clinical Preceptor and Clinical Education Coordinator. A student should not schedule outside work on clinical immersion days, unless it does not interfere with any clinical responsibilities.

CLINICAL RELIEF POLICY

Every athletic training student should be scheduled for at least one day off per 7-day period (Relief Day) from his/her clinical education rotation. At the beginning of a clinical rotation, the CP and the athletic training student will meet and discuss their schedule for
the duration of the clinical rotation. Schedules may vary depending on the site and sport each week. The student and CP will agree to a day off for each week prior to the week starting.

The athletic training student also has the opportunity to ask for time off when they have an exam, group project, or large assignment due. The student **MUST** ask for the time off from their CP two to three days in advance so other athletic training students can be rescheduled. Remember, there are many times when more than one day off may be available when clinical experience opportunities are light. However, this does not mean that you should not be practicing and refining your clinical skills. The Athletic Training Education Laboratory remains open until 5 pm or later (depending on faculty schedules) and can be used for student learning.

**CLINICAL PLACEMENT ELIGIBILITY (CONTINUANCE/RETENTION)**

To remain eligible for placement in a clinical education or field experience rotation, athletic training students must meet the following criteria:

- Maintain current certification in CPR/AED
- Have documentation for the completion of all three Hepatitis B vaccinations
- Complete annual bloodborne pathogen (BBP) training, confidentiality training, and FERPA/HIPAA training
- Complete annual ATP in-service programs
- Be in good standing with all program retention requirements
- Pay insurance fee at the beginning of each semester
- Note: In the event an ATS receives an incomplete (I) grade in a clinical practicum, all hours and course requirements must be completed before progressing in the program further including enrolling in the subsequent semester courses

**CLINICAL EDUCATION DRESS POLICY**

When completing clinical education rotations in an assigned clinical setting, athletic training students are expected to wear the appropriate practicum uniform. Athletic Training Students are expected to display the type of personal appearance and attire reflective of a professional. Your attire must reflect consideration of image, safety, and infection control.

When assigned to the UT Arlington Athletic Training Facilities, the UT Arlington Athletic Training Program’s dress policy is to be followed. When assigned to an off-campus clinical setting, students will follow the dress policy of that particular facility. If the facility does not have a dress policy, athletic training students will follow the UT Arlington ATP’s policy (see below)
Clothing:
• Should fit appropriately, be clean, wrinkle-free and without holes or frayed areas. Clothing which is too revealing, suggestive, or tight fitting is not acceptable.
• Nametags: Athletic Training Students are expected to wear their nametags. If a nametag is lost, it is the student’s responsibility to replace it (Accent Awards)

Footwear:
• Shoes should be kept clean, in good repair, and appropriate for professional attire. No open-toed shoes.

Grooming:
• Personal cleanliness/hygiene reflects professional standards (clean and neat).
• Hair is to be clean, neatly arranged and should not interfere with clinical practicum functions. Hair should not be extreme in color or styling.
• Face should be shaved or mustache/beards/sideburns, etc., if worn, are to be neatly trimmed, clean, and appropriate for business appearance.

Jewelry:
• Selection of jewelry for the clinical practicum should reflect a concern for professionalism, safety and infection control precautions. Women should limit earrings to one/two per ear and men should remove all earrings.

Tattoos or non-ear piercings should be kept out of sight during the clinical practicum work hours.

Nails:
• Men and women fingernails should be short and clean (no longer than about ¼” beyond the fingertip) (in hospital settings OSHA policies do not allow for acrylic nails- for the purpose of infection control).

UT Arlington ATP/MSAT Dress Policy
Khaki pants or shorts
Windpants (when allowed)
UT Arlington athletic training t-shirt or polo (shirt must be worn tucked in)
UT Arlington ATP name badge
Tennis shoes- clean and in good shape
UTA hats or visors only

Off-Campus MSAT Dress Policy
Khaki pants or shorts
Windpants (as approved by your CP)
UT Arlington athletic training t-shirt or polo (or shirt provided by the clinical site)
UT Arlington ATP name badge
Tennis shoes- clean and in good shape
UTA hats or visors (or those provided by the clinical site)
CLINICAL SUPERVISION POLICY

While earning clinical education hours within an assigned clinical education rotation, Athletic Training Students are directly supervised by a Clinical Preceptor (CP). During training for CP’s, the Clinical Education Coordinator (CEC) emphasizes the importance of direct supervision and explains that this policy must be implemented at each clinical site for the UT Arlington to remain in compliance with the CAATE Standards and Guidelines. Specifically, the CEC reviews the policies, which state:

- The CP will be physically present and have the ability to intervene on behalf of the athletic training student to provide on-going and consistent clinical education
- The CP will consistently interact with the athletic training student at the site of the clinical experience
- There will be regular planned communication between the Athletic Training Program and the CP
- The number of students assigned to CP in the clinical experience component will be maintained at a ratio that will ensure effective education and will not exceed a ratio of eight students per clinical preceptor in any clinical setting.

In addition, CPs are instructed that clinical supervision provides a safe environment for students to apply their clinical skills and develop the necessary clinical decision-making and confidence required for success in the athletic training profession.

As AT students progress in their level of knowledge and clinical skills, the level of clinical supervision provided by the CP adjusts accordingly. The level of supervision is based on each student’s developmental level (MSAT Year 1A Summer, 1A Fall, 1B Spring; Year 2A Summer, 2A Fall, and 2B Spring) and each student’s performance in their clinical education rotations. Following this model of clinical supervision, student’s progress from a position of close supervision to one of “guided autonomy”. This progression of clinical supervision requires that students actively engage in their clinical education rotation, and this is emphasized to each student each semester.

Students are expected and instructed to be proactive in integrating their knowledge and skills learned in class/lab into day-to-day athletic training operations.

CLINICAL EDUCATION ROTATIONS

While working under the supervision of their CP, students will gain experience working with athletes and patients within several different clinical settings. A special emphasis will be placed on ensuring that every student’s clinical education experiences include each the following:

- Team sports
- Individual sports
- Equipment intensive
- Male sports
- Female sports
- Non-sport patients
- Non-orthopedic patients

When possible, additional clinical field experiences will be provided based on the career interests of the individual student (sports medicine clinic, professional team, additional collegiate experience, athletic trainer in a physician clinic, etc). Clinical site experiences will not be duplicated for any one student. Clinical rotations will only carry over from one semester to another in Year 1. No “year long” rotations with one particular site/Preceptor will take place, unless the sport assignment at one site varies (for example an ATS may stay at UT Arlington for a full year, but will have two different CP’s and sport assignments). Each student will have a minimum of one rotation at UTA during his/her time in the program.

**STUDENT HEALTHCARE/COMMUNICABLE DISEASE POLICY**

The following policies are designed to protect both the athletic training student and the student-athlete or patient from the spread of communicable diseases.

1. Athletic training students with contagious or potentially contagious illnesses should avoid direct patient contact, regardless of the clinical setting.
   a. Students suffering from a cold, sore throat, respiratory illness, intestinal illness, or other condition with an oral temperature of 101° or greater should report to the student health center.
   b. If a student must miss a class or clinical assignment due to illness, they should contact their instructor prior to their absence. If unable to contact their instructor prior to class, students should contact him/her as soon as possible after the conclusion of their class.
   c. Upon returning to their class or clinical assignment, students should submit a note from the student health center documenting their illness.

2. Athletic training students should always practice sound prevention techniques when working in the healthcare environment (i.e., regular hand washing, secretion and cough management, wearing of gloves when appropriate, etc.).

3. Athletic training students should always cover all open wounds or cuts before treating a student-athlete or patient.
4. If an athletic training student suspects that he/she has a medical condition that may impact the safety of the student or patient, the student must inform the clinical instructor and the Clinical Education Coordinator as soon as possible.

**Blood Borne Pathogen Training and Exposure Control Policy**

MSAT students’ will undergo Blood-borne Pathogen (BBP) training annually, and review the exposure control plan. The UT Arlington ATP follows those the safety policies developed by the UTA Office of Environmental Safety. Specifically:

The UT Arlington: University’s BBP Exposure Control Plan

University’s Biological Safety Procedure (https://www.uta.edu/policy/procedure/8-10),

Biosafety Manual (http://www.uta.edu/campus-ops/ehs/biological/docs/biosafety-manual.pdf)

Other biosafety information that we have on our website (http://www.uta.edu/campus-ops/ehs/biological/index.php).

*See Appendix E*

**CLINICAL LEVEL DESCRIPTIONS POLICY**

As stated within the CAATE Standards and Guidelines, athletic training students should not perform skills in the athletic training setting prior to receiving formal instruction in those skills. This standard is required for the protection of the patient and the athletic training student.

The UT Arlington ATP is designed to progress students through four developmental levels of clinical competency and proficiency. These developmental levels have been delineated into specific descriptions for athletic training students to follow when completing clinical education rotations. The clinical level descriptions are provided for ATS and Clinical Preceptor reference in Appendix F and also located in A-Track.
MASTER OF SCIENCE IN
ATHLETIC TRAINING:

APPENDICES
APPENDIX A: Pre-admissions procedures

College of Nursing and Health Innovation
Department of Kinesiology
Master of Science in Athletic Training (MSAT) Program

Pre-Admission Procedures

Thank you for your interest in The University of Texas at Arlington Master of Science in Athletic Training (MSAT) Program. Please note that our pre-application process involves three major steps which are outlined below. The pre-application materials allow the MSAT Admissions Committee an opportunity to review your qualifications and determine whether you should formally apply to the graduate school. Note that applicants are not encouraged to apply for graduation admission until Step 3.

Step 1: Pre-Application Materials. Submit the items below directly to the MSAT Program (See address at the end of this form).

1. Complete and submit the UT Arlington MSAT Application & Essays
2. Complete 50 hours of observation with a certified athletic trainer (ATC and/or LAT) and submit the UT Arlington Athletic Training Observation Verification Form (Note: Observe during busy clinic times so you see many of the duties of an AT--Injury prevention, assessment, treatment, rehab, etc.)
3. Submit a Professional Resume, including education and relevant experience
4. Submit three UT Arlington MSAT Reference forms
   a. First Form: Must be completed by the ATC who supervised your 50 observation hours.
   b. Second Form: Must be from a previous instructor or professor who can attest to your academic performance.
   c. Third Form: A letter of recommendation from a physician, allied health care provider, instructor, or previous employer.
5. Submit GRE issued to student score report to the MSAT program, showing Verbal, Quantitative Reasoning & Analytical Writing Scores (A scanned copy is acceptable)
   a. Preferred scores are: Verbal = 150 (450) and Math 141 (450).
   Please Note: UT Arlington graduates who have an undergraduate GPA of 3.0 (or higher) in the last 60 hours as calculated by Graduate Admissions, a 3.0 cumulative GPA, and a 3.0 in all upper division work are eligible for a GRE waiver (only applies to UT Arlington graduates).
6. Submit one copy of all undergraduate transcripts. Make sure transcripts are easily readable. For Int’l students: please submit front and back copies of transcripts.
7. Successful completion of the following courses
   (Note: must complete with a grade of “C” or better and be completed within the last 10 years):
   o Basic Athletic Injury Course (such as Prevention and Care of Athletic Injuries)
   o Functional Anatomy or Applied Kinesiology or Biomechanics (with anatomy)
   o Physiology of Exercise
   o Anatomy and Physiology I and II
   o Nutrition (Sports or performance preferred but not required)
8. Meet application deadline of either October 1st (early admission) or February 1st (regular admission)
9. Complete and submit the UT Arlington MSAT Technical Standards for Admission - Student Version
10. Have a current basic CPR card
11. E-mail all application materials to Cynthia Ontiveros at cynthia.ontiveros@uta.edu
Step 2: Interview with MSAT Faculty and Student Admissions Committee

12. Upon submission and review of the pre-application materials, applicants will be notified via email and informed whether or not they have been selected for an interview with the MSAT Admissions Committee. The interview may be conducted in person or via Skype.

Step 3: Post Interview Instructions. Candidates who are extended an invitation to join the UT Arlington MSAT program, would then be advised to formally apply for graduate admission which includes the items below.

13. Complete and submit the UT Arlington graduate application before April 1st (US students) February 1st (US Permanent Residents/International students). Click here to access: [http://www.uta.edu/admissions/graduate/apply/index.php](http://www.uta.edu/admissions/graduate/apply/index.php)

14. Submit official GRE scores and official transcripts to the UT Arlington Graduate Admissions Office. For information about the GRE go to: [http://www.ets.org/gre](http://www.ets.org/gre) (The GRE is waived for UT Arlington graduates only who are in good standing and have an undergraduate GPA of 3.0 (or higher) in their last 60 hours as calculated by Graduate Admissions, a 3.0 cumulative GPA, and a 3.0 in all upper division work are eligible for a GRE waiver.)

15. Complete and submit the UT Arlington MSAT Report of Medical History Form SIGNED BY STUDENT and Physical Exam (Report of Health Evaluation) SIGNED BY PHYSICIAN OR DESIGNEE.


17. Submit UT Arlington MSAT Immunization Record (including Hepatitis B) (attached).

18. Complete Criminal Background Check (CBC) Note: A form will be sent via email from UT Arlington with further instructions.

Failure to follow these steps may result in your application and/or acceptance status being denied.

Early Admission Option: The UT Arlington MSAT program offers an early admission option for those applicants who submit all pre-application materials before October 1st. Materials must be received via email or postmarked by October 1st. Interviews are conducted in late October.

Regular Admission Deadline: The final deadline for regular admission is February 1st. Application materials must be received via email or postmarked by February 1st.

Cohort Start Date: Each new cohort begins the MSAT program in the 11-week summer session (Typically beginning in June). In addition, New Student MSAT In-service is the Sunday before the first class day of the summer term. International students may need to arrive earlier for an orientation session with the Office of International Education (for more information: [http://www.uta.edu/oie/](http://www.uta.edu/oie/))

All applications materials should be mailed or emailed to:
Cynthia Ontiveros
The University of Texas at Arlington
Department of Kinesiology
Box 19259
Arlington, TX 76019-0259
Email: cynthia.ontiveros@uta.edu

For further information about the UT Arlington MSAT program contact:
Paul Krawietz, EdD, ATC, LAT, MSAT Program Director
Email: pkrawietz@uta.edu
Phone: 817-272-7290

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**APPENDIX B: MSAT Tuition, Fees, Additional Cost, and Resources**

Master of Science in Athletic Training (MSAT)
In-state, Resident MSAT Cost Estimate and Resources- 2017

**These figures are to be used for planning purposes only and are not reflective of actual tuition and fees incurred by an individual student. Estimates and subject to change**

<table>
<thead>
<tr>
<th>First Year</th>
<th>SCH &amp; Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 Week Summer Session (7 Semester Credit hour [SCH])</td>
<td></td>
</tr>
<tr>
<td>KINE 5420 Concepts in Athletic Training</td>
<td>4</td>
</tr>
<tr>
<td>KINE 5220 Preventative and Acute Care Techniques in Athletic Training</td>
<td>2</td>
</tr>
<tr>
<td>KINE 5120 Clinical Athletic Training I</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total Semester Credit Hours (SCH)</strong></td>
<td>7</td>
</tr>
<tr>
<td><strong>Estimated Tuition for semester</strong></td>
<td>$ 2,856</td>
</tr>
<tr>
<td><strong>CONHI Fees ($96 per SCH)</strong></td>
<td>$96 x 7 SCH = $ 672</td>
</tr>
<tr>
<td><strong>Estimated tuition and fees</strong></td>
<td>$3,528</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Fall Semester (13 credit hours)</th>
<th>SCH &amp; Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINE 5430 Orthopedic Assessment I</td>
<td>4</td>
</tr>
<tr>
<td>KINE 5433 Therapeutic Interventions I</td>
<td>4</td>
</tr>
<tr>
<td>KINE 5221 Clinical Athletic Training II</td>
<td>2</td>
</tr>
<tr>
<td>KINE 5348 Pathophysiology and Pharmacology I</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total Semester Credit Hours (SCH)</strong></td>
<td>13</td>
</tr>
<tr>
<td><strong>Estimated Tuition for semester</strong></td>
<td>$5,289</td>
</tr>
<tr>
<td><strong>CONHI Fees ($96 per SCH)</strong></td>
<td>$96 x 13 = $1,248</td>
</tr>
<tr>
<td><strong>Estimated tuition and fees</strong></td>
<td>$6,537</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Spring Semester (10 credit hours)</th>
<th>SCH &amp; Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINE 5431 Orthopedic Assessment II</td>
<td>4</td>
</tr>
<tr>
<td>KINE 5434 Therapeutic Interventions II</td>
<td>4</td>
</tr>
<tr>
<td>KINE 5222 Clinical Athletic Training III</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total Semester Credit Hours (SCH)</strong></td>
<td>10</td>
</tr>
<tr>
<td><strong>Estimated Tuition for semester</strong></td>
<td>$4,150</td>
</tr>
<tr>
<td><strong>CONHI Fees ($96 per SCH)</strong></td>
<td>$96 x 10 = 960</td>
</tr>
<tr>
<td><strong>Estimated tuition and fees</strong></td>
<td>$5,110</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Second Year</th>
<th>SCH &amp; Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summer Session (7 credit hours)</td>
<td></td>
</tr>
<tr>
<td>KINE 5226 Pathophysiology and Pharmacology (11-week)</td>
<td>2</td>
</tr>
<tr>
<td>KINE 5347 Advanced Functional Assessment and Corrective Exercise (Second Summer session only- 5 week session)</td>
<td>3</td>
</tr>
<tr>
<td>KINE 5223 Clinical Athletic Training IV</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total Semester Credit Hours (SCH)</strong></td>
<td>7</td>
</tr>
<tr>
<td><strong>Estimated Tuition for semester</strong></td>
<td>$2,856</td>
</tr>
<tr>
<td><strong>CONHI Fees ($96 per SCH)</strong></td>
<td>$96 x 7 = 672</td>
</tr>
<tr>
<td><strong>Estimated tuition and fees</strong></td>
<td>$3,528</td>
</tr>
</tbody>
</table>
Fall Semester (10 credit hours) | SCH & Cost
---|---
KINE 5333 Health Care Administration | 3
KINE 5227 Lit and Res for the AT | 2
KINE 5341 Immediate and Emergency Care I | 3
KINE 5224 Clinical Athletic Training V | 2
Total Semester Credit Hours (SCH) | 10
Estimated Tuition for semester | $4,150
CONHI Fees ($96 per SCH) | $96 x 10 = 960
Estimated tuition and fees | $5,110

Spring Semester (10 credit hours) | SCH & Cost
---|---
KINE 5228 Seminar in Athletic Training | 2
KINE 5344 Scholarship in Athletic Training | 3
KINE 5342 Immediate and Emergency Care II | 3
KINE 5225 Clinical Athletic Training VI | 2
Total Semester Credit Hours (SCH) | 10
Estimated Tuition for semester | $4,150
CONHI Fees ($96 per SCH) | $96 x 10 = 960
Estimated tuition and fees | $5,110

Estimated Total Cost Year 1= $15,175
Estimated Total Cost Year 2= $13,748
Estimated Total Estimated cost= $28,923

Additional Costs: MSAT students will incur the following additional costs associated with the pre-admission and post admission portion of the program.

**Preadmission Costs:**

<table>
<thead>
<tr>
<th>Task</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Exam</td>
<td>Varies* ($25 at UT Arlington Health Center for students/varies). This figure reflects the costs of a physical exam at the UT Arlington Student Health Center. Students may complete their physical exam with their family physician or off-campus medical facility.</td>
</tr>
<tr>
<td>Current immunizations</td>
<td>Cost varies based on number and type of shot and vendor.</td>
</tr>
<tr>
<td>o Required: mumps, measles, rubella</td>
<td></td>
</tr>
<tr>
<td>o Recommended: Hepatitis A, Tetanus, Meningococcal</td>
<td></td>
</tr>
<tr>
<td>Hepatitis B Immunization-series of 3 shots</td>
<td>Varies; Approximately $50/shot* (varies); Cost of immunizations at the UT Arlington Student Health Center.</td>
</tr>
<tr>
<td>Basic CPR Course</td>
<td>Varies based on institution; Approximately $55 in DFW area</td>
</tr>
</tbody>
</table>
### Post-Admission Costs

| **Clothing: Khaki pants/shorts and tennis shoes** | Varies based on type, brand, and vendor |
| **Transportation costs to off-campus clinical sites** | Variable. Note: ATS are responsible for transportation to and from their clinical sites whether it be on campus or off campus. Carpooling is encouraged when several ATS are assigned to the same site. |
| **Student Liability Insurance** | MSAT students must purchase UT System liability insurance in conjunction with their clinical practicum course. The cost is $5 per semester. |
| **NATA Student Membership/A-Track.** | Incoming MSAT students will be given the opportunity to pay the $75 annual fee for the first year of membership, which begins on August 1st and will include the remainder of the year they join at no additional charge. Students will then be responsible for renewing their membership in the second year for a $75 annual renewal fee [these figures are subject to change by the NATA]. By accessing A-Track, students also become student members of the National Athletic Trainers’ Association (NATA) and the Southwest Athletic Trainers’ Association (SWATA), which results in many perks such as the NATA News, access to the NATA’s Career Center, and eligibility for scholarships. |
| **TB Blood Test (required for some off-campus affiliated sites)** | Varies by vendor; Approximately $69; |
| **Drug Screening** | Varies by vendor. Drug screening is required for some off-campus sites and for EMT-B and EMT-A licensing exams. |
| **Textbooks and course packs** | Varies by semester and vendor. |

### Costs

Expenses will vary depending on several criteria, including Texas residency, how many credit hours you’re taking, where you live, and much more.

### Financial Aid

More than 75 percent of UT Arlington students receive some type of student financial aid. Find out how much you may be eligible for with the College for All Texans Financial Aid Calculator.


### Scholarships

There are several different types of scholarships available to you at UTA. Our general academic scholarships are based on academic performance and available to new students pursuing their first baccalaureate degree. You can find additional scholarships such as designated, departmental, private, and need-based scholarships through our scholarship system, MavScholarshop.

[https://uta.academicworks.com/](https://uta.academicworks.com/)
Grants

Grants are funds that normally do not require repayment, and are awarded on a first-come, first-served basis. Check out the different types of grants that you may be eligible for at UTA.

http://www.uta.edu/fao/grants/index.php#Grants

Loans

You can qualify for loans through your student financial aid package. Find out more about federal student loans available.

http://www.uta.edu/fao/loans/index.php#Loan_programs
APPENDIX C: Confidentiality Statement

CONFIDENTIALITY STATEMENT- UT ARLINGTON
ATHLETIC TRAINING STUDENTS

I ______________________________________________, understand that information in the
Please Print Full Name
offices of the UT Arlington Athletic Training Room and other approved clinical sites is
confidential and may not be divulged to anyone except the person who owns the information,
those faculty, staff, or administrators who have need to know and those individuals or agencies
who fulfill the requirements under the Federal Educational Rights and Privacy Act of 1974, as
amended (FERPA) and the Health Insurance Portability and Accountability Act (HIPAA). If I
release confidential information or discuss confidential information outside of the office, I
understand that I will be immediately discharged from my clinical education rotation and possibly
from the Athletic Training Program.

I have read the above statement and agree to maintain the confidentiality of all information that I
have access to through this office.

____________________________________________            ___________________________
Athletic Training Student Signature     Date
____________________________________________          __________________________
Witness Printed Name      Date
____________________________________________          __________________________
Witness Signature       Date

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## APPENDIX D: MSAT Course Sequence (Previous to 2017)

### COURSE SEQUENCE

Master of Science in Athletic Training (MSAT) Degree Plan (52 credit hours)

### First Year

<table>
<thead>
<tr>
<th>First Year</th>
<th>Summer Session (11 week session) (7 credit hours)</th>
<th>Earned</th>
<th>To Be Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>KINE 5420 Concepts in Athletic Training</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5220 Preventative and Acute Care Techniques in Athletic Training</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5120 Clinical Athletic Training I</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>First Year</th>
<th>Fall Semester (9 credit hours)</th>
<th>Earned</th>
<th>To Be Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>KINE 5430 Orthopedic Assessment I</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5433 Therapeutic Interventions I</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5130 Clinical Athletic Training II</td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>First Year</th>
<th>Spring Semester (9 credit hours)</th>
<th>Earned</th>
<th>To Be Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>KINE 5431 Orthopedic Assessment II</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5434 Therapeutic Interventions II</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5140 Clinical Athletic Training III</td>
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</table>

### Second Year

<table>
<thead>
<tr>
<th>Second Year</th>
<th>Summer Session (7 credit hours)</th>
<th>Earned</th>
<th>To Be Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>KINE 5432 Pathophysiology and Pharmacology (11 week session)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5392 Special Topics: Advanced Functional Assessment and Corrective Exercise (Second Summer session- 5 week)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Second Year</th>
<th>Fall Semester (10 credit hours)</th>
<th>Earned</th>
<th>To Be Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>KINE 5333 Health Care Administration</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5343 Literature and Research for the Athletic Trainer</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE Elective (3 hour) Suggested: KINE 5341 Immediate and Emergency Care I Or other course:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5150 Clinical Athletic Training IV</td>
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</table>

<table>
<thead>
<tr>
<th>Second Year</th>
<th>Spring Semester (10 credit hours)</th>
<th>Earned</th>
<th>To Be Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>KINE 5334 Seminar in Athletic Training</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5344 Scholarship in Athletic Training</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE Elective (3 hour) Suggested: KINE 5342 Immediate and Emergency Care II Or other course:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>KINE 5160 Clinical Athletic Training V</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Master of Science in Athletic Training Degree Plan 57 SCH

**Effective Summer 2017**

## First Year

<table>
<thead>
<tr>
<th>Summer Session (11-week term)</th>
<th>Credit hours</th>
<th>Completed hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINE 5420 Concepts in Athletic Training</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>KINE 5220 Preventative and Acute Care Techniques in Athletic Training</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>KINE 5120 Clinical Athletic Training I</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td><strong>Semester total credit hours</strong></td>
<td><strong>7</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Credit hours</th>
<th>Completed hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINE 5430 Orthopedic Assessment I</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>KINE 5433 Therapeutic Interventions I</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>KINE 5348 Pathophysiology and Pharmacology I</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KINE 5221 Clinical Athletic Training II</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td><strong>Semester total credit hours</strong></td>
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<table>
<thead>
<tr>
<th>Spring Semester</th>
<th>Credit hours</th>
<th>Completed hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINE 5431 Orthopedic Assessment II</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>KINE 5434 Therapeutic Interventions II</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>KINE 5222 Clinical Athletic Training III</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td><strong>Semester total credit hours</strong></td>
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</table>

## Second Year

<table>
<thead>
<tr>
<th>Summer Session</th>
<th>Credit hours</th>
<th>Completed hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINE 5226 Pathophysiology and Pharmacology II (11-week term)</td>
<td>2</td>
<td></td>
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<tr>
<td>KINE 5347 Advanced Functional Assessment and Corrective Exercise (Second Summer session- 5-week term)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KINE 5223 Clinical Athletic Training IV (11-week term)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td><strong>Semester total credit hours</strong></td>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Credit hours</th>
<th>Completed hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINE 5333 Health Care Administration</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KINE 5227 Literature and Research for the Athletic Trainer</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>KINE 5341 Immediate and Emergency Care I</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KINE 5224 Clinical Athletic Training V</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td><strong>Semester total credit hours</strong></td>
<td><strong>10</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Spring Semester</th>
<th>Credit hours</th>
<th>Completed hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINE 5228 Seminar in Athletic Training</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>KINE 5344 Scholarship in Athletic Training</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KINE 5342 Immediate and Emergency Care II</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KINE 5225 Clinical Athletic Training VI</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td><strong>Semester total credit hours</strong></td>
<td><strong>10</strong></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX E:  BBP and Exposure Control Plan

THE UNIVERSITY OF TEXAS AT ARLINGTON
ATHLETIC TRAINING PROGRAM
BLOOD-BORNE PATHOGENS EXPOSURE CONTROL PLAN

Purpose

The purpose of the Blood-Borne Pathogens Exposure Control Plan is to:

- Eliminate or minimize occupational exposure to blood or certain other body fluids.

This policy is subject to updates as new knowledge is acquired.

Definitions

Reference: http://www.osha.gov/

Bloodborne Pathogens means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Contaminated means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

Personal Protective Equipment (PPE) is specialized clothing or equipment worn by an employee for protection against a hazard (e.g., gloves, CPR barrier).

Universal Precautions is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens. Potentially infectious body fluids include: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, saliva in dental procedures, any body fluid visibly contaminated with blood, all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

Personal Protection

A. Universal Precaution Procedures

Athletic trainers and athletic training students will perform their duties with the understanding that body fluids and medical waste may be infectious. Please adhere to the following Universal Precaution procedures:

1. Treat all situations involving potential contact with blood, body fluids or medical waste with caution. Use Personal Protective Equipment (PPE) including gloves and micro-shields for CPR.
   a. Gloves should be carried at all practice and game situations and are readily available in the Stadium Athletic Training Room, Texas Hall Athletic Training Room, and the Athletic Training Education Laboratory.
      i. The gloves must be replaced if torn, punctured, contaminated, or if their ability to function as a barrier is compromised.
   b. Pocket masks or micro-shields are located in each athletic training kit and in the Stadium Athletic Training Room, Texas Hall Athletic Training Room, and the Athletic Training Education Laboratory. They are also located along with portable AED units.

2. Wash hands after contact with any bodily substance or articles contaminated with a
bodily substance. Use liquid soap from a dispenser, not bar soap. Athletic trainers and athletic training students must have immediate access to cleaning supplies and must not be required to wait for appropriate washing.

3. When unanticipated exposure occurs, remove contaminated substances by avoiding contact with the outer surface and washing hands and other skin surfaces immediately and thoroughly. If splashed in eyes, nose or mouth, flush with water immediately.

B. Disposal

1. A sharps box will be located in each athletic training facility for disposal of all blades, needles and glass products used for treatment of injuries of laboratory experiments. Following use, all needles will be placed in a sharps container without recapping or removing from the syringe. Scalpel blades will be removed with tweezers and discarded in a sharps box. The tweezers and scalpel handle will then be disinfected by procedure. Following injections by physicians, glass ampules will be discarded in a sharps box.

2. Blood contaminated soft goods (ie. bandages, bandaids, cotton tip applicators, gauze, towels, etc.) will be placed in biohazard bags/bins located in each athletic training facility. Bags are red and will be in an enclosed container marked with a Biohazard sticker. All used gloves should be placed in these containers.

3. When sharps boxes or biohazard bags are full it will be the responsibility of the athletic trainer in charge of the facility to contact the UT Arlington Environmental Safety Office (PH: (817) 272-2185 FX: (817) 272-2144 EMAIL: ehsafety@uta.edu) for removal and disposal.

C. Disinfection

1. Tables and work areas will be disinfected with medical grade cleaning solution rated to eliminate blood-borne pathogens (i.e., Iso-Quin or Cavicide) at the end of each treatment session and at the end of the working day. Use PPE while cleaning.
   i. For specific spills of bloody fluids, the medical grade solution will be placed on the area and allowed to sit for 10 minutes. The fluid will then be absorbed using paper towels. The person performing this duty will wear gloves. The gloves and towel(s) will then be placed in the Biohazard container.

2. Instruments will be disinfected by the following procedures. Following use instrument will be placed in the designated disinfection tray. At the end of the day all used instruments will be soaked thoroughly, rinsed and the instruments then placed back into the original instrument tray.

D. Vaccination

1. All athletic training students need to obtain or provide proof of previous vaccination for the hepatitis B virus (HBV). Staff athletic trainers will be offered a vaccination for the hepatitis B virus (HBV) as per OSHA rules.

2. However, if an athletic training student declines vaccination, the student must sign a waiver form (Attachment B).

E. Training

1. Training will be conducted at the beginning of each academic year in August at
the Athletic Training Program In-service. The program will be conducted by the Program Director, Clinical Coordinator, and Staff Athletic trainers and will consist of demonstration of the above procedures and review of UT Arlington policies.

F. Post Exposure Evaluation and Follow-up
   1. Should an exposure incident occur follow the UTA Exposure Control Policy. Also, contact your Clinical Preceptor and Meredith Decker, Clinical Education Coordinator to make them aware of the incident.
EXPOSURE INCIDENT REPORT - Athletic Training Program
Please Print

Employee's Name _________________________________ Date ___/___/____
Date of Birth ___/___/____
Telephone (Home) _________________________ (Work) ______________________
Job Title ____________________________________________________
Date of Exposure ___/___/______ Time of Exposure _________ AM ___ PM ___
Hepatitis B Vaccination Status _____________________________________
Location of Incident ___________________________________________
Describe what job duties you were performing when the exposure incident occurred:
________________________________________________________________________
________________________________________________________________________
Describe the circumstances under which the exposure incident occurred:
________________________________________________________________________
________________________________________________________________________
Name the body fluids, if any, that you were exposed to:
________________________________________________________________________
Describe the route of exposure (mucosal contact, contact with non-intact skin,
percutaneous):
________________________________________________________________________
Describe any personal protective equipment (PPE) in use at time of exposure incident:
________________________________________________________________________
Did PPE fail? ____________ If yes, how?
________________________________________________________________________
Identification of source individual(s) name(s):
________________________________________________________________________
Other pertinent information:
________________________________________________________________________

Complete this form and return to Meredith Decker, ATC, LAT, Clinical Education
Coordinator Athletic Training Program in PEB 112F (817-272-3134). This record is
to be kept for the duration of the individual’s term at UT Arlington plus 7 years.
Attachment B

**Hepatitis B Vaccine Declination Form**
I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B.

________________________________ ____________________________
Athletic Training Student Signature   Witness Signature

________________________________
Name (Printed)                     Name (Printed)

________________________________
Date                                Date
APPENDIX F: Clinical Level Descriptions

CLINICAL LEVEL DESCRIPTIONS

Clinical Level descriptions are provided for each level within the MSAT Program.

THE UNIVERSITY OF TEXAS AT ARLINGTON
Athletic Training Program

LEVEL IA-SUMMER MASTER OF SCIENCE ATHLETIC TRAINING STUDENT

Level IA-Summer ATS will have completed the following coursework by mid-August of the first year:

KINE 5420 Concepts of Athletic Training
KINE 5220 Preventative and Acute Care Techniques in Athletic Training
KINE 5120 Clinical Athletic Training I

This coursework, including lecture and laboratory experiences, has prepared the Level IA-Summer student to perform the following tasks and responsibilities under the supervision of their clinical preceptor:

1. Wound care/Universal precautions
2. General taping, wrapping, and padding of upper and lower extremities
3. CPR & emergency first aid
4. Bracing and protective equipment fitting
5. Athlete stretching and warm-up
6. Splinting and crutch-fitting
7. Nutrition and hydration techniques for athletes before, during, and after practices and games
8. Assessment of environment and awareness of precautions or actions necessary for safe participation
9. Set-up and application of superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze))
10. Taking vital signs

Based on instructions at clinical site via clinical preceptor, as applicable:

1. Practice and Game set-up
2. File paperwork
3. Record daily treatments
4. Monitor rehabilitation programs
During the fall academic semester, Level IA-Fall MSAT students will be enrolled in the following courses (lecture and lab):

- KINE 5430 Orthopedic Assessment I
- KINE 5433 Therapeutic Interventions I
- KINE 5348 Pathophysiology and Pharmacology I (starting Fall 2017)
- KINE 5130/5221 Clinical Athletic Training II

As the students progress through these courses and demonstrate mastery of the required knowledge and skills, they will begin practicing the following tasks within their clinical assignments under the supervision of their clinical preceptor:

11. Evaluation and management of lower extremity injuries, including evidence based research on lower extremity special tests
12. History-taking of general medical conditions
13. Set-up and application of manual therapy techniques including massage, joint mobilizations, and muscle energy
14. Evidence based research of best practices in athletic training related to therapeutic modalities including: superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze))
15. Evidence based research of best practices in athletic training related to therapeutic rehabilitation of lower extremity injuries
16. Develops and implements psychosocial techniques for athletes and others involved in physical activity in regards to injury management, stress reduction, disordered eating, and substance abuse intervention, etc.

This coursework, including lecture and laboratory experiences, has prepared the Level IA-Summer student to perform the following tasks and responsibilities under the supervision of their clinical preceptor:

1. Practice and Game set-up
2. File paperwork
3. Record daily treatments
4. Monitor rehabilitation programs
5. Wound care/Universal precautions
6. General taping, wrapping, and padding of upper and lower extremities
7. CPR & emergency first aid
8. Bracing and protective equipment fitting
9. Athlete stretching and warm-up
10. Splinting and crutch-fitting
11. Nutrition and hydration techniques for athletes before, during, and after practices and games
12. Assessment of environment and awareness of precautions or actions necessary for safe participation
13. Set-up and application of superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze))
14. Taking vital signs
LEVEL IB-SPRING MASTER SCIENCE ATHLETIC TRAINING STUDENT

Level IB-Spring Athletic Training Students will have completed the following coursework:

- KINE 5420 Concepts of Athletic Training
- KINE 5220 Preventative and Acute Care Techniques in Athletic Training
- KINE 5120 Clinical Athletic Training I
- KINE 5430 Orthopedic Assessment I
- KINE 5433 Therapeutic Interventions I
- KINE 5348 Pathophysiology and Pharmacology I (starting Fall 2017)
- KINE 5130/5221 Clinical Athletic Training II

This coursework, coupled with the previous clinical practicum experiences, have prepared the Level IB ATS to perform the following tasks and responsibilities under the supervision of their clinical preceptor:

1. Practice and Game set-up
2. File paperwork
3. Record daily treatments
4. Monitor rehabilitation programs
5. Wound care/Universal precautions
6. General taping, wrapping, and padding of upper and lower extremities
7. CPR & emergency first aid
8. Bracing and protective equipment fitting
9. Athlete stretching and warm-up
10. Splinting and crutch-fitting
11. Nutrition and hydration techniques for athletes before, during, and after practices and games
12. Assessment of environment and awareness of precautions or actions necessary for safe participation
13. Set-up and application of superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze)
14. Taking vital signs
15. Evaluation and management of lower extremity injuries, including evidence based research on lower extremity special tests
16. History-taking of general medical conditions
17. Set-up and application of manual therapy techniques including massage, joint mobilizations, and muscle energy
18. Evidence based research of best practices in athletic training related to therapeutic modalities including: superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze))
19. Evidence based research of best practices in athletic training related to therapeutic rehabilitation of lower extremity injuries
20. Develops and implements psychosocial techniques for athletes and others involved in physical activity in regards to injury management, stress reduction, disordered eating, and substance abuse intervention, etc.
During the spring academic semester, Level IB ATS will be enrolled in the following courses:

- KINE 5431 Orthopedic Assessment II
- KINE 5434 Therapeutic Interventions II
- KINE 5140/5222 Clinical Athletic Training III

As the ATS progress through these courses and demonstrate mastery of the required knowledge and skills, they will begin applying the following tasks within their clinical assignments under the supervision of their clinical preceptor:

1. Evaluation and management of upper extremity injuries
2. Set-up and application of electrotherapy, ultrasound therapy, diathermy, and laser/light modalities
3. Evidence based research of best practices in athletic training related to electrical modalities and upper extremity.
LEVEL II A-SUMMER MASTER SCIENCE ATHLETIC TRAINING STUDENT

Level IIA Summer ATS will have completed the following coursework:

- KINE 5420 Concepts of Athletic Training
- KINE 5220 Preventative and Acute Care Techniques in Athletic Training
- KINE 5120 Clinical Athletic Training I
- KINE 5430 Orthopedic Assessment I
- KINE 5433 Therapeutic Interventions I
- KINE 5348 Pathophysiology and Pharmacology I (starting Fall 2017)
- KINE 5130/5221 Clinical Athletic Training II
- KINE 5431 Orthopedic Assessment II
- KINE 5434 Therapeutic Interventions II
- KINE 5140/5222 Clinical Athletic Training III

This coursework, coupled with the previous clinical practicum experiences, have prepared the Level IB-Summer ATS to perform the following tasks and responsibilities under the supervision of their clinical preceptor:

1. Practice and Game set-up
2. File paperwork
3. Record daily treatments
4. Monitor rehabilitation programs
5. Wound care/Universal precautions
6. General taping, wrapping, and padding of upper and lower extremities
7. CPR & emergency first aid
8. Bracing and protective equipment fitting
9. Athlete stretching and warm-up
10. Splinting and crutch-fitting
11. Nutrition and hydration techniques for athletes before, during, and after practices and games
12. Assessment of environment and awareness of precautions or actions necessary for safe participation
13. Set-up and application of superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze))
14. Taking vital signs
15. Evaluation and management of lower extremity injuries, including evidence based research on lower extremity special tests
16. History-taking of general medical conditions
17. Set-up and application of manual therapy techniques including massage, joint mobilizations, and muscle energy
18. Evidence based research of best practices in athletic training related to therapeutic modalities including: superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze))
19. Evidence based research of best practices in athletic training related to therapeutic rehabilitation of lower extremity injuries
20. Develops and implements psychosocial techniques for athletes and others involved in physical activity in regards to injury management, stress reduction, disordered eating, and substance abuse intervention, etc.
21. Evaluation and management of upper extremity injuries
22. Set-up and application of electrotherapy, ultrasound therapy, diathermy, and laser/light modalities
23. Evidence based research of best practices in athletic training related to electrical modalities and upper extremity.
During this academic semester, Level IIA Summer students will be taking the following courses:

- KINE 5432 Pathophysiology and Pharmacology (ending summer 2017 [applicable to the cohort entering 2016])
- KINE 5226 Pathophysiology and Pharmacology II (starting summer 2018 [applicable to the cohort entering 2017])
- KINE 5392 Special Topics: Advanced Functional Assessment and Corrective Exercise (ending summer 2017 [applicable to the cohort entering 2016])
- KINE 5347 Advanced Functional Assessment and Corrective Exercise (starting summer 2018 [applicable to the cohort entering 2017])
- KINE 5223 Clinical Athletic Training IV (starting summer 2018 [applicable to the cohort entering 2017; no practicum required for the cohort that entered in 2016])

As the students progress through these courses and demonstrate mastery of the required knowledge and skills, they will begin practicing the following tasks within their clinical assignments under the supervision of their clinical preceptor:

1. Evaluation and management of general medical conditions
2. Demonstrates use of various equipment related to general medical conditions such as: otoscope, glucometer, ophthalmoscope, thermometer, pulse oximeter, stethoscope, peak flow meter, epi-pen, inhaler, nebulizer, urinalysis, etc.
3. Performs cardiac, pulmonary, and abdominal assessment, including auscultations, percussions, and palpations
4. Practices the application and analysis of the Selective Functional Movement Assessment and Functional Movement Screen
5. Practices the application and analysis of Overhead Squat and Single Leg Squat
6. Practices identifying kinetic chain dysfunctions and the application of corrective exercises
LEVEL IIA-FALL MASTER SCIENCE ATHLETIC TRAINING STUDENT

Level IIA-Fall ATS will have completed the following coursework:

- KINE 5420 Concepts of Athletic Training
- KINE 5220 Preventative and Acute Care Techniques in Athletic Training
- KINE 5120 Clinical Athletic Training I
- KINE 5430 Orthopedic Assessment I
- KINE 5433 Therapeutic Interventions I
- KINE 5348 Pathophysiology and Pharmacology I (starting Fall 2017)
- KINE 5130/5221 Clinical Athletic Training II
- KINE 5431 Orthopedic Assessment II
- KINE 5434 Therapeutic Interventions II
- KINE 5140/5222 Clinical Athletic Training III
- KINE 5432 Pathophysiology and Pharmacology (ending summer 2017 [applicable to the cohort entering 2016])
- KINE 5226 Pathophysiology and Pharmacology II (starting summer 2018 [applicable to the cohort entering 2017])
- KINE 5392 Special Topics: Advanced Functional Assessment and Corrective Exercise (ending summer 2017 [applicable to the cohort entering 2016])
- KINE 5347 Advanced Functional Assessment and Corrective Exercise (starting summer 2018 [applicable to the cohort entering 2017])
- KINE 5223 Clinical Athletic Training IV (starting summer 2018 [applicable to the cohort entering 2017; no practicum required for the cohort that entered in 2016])

This coursework, coupled with the previous clinical practicum experiences, have prepared the ELM Level IIA ATS to perform the following tasks and responsibilities under the supervision of their clinical preceptor:

1. Practice and Game set-up
2. File paperwork
3. Record daily treatments
4. Monitor rehabilitation programs
5. Wound care/Universal precautions
6. General taping, wrapping, and padding of upper and lower extremities
7. CPR & emergency first aid
8. Bracing and protective equipment fitting
9. Athlete stretching and warm-up
10. Splinting and crutch-fitting
11. Nutrition and hydration techniques for athletes before, during, and after practices and games
12. Assessment of environment and awareness of precautions or actions necessary for safe participation
13. Set-up and application of superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze)
14. Taking vital signs
15. Evaluation and management of lower extremity injuries, including evidence based research on lower extremity special tests
16. History-taking of general medical conditions
17. Set-up and application of manual therapy techniques including massage, joint mobilizations, and muscle energy
18. Evidence based research of best practices in athletic training related to therapeutic modalities including: superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze))
19. Evidence based research of best practices in athletic training related to therapeutic rehabilitation of lower extremity injuries
20. Develops and implements psychosocial techniques for athletes and others involved in physical activity in regards to injury management, stress reduction, disordered eating, and substance abuse intervention, etc.
21. Evaluation and management of upper extremity injuries
22. Set-up and application of electrotherapy, ultrasound therapy, diathermy, and laser/light modalities
23. Evidence based research of best practices in athletic training related to electrical modalities and upper extremity.
24. Evaluation and management of general medical conditions
25. Demonstrates use of various equipment related to general medical conditions such as: otoscope, glucometer, ophthalmoscope, thermometer, pulse oximeter, stethoscope, peak flow meter, epi-pen, inhaler, nebulizer, urinalysis, etc.
26. Performs cardiac, pulmonary, and abdominal assessment, including auscultations, percussions, and palpations
27. Performs and analyzes the Selective Functional Movement Assessment and Functional Movement Screen
28. Performs and analyzes the Overhead Squat and Single Leg Squat
29. Identifies kinetic chain dysfunctions and applies corrective exercises

During this academic semester, ELM Level IIA-FallATS students will be taking the following courses:

- KINE 5333 Health Care Administration
- KINE 5227 Literature and Research for the Athletic Trainer
- KINE 5341 Immediate and Emergency Care I
- KINE 5150/5224 Clinical Athletic Training V

As the ATS progress through these courses and demonstrate mastery of the required knowledge and skills, they will begin practicing the following tasks within their clinical assignments under the supervision of their clinical preceptor:

1. Assist supervising athletic trainers with insurance filing and associated paperwork
2. Demonstrates appropriate communication skills to effectively communicate and work with physicians, EMTs, allied health care professionals, and family members
3. Demonstrates an understanding of facility design concepts
4. Demonstrates an understanding of administrative plans

**LEVEL IIB-SPRING MASTER SCIENCE ATHLETIC TRAINING STUDENT**

Level IIB-Spring ATS will have completed the following coursework:

- KINE 5420 Concepts of Athletic Training
- KINE 5220 Preventative and Acute Care Techniques in Athletic Training
- KINE 5120 Clinical Athletic Training I
- KINE 5430 Orthopedic Assessment I
- KINE 5433 Therapeutic Interventions I
- KINE 5348 Pathophysiology and Pharmacology I (starting Fall 2017)
- KINE 5130/5221 Clinical Athletic Training II
KINE 5431 Orthopedic Assessment II
KINE 5434 Therapeutic Interventions II
KINE 5140/5222 Clinical Athletic Training III
KINE 5432 Pathophysiology and Pharmacology (ending summer 2017 [applicable to the cohort entering 2016])
KINE 5226 Pathophysiology and Pharmacology II (starting summer 2018 [applicable to the cohort entering 2017])
KINE 5392 Special Topics: Advanced Functional Assessment and Corrective Exercise (ending summer 2017 [applicable to the cohort entering 2016])
KINE 5347 Advanced Functional Assessment and Corrective Exercise (starting summer 2018 [applicable to the cohort entering 2017])
KINE 5223 Clinical Athletic Training IV (starting summer 2018 [applicable to the cohort entering 2017; no practicum required for the cohort that entered in 2016])
KINE 5333 Health Care Administration
KINE 5227 Literature and Research for the Athletic Trainer
KINE 5341 Immediate and Emergency Care I
KINE 5150/5224 Clinical Athletic Training V

This coursework, coupled with the previous clinical practicum experiences, have prepared the Level IIB-Spring ATS to perform the following tasks and responsibilities under the supervision of their clinical preceptor:

1. Practice and Game set-up
2. File paperwork
3. Record daily treatments
4. Monitor rehabilitation programs
5. Wound care/Universal precautions
6. General taping, wrapping, and padding of upper and lower extremities
7. CPR & emergency first aid
8. Bracing and protective equipment fitting
9. Athlete stretching and warm-up
10. Splinting and crutch-fitting
11. Nutrition and hydration techniques for athletes before, during, and after practices and games
12. Assessment of environment and awareness of precautions or actions necessary for safe participation
13. Set-up and application of superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze)
14. Taking vital signs
15. Evaluation and management of lower extremity injuries, including evidence based research on lower extremity special tests
16. History-taking of general medical conditions
17. Set-up and application of manual therapy techniques including massage, joint mobilizations, and muscle energy
18. Evidence based research of best practices in athletic training related to therapeutic modalities including: superficial cooling and heating modalities (cryotherapy, hydrocollator, paraffin bath, whirlpool, skin preparations (Biofreeze))
19. Evidence based research of best practices in athletic training related to therapeutic rehabilitation of lower extremity injuries
20. Develops and implements psychosocial techniques for athletes and others involved in physical activity in regards to injury management, stress reduction, disordered eating, and substance abuse intervention, etc.
21. Evaluation and management of upper extremity injuries
22. Set-up and application of electrotherapy, ultrasound therapy, diathermy, and laser/light modalities
23. Evidence based research of best practices in athletic training related to electrical modalities and pper extremity.
24. Evaluation and management of general medical conditions
25. Demonstrates use of various equipment related to general medical conditions such as: otoscope, glucometer, opthalmoscope, thermometer, pulse oximeter, stethoscope, peak flow meter, epipen, inhaler, nebulizer, urinalysis, etc.
26. Performs cardiac, pulmonary, and abdominal assessment, including auscultations, percussions, and palpations
27. Performs and analyzes the Selective Functional Movement Assessment and Functional Movement Screen
28. Performs and analyzes the Overhead Squat and Single Leg Squat
29. Identifies kinetic chain dysfunctions and applies corrective exercises
30. Assist supervising athletic trainers with insurance filing and associated paperwork
31. Demonstrates appropriate communication skills to effectively communicate and work with physicians, EMTs, allied health care professionals, and family members
32. Demonstrates an understanding of facility design concepts
33. Demonstrates an understanding of administrative plans

During this academic semester, the Level IIB-Spring ATS students will be taking the following courses:

KINE 5228 Seminar in Athletic Training
KINE 5344 Scholarship in Athletic Training
KINE 5342 Immediate and Emergency Care II
KINE 5160 Clinical Athletic Training V (ending spring 2018 [applicable to the cohort entering 2016])
KINE 5225 Clinical Athletic Training VI (starting spring 2018 [applicable to the cohort entering 2017])

As the ATS progress through these courses and demonstrate mastery of the required knowledge and skills, they will begin practicing the following tasks within their clinical assignments under the supervision of their clinical preceptor:

1. Research project preparation and presentation
2. Identify transition to practice issue (budgeting, negotiating salary, and other applicable topics)
3. Resume preparation and job interviewing skills
4. Demonstrates the ability to use ethnic and cultural sensitivity in communicating with diverse community populations
APPENDIX G

NATA CODE OF ETHICS

last updated September 28, 2005

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.

BOC STANDARDS FOR PROFESSIONAL PRACTICE

BOC Standards of Professional Practice:

I, _________________________________ (printed name), hereby acknowledge that I have reviewed and understand the policies and procedures contained within the 2017-2018 ATP Policies & Procedures Handbook. I understand that these policies and procedures govern all aspects of the academic and clinical components of the UT Arlington ATP.

I further understand that failure to abide by these written policies and procedures may result in my dismissal, probation, or suspension from the UT Arlington ATP and the academic degree. Further, I realize that students may be removed from the program for academic and/or professionalism violations.

_______________________________________
AT Student Signature

____________________
Date

_______________________________________
Witness Printed Name

_______________________________________
Witness Signature

____________________
Date Witnessed

_______________________________________
AT Faculty Signature

____________________
Date
I, _________________________________ (printed name), hereby acknowledge that I have read and understand all of the policies and procedures contained within the 2017-2018 ATP Policies & Procedures Handbook. I understand that these policies and procedures govern all aspects of the academic and clinical components of the UT Arlington ATP.

I further understand that failure to abide by these written policies and procedures may result in my dismissal from the UT Arlington ATP and the academic degree.

_______________________________________
Athletic Training Student Signature

_______________________________________
Date

_______________________________________
Witness Signature

_______________________________________
Date