University of Central Missouri’s Athletic Training Program is a CAATE accredited athletic training program. Any new or revised guidelines, procedures and/or policies will supersede the existing standards and ALL Athletic Training Students will be subject to comply with these updated guidelines and policies.
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SECTION I: INTRODUCTION TO ATHLETIC TRAINING AND THE UNIVERSITY OF CENTRAL MISSOURI

ATHLETIC TRAINING PROGRAM
UNIVERSITY OF CENTRAL MISSOURI

Athletic Training is one of several allied health professions that together with doctors, nurses, pharmacists, and other medical specialists make up a sports medicine team. University of Central Missouri (UCM) Athletic Training Program (ATP) offers a co-educational program that requires students to obtain hours and clinical experiences simultaneously. UCM’s ATP prepares students for certification via the Board of Certification, Inc. (BOC) as well as establishes a foundation for successful entry into the profession. Athletic Training Students (ATS) at UCM progress through several levels of competency during their academic and practical experience.

NATA CODE OF ETHICS

The Code of Ethics of the National Athletic Trainers’ Association (NATA) has been written to make the membership aware of the principles of ethical behavior expected in the practice of athletic training. The primary goal of the Code is the assurance of high-quality health care. The Code presents aspirational standards of behavior that all members should strive to achieve. The principles cannot be expected to cover all specific situations that may be encountered by the practicing athletic trainer, but should be considered representative of the spirit with which athletic trainers should make decisions. The principles are written generally and the circumstances of a situation will determine the interpretation and application of a given principal and of the Code as a whole. Whenever there is a conflict between the Code and legality, the laws prevail. The guidelines set forth in this Code are subject to criminal review and revision as the athletic training profession develops and changes.

Principle 1:
Members shall practice with compassion, respecting the rights, welfare and dignity of all individuals.

Principle 2:
Members shall comply with the laws and regulations governing the practice of athletic training, National Athletic Training Association (NATA) membership standards, and the NATA Code of Ethics.

Principle 3:
Members shall maintain and promote high standards in their provision of services.

Principle 4:
Members shall not engage in conduct that could be construed as a conflict of interest, reflects negatively on the Athletic Training profession, or jeopardizes a patient’s health and well-being.

For a complete copy of the ethics and for information reporting violation of the ethics visit the NATA web page. http://www.nata.org/membership/about-membership/member-resources/code-of-ethics
THE CERTIFIED ATHLETIC TRAINER

The licensed and certified Athletic Trainer is a highly educated and skilled professional specializing in athletic health care. In cooperation with physicians and other allied health personnel, the Athletic Trainer functions as an integral member of the athletic health care team in secondary schools, colleges and universities, sports medicine clinics, professional sports programs and other athletic health care settings.

At minimum, an Athletic Trainer must have an educational background of a bachelor’s degree in Athletic Training. Those pursuing Athletic Training study athletic training content specific, human anatomy, human physiology, biomechanics, exercise physiology, nutrition, disease pathology, pharmacology and psychology. As part of their education, students participate extensively in clinical experiences with appropriate supervision.

By matriculating through an ATP, candidates fulfill the requirements for certification established by the Board of Certification, Inc. (BOC) and become eligible to sit for examination. A committee made up of BOC Certified Athletic Trainers prepares exam content, and questions are validated by a panel of independent judges in item writing groups, referenced to current resources from the literature on or related to athletic training and repeatedly edited and verified for clarity and content. Questions satisfy the exam specifications of the Practice Analysis. Questions are developed to assess the candidate's knowledge on subject matter from the five domains of athletic training:

- Injury and Illness Prevention and Wellness Promotion
- Examination, Assessment and Diagnosis
- Immediate and Emergency Care
- Therapeutic Intervention
- Healthcare Administration and Professional Responsibility

Once athletic training students pass the certification examination proving proof of skills and knowledge within each of the five domains, as well as satisfy application requirements-- the designation “ATC” is granted and is used as the professional credential. Additional requirements prior to practice are state dependent.

APPROPRIATE USE OF THE TERMS ATHLETIC TRAINER AND ATHLETIC TRAINING STUDENT

Athletic Trainer (AT) is a term exclusive to someone who has passed the BOC examination for athletic training certification and in most states, they must be licensed as an athletic trainer to be called/considered/work as an athletic trainer or call his or herself an Athletic Trainer.

Athletic Training Student (ATS) is a term exclusive to students enrolled in CAATE accredited ATPs. This term is only appropriate for ATP reference at affiliated clinical sites, time spent in the classroom, and formal, supervised athletic training clinical experiences that include other sanctioned time frames, e.g. preseason.
An ATS may not at any time promote themselves as being an athletic trainer nor can they function in any manner independently as an athletic trainer until the credential is officially granted.

**GENERAL PERSONAL AND SOCIAL CONDUCT POLICY**

It is a privilege to be a member of the Athletic Training Program, it is not a right. Students must conduct themselves in an exemplary manner at all times. Any misconduct may result in an indefinite probation period or dismissal, determined by the Athletic Training Program faculty. When traveling with an athletic team or attending a professional convention, students are to conduct themselves by the rules that the coach of that team has established and the ethical standards of the National Athletic Trainers' Association (See the *NATA Code of Ethics*).

Professional boundaries and professional conduct will be maintained at all times. Athletic Training Students or First Years will not become involved with relationships or conduct that comprises professional boundaries. Any evidence of intimate relationships, inappropriate conduct or inappropriate relationships with peers is an indication that a problem exists and can carry significant repercussions.

**SECTION II: ACADEMIC PROGRAM POLICIES AND INFORMATION**

**UNIVERSITY MISSION**

The University of Central Missouri (UCM) disseminates knowledge that transforms students into leaders who possess the aptitudes, skills and confidence to succeed.

**SCHOOL OF NUTRITION, KINESIOLOGY, AND PSYCHOLOGICAL SCIENCES MISSION**

UCM's Nutrition and Kinesiology Department's mission is to develop successful professionals in Nutrition and Kinesiology, instilling an appreciation for helping all people lead healthy and physically active lifestyles.

**NATIONAL ATHLETIC TRAINERS ASSOCIATION MISSION**

The mission of the National Athletic Trainers' Association is to represent, engage and foster the continued growth and development of the athletic training profession and athletic trainers as unique health care providers.

**COMMISSION ON ACCREDITATION OF ATHLETIC TRAINING EDUCATION MISSION**

Defining, measuring, and continually improving AT Education.

**BOARD OF CERTIFICATION MISSION**

To provide exceptional credentialing programs for healthcare professionals to assure protection of the public.
UCM’s ATHLETIC TRAINING PROGRAM MISSION
The mission of the UCM Athletic Training Program is to provide the highest quality of professional preparation that promotes the development of future athletic trainers. In doing so, the UCM Athletic Training Program will provide an environment conducive to learning, instill the desire for academic excellence, and foster a spirit of professionalism.

The charge of UCM undergraduate athletic training program is to provide a comprehensive, progressive education and clinical foundation to prepare the multi-skilled professional for a career in athletic training. By embracing the following goals and objectives, the collective missions of the University of Central Missouri, School of Nutrition, Kinesiology, & Psychological Sciences and the Athletic Training Program may be fulfilled.

AN ENVIRONMENT CONDUCIVE FOR LEARNING
UCM offers Athletic Training Students a balance of clinical and didactic experiences. The clinical component of the program offers practical experience under the direct supervision of selected preceptors. The clinical experience is organized to promote self-directed learning. These aspects, coupled with a variety of teaching and learning strategies, provide students a wide range of learning opportunities.

DESIRE FOR ACADEMIC EXCELLENCE
University of Central Missouri Athletic Training Program maintains high academic standards and promotes scholarly activity. The program uses the latest technology, independent study, and collaborative learning to attain appropriate skills and competencies, as well as, promote academic excellence.

A SPIRIT OF PROFESSIONALISM
The ATP at UCM fosters a spirit of professionalism by encouraging student involvement in local, state, regional, and national athletic training associations. The athletic training program also facilitates professionalism by modeling professional standards of practice in the student’s clinical setting. It is our intention to provide the best educational experience possible for each student matriculated in the ATP.

Objectives for the ATP are to educate students in the field of athletic training to serve the scholastic, intercollegiate, professional, and recreational athletes who are participating in sport (in the sense of being physically active), whether formally or informally. These objectives are aimed to assist in the development and advancement of the students toward the fruition of their life goals while attempting to develop and/or maintain the positive role model atmosphere.

GOALS AND OBJECTIVES OF THE ATP
1. GOAL #1: To provide students with the opportunity to develop the knowledge and skills needed for an entry-level position as a Certified Athletic Trainer.
1. Comprehend and assimilate the domains of athletic training
2. Comprehend and exemplify the BOC Practice Analysis
3. Be an engaged learner in all aspects of one’s own education

2. GOAL #2: To integrate classroom knowledge with clinical practice.
   1. Apply learned didactic concepts at assigned clinical rotations
   2. Continually apply evidence based medicine in clinical practice
   3. Synthesize and apply all education competencies and clinical proficiencies through one's educational experience

3. GOAL #3: To prepare athletic training students for their future roles in the health care of the physically active within the allied health community.
   1. Actively participate in the health care community
   2. Appreciate the evolving nature of the health care community
   3. Be an agent of change with the growth of the athletic training profession
   4. Engage in integrated medical education

4. GOAL #4: To provide an open and receptive learning environment in both didactic and clinical settings.
   1. Develop and model best clinical practices
   2. Make ethical clinical decisions
   3. Demonstrate cultural competence

5. GOAL #5: To provide athletic training students with the necessary knowledge to remain current in the athletic training profession and be a life-long learner.
   1. Attend athletic training conferences or other educational venues that promote current topics and trends in the profession
   2. Adhere to the requirements to maintain proper credentials once certified
   3. Promote the athletic training profession

STUDENT LEARNING OUTCOMES (SLOS) OF THE ATP
The charge of UCM undergraduate athletic training program is to provide a comprehensive, progressive education, and clinical foundation to prepare the multi-skilled professional for a career in athletic training. By embracing the following goals and objectives, the collective missions of University of Central Missouri, Department of Nutrition & Kinesiology and the Athletic Training Education Program may be fulfilled.

1. Students will demonstrate delivery of comprehensive health care to designated populations, consistent with best practices in the profession.
2. Students will demonstrate the capacity to effectively engage in and make contributions to interdisciplinary health care in a diverse number of settings.
3. Students will demonstrate proficiency in assessment of pathologies, both illness and injury, including development of differential diagnoses.
4. Students will demonstrate development of effective plans of care for patient populations, including the realm of emergency care response.
5. Students will demonstrate clinical proficiency in risk management including the prevention of injury and spread of infectious disease.
6. Students will demonstrate an ongoing awareness of the dynamics related to modern health care administration and delivery.

**EXPECTATIONS OF UCM ATHLETIC TRAINING STUDENTS**

- Conduct oneself in alignment with being an Allied Health Professional.
- Welcome any person entering an athletic training service facility by engaging with them immediately upon entry.
- ATS are a direct extension of supervising Certified Athletic Trainers, the Athletic Training Program and UCM. Please keep this in mind at all times, especially when in the public at sporting venues and in the community.
- Be courteous and patient in encounters with all people. This includes answering the phone and talking with coaches/administrators. Address coaches/administrators as: Yes sir or No ma'am.
- Do not schedule personal appointments during clinical hours. Exceptions will be made for emergencies and unavoidable conflicts only. Please notify a staff athletic trainer of any such problems immediately. Expect to be required to make-up for the time missed.
- Arrive 10 minutes early to ATP assignments.
- Be honest and sincere with all those you come in contact with (athletes, coaches, physicians, and other athletic trainers).
- Always act in a manner that reflects positively on the University of Central Missouri and the athletic training staff.
- Be respectful of others.
- Present oneself to others as a member of the medical profession. Be neat and clean in your physical appearance.
- Treat all patients without bias to sport or individuality.
- Lead by example, if something needing to be done is observed—take care responsibility for it.
- Adhere to the NATA Code of Ethics.

Athletic Training Students are a vital part of the athletic program. There is a wealth of learning and experience to be expected while at UCM. Ownership in the ATP is encouraged. Contributions and ideas for improvement are welcomed. Everyone shares the responsibility for improving the program.

**MANAGING DOWNTIME DURING CLINICAL ROTATIONS**

Enrichment of one’s clinical experience is an onus that is firmly placed on ATS. Being productive during the entire clinical experience is essential. Consider these recommendations to enhance the clinical experience:

1. Be curious about every aspect of the clinical experience including preceptors. Ask Questions.
2. Assist other athletic training students with administering treatments and/or rehabilitation and assist younger ATS with their clinical proficiencies. Students with daily proficiencies
3. Assist Preceptors or ATS with daily duties.
4. Always keep the athletic training facility neat and maintained by picking up things that are laying around, such as towels, cups, ice bags, trash on the floor, etc.
5. Most importantly keep in mind that the main objective is to learn as much as possible.
6. Place oneself in situations that will foster improvement as an athletic trainer.

DISCREPANCIES BETWEEN CLASSROOM LEARNING AND CLINICAL EXPERIENCES
Differences between what is taught and learned in the classroom vs. what is seen among practicing athletic training clinicians will occur as part of your education. This is no different than among other practice-based professions where research drives change. ATS are asked to embrace this fact and put themselves in a position to provide valuable input into the experiences shared with their preceptors as well as to bring these differences to the classroom. ATS are advised not to get into conflicts over who is right, or siding with one professional vs. another. An AT “toolbox” is only as good as the variety of exposures along the way. The greater the diversity in learning the more improvement will be enjoyed with regard to clinical decision-making. Because the end goal of matriculating through the program is to successfully pass the BOC exam, it is recommended that ATS accept evidence-based medicine as the basis of their knowledge. As a young professional, continue to develop alternate and adjunct techniques with every professional they encounter.
University of Central Missouri Athletics: Athletic Training and Athletic Training Program Organizational Chart

Athletics: Athletic Training

UCM Interim-President: Dr. Roger Best
AD: Jerry Hughes
Senior Associate AD: Kathy Anderson
Assistant AD for Facilities: Scott Thomason
Faculty Athletics Representative: Dr. Paul Englemann
Team Physicians:
Dr. David Glover
Dr. Brent Hoke
Dr. Drew Glover
Dr. Dana Brewington
*And Other Physicians Associated with CFSM, Columbia Orthopedics, and MOI
Athletic Training Staff:
Ron Dubuque
Crystal Meeks
Rebecca David
2nd Year GA ATs:
Amanda Dalton
Christian Vedard

Academic Affairs: ATP

UCM President: Dr. Roger Best
Provost: Dr. Phil Bridgmon
Dean: Dr. Alice Greife
NKPS School Chair: Dr. David Kreiner
ATP Medical Director: Dr. David Glover
AT Program Director: Dr. Brian Hughes
Clinical Education Coordinator: Molly Cuffe
ATP Instructors: Dr. Greg Williams
Preceptors:
See page 50 full list of preceptors
Athletic Training Students
Seniors

*CFSM – Central Family and Sports Medicine  MOI – Missouri Orthopedic Institute
SECTION III: POLICIES RELATED TO MAINTAINING PROFESSIONAL BOUNDARIES BY UCM ATHLETIC TRAINING STUDENTS and FIRST YEAR STUDENTS

MISCONDUCT

Examples of misconduct resulting in disciplinary action and possibly dismissal:
- Providing personal information such as contact information to any patient.
- Engaging in social media forums
  - with patients about anything related to being an ATS
  - that reflects negatively on the profession, program, and/or university
  - discussing the ATP, ATP members, or First Years
- Extending any athletic training care or services outside supervised clinical education time.
- Completing any type of coursework or acting as a tutor for any patient. (*The athletic department has tutors available to all student-athletes.)

RELATIONSHIPS WITH ATHLETES/PATIENTS

Clearly defined boundaries between patients (includes student-athletes) and ATS must be established and maintained at all times. It is part of the burden of being an ATS. Accept it.

Maintaining professional working relationships at all times with athletes/patients is expected by all Athletic Training Students regardless of the fact that these may be peers and classmates. Avoid all types of relationships with patients/student-athletes. This is termed fraternizing. Disciplinary action should be expected for those in violation. ATSs will be subject to dismissal for any conduct (inside or outside the ATP) or associated conduct that affects their performance as an athletic training student, interferes with a clinical rotation, or adversely impacts any other ATP member. There is to be NO EVIDENCE (witnessed or reported) of any relationships falling into this category. Verifiable actions such as social media, socializing, flirting, and athlete favoritism negatively reflects upon the ATP and will not be tolerated. ATS have privileged access to a specialized population. Using the clinical assignment as a social portal in any form or fashion will not be tolerated and the ATS will be subject to permanent dismissal.

Never discuss a patient’s injury or injury status with anyone other than the patient and the medical staff as permitted by HIPAA. Under no circumstances is a student-athlete’s injury to be discussed with other members of a team. Anything shared by a patient is part of medical confidentiality. All Athletic Training Students and First Years must adhere to all Federal HIPAA regulations or will be disciplined accordingly by the program and/or by Federal authorities. Whatever is seen or heard in any athletic training facility/health care facility stays in the athletic training facility/health care facility.
Interactions with Minors Policy

Athletic Trainers as affiliated with school districts must follow district wide teacher-minor and or employee-minor communications policies. The policies include oral communication and nonverbal personal communications in accordance with Section 162.069 of Missouri’s Amy Hestir Student Protection Act (http://www.senate.mo.gov/11info/BTS_Web/Bill.aspx?BillID=4066479&SessionType=R). In specific regard to electronic communications, the law states: “Teachers cannot have a nonwork-related website that allows exclusive access with a current or former student. Former student is defined as any person who was at one time a student at the school at which the teacher is employed and who is eighteen years of age or less and who has not graduated.” As an Athletic Training Student there will be several instances, in which you will work with minors throughout your duration in the program (e.g. Rehabilitation facilities, high schools, physician offices, etc.). Due to the sensitive nature of adult-minor relationships, it is imperative to have a unified front on adult-minor communications and relations. Therefore, Athletic Training Students are to have no contact with minors affiliated with any University of Central Missouri Athletic Training clinical sites outside of their directly supervised clinical field experience. Contacts can include face to face, verbal, written, and/or electronic communications. The policy also applies to all forms of social media including but not limited to blogs, Facebook, Twitter, SnapChat, Tumblr, and Instagram. Failure to abide by the policy will not be tolerated and the ATS will be subject to permanent dismissal. Any misconduct that breaches University, local, state, or federal laws will be turned over to the appropriate authorities.

NEWS MEDIA/SOURCES

In an effort to access sensitive and privileged medical and team information, members of various media groups may approach ATS during the clinical assignment. These attempts by agents to be “on the pulse” and “to get the latest scoop” violate privacy. Be aware that being approached by individuals trying to access this information may occur as an ATS. Under NO circumstances are ATS ever to discuss such matters with anyone other than appropriate medical personnel. Such information is highly confidential and protected by federal laws. Firmly decline to answer such questions and refer these individuals to staff athletic trainers, PR representatives, head coaches, or sports information directors. Any student that discusses this information outside the health care system may be subject to program dismissal.

OTHER PERSONNEL, e.g. professional scouts, recruiters, etc.

ATS need to be aware that individuals may approach them at any time due to their close association with patients, athletes, coaches, and teams. The News Media section above applies to how to handle such personnel.

TEAM PHYSICIANS, SPORTS MEDICINE TEAM MEMBERS, OTHER HEALTH CARE INDIVIDUALS

ATS in the eyes of other medical professionals are present to learn and assist in any way possible, and to support what is in the best interests of a patient. Never question or criticize these individuals in the presence of a coach or athlete. Be sensitive. A teachable moment is not always clinically appropriate at the discretion of the clinician. Always choose the appropriate time to ask questions about treatments and evaluations. In addition, any direct communication to physicians
or other health care team members should be made by a staff athletic trainer or under the direct orders of a staff athletic trainer (exception: if the physician is your direct preceptor).

**COACHES and ADJUNCT SUPPORT MEMBERS**
A primary role of an athletic trainer is to provide a healthy and safe environment for patients. The coach's role is to produce a successful program. Do not confuse the two. Both roles are responsible for managing different aspects of the athlete. Many coaches are sensitive about questions regarding their game and practice procedures. *Keeping on one’s own side of the street* is expected. Coaches, not used to working with an athletic trainer, or those demanding control, will try to tell an athletic trainer how they prefer an injury to be handled. The way to handle coaches who question an AT’s or ATS’s procedures/authority is to avoid disagreement or opposition when it occurs. Carry on with business as usual, hold firm to a course of action and do not compromise decisions or plans of care. ATS facing any conflict from a coach are to immediately bring the issue to the preceptor. Resolution can follow. Please understand that athletics can be a highly stressful environment and the coach's continued employment may depend upon his/her win-loss record. Remaining flexible to last minute changes is expected. It is a coach’s prerogative to make such changes. During practices and games please consider when coaches--coach the same as when teachers--teach. It’s a presentation. Athletic trainers are in the background to this most of the time until injury or illness occurs.

**INTERACTION WITH OTHER ATHLETIC TRAINERS**
Athletic trainers are independent of which team wins or loses. Athletic trainers support each other and have a common and collective purpose. Maintaining positive working relationships and expressing a cooperative nature is essential. In addition to spending a lot of time together and sharing experiences, being able to depend on each other cannot be overstated. Athletic trainers must project a certain tone to coaches, student-athletes, patients, and administrators as it is absolutely necessary and it contributes to our perception. In the spirit of cooperation here are some things to remember:

- Do not criticize or “call out” a fellow athletic training student in front of a coach, athlete, or another athletic trainer. Unavoidable conflict or criticism, that cannot be avoided, is to be done in a private and constructive manner.
- Do not question another credentialed medical professional in front of a coach, athlete, or another athletic trainer unless the safety of a patient is being compromised. Addressing or questioning someone is to be done in a private, constructive manner with one’s preceptor.
- Do not allow inappropriate behavior by other athletic trainers to continue. Inform an ATP faculty member. Do not let actions of others reflect negatively on the ATP or the profession as a whole.*ATS that are known to have knowledge of the inappropriate conduct of another AT or ATS may be subject to the same disciplinary consequences as the individual committing the infraction.
- Show initiative. Do not limit oneself to executing tasks that are familiar and comfortable.
- Do not become a gossiper or complainer. Be above saying, "Well she/he never cleans up”.
- Earn respect with a strong work ethic and do not separate oneself from any task by class or rank. Accomplish what is needed for one’s clinical development AND contribute to the
overall function of an athletic training facility. Avoid exercising seniority and rank for one’s own personal gain.

- Rise above by holding yourself to a higher standard.

ATS PEER-TO-PEER

- Integrity is of utmost importance. Once it is lost it cannot be regained. Repercussions of such actions are widespread and last indefinitely.
- ATS must maintain clear professional boundaries with First Years.
- Conduct outside the classroom and clinical setting may negatively impact the reputation of the individual and the ATP. Exercise good judgment.

RECOGNIZING AND REPORTING OF SEXUAL MISCONDUCT

All UCM students have the right to report an incident of sexual misconduct associated with an academic activity regardless of the location of the incident.

At this time, it is important that we refer students to the Title IX Resource page located here: [https://www.ucmo.edu/titleix/](https://www.ucmo.edu/titleix/) and the formal policy located here: [https://www.ucmo.edu/upo/guide/sexualmisconduct.cfm](https://www.ucmo.edu/upo/guide/sexualmisconduct.cfm)

Students can report concerns in a variety of ways including:

- calling public safety at 660-543-4123
- or contacting Corey Bowman, Associate Vice Provost for Student Services / Title IX Coordinator, ADM 214, 660-543-4114, bowman@ucmo.edu

* Please refer to Section X regarding consequences and disciplinary action of violating professional boundaries
SECTION IV: PROFESSIONAL EXPECTATIONS AND RECOMMENDATIONS

FLEXIBILITY and ADVERSITY
1. Remain flexible in providing services as an athletic training student in all athletic training settings. The ability to handle criticism and to change one’s schedule with very short notice is part of the profession. Expect to work during the weekend, to adjust to weather conditions, cancel dinner plans, delay birthday celebrations, and spend holidays away from family and friends.

2. When an athletic trainer is called to task, remember that one’s expertise is being used to help someone, but it also involves taking care of someone at their worst. Do what is right, do it well, and do not allow oneself to be affected by the drama of a situation. It is human nature in situations of ownership to take criticism or opposition personally. Recognize the difference between professional vs. personal compromise. Overwhelming stress is a reality in this profession. Please know that resources such as UCM Counseling Services are available for these times.

ATP PROGRAM TRADEMARKS: ATTITUDE AND INITIATIVE
ATS, prior to admission, expressed interest and enthusiasm to be involved in UCM’s ATP, were chosen by our faculty to participate, and were granted membership in the program. Always remember that with this select membership comes responsibility. In order to do a good job and to learn as much as possible, it is necessary to display proper attitude and initiative—AT Mule style. The knowledge and experience will not appear on a silver platter. There is no limit to learning. Professional growth will be met by exemplary initiative.

HOLIDAYS AND INCLEMENT WEATHER
Clinical assignment responsibilities on days when classes are dismissed
1. University Observed Holidays, e.g. Labor Day, Martin Luther King Jr. Day
ATS are encouraged to engage in their clinical education assignments on these days, but are not required. Students must discuss this with their clinical preceptor weeks in advance and reach a mutual agreement.

2. Inclement Weather
When classes are cancelled due to weather it is of utmost importance that decisions surrounding ATSs attending their clinical assignment are made with safety as the determining factor. Because distances vary between the university, distant clinical sites, and students’ residence, there is no blanket policy for everyone to follow. If ATS live within walking distance to their clinical assignment, and it is reasonable for you to travel on foot, attendance on those days is expected. In all cases, contact with the preceptor should be made as soon as any announcements are made. If weather conditions worsen while at your clinical assignment, regardless of proximity to home, please discuss remaining at your clinical assignment with your preceptor. Bear in mind that whether it be in a hospital, clinic, or college setting, athletic trainers are typically required to be reported to work on such days. It is considered part of the profession.
POLICY ON DRESS CODE AND APPEARANCE

Professional appearance and attire is critical to credibility in the athletic training profession. As a member of the allied healthcare community and this program, ATS are expected to present themselves with professional attire. Expect to sacrifice style, either personal expression or interpretation of style. Failure to follow these guidelines will result in receiving an infraction notice. *You are expected to follow this dress code regardless of the example your preceptor sets.*

1. Clinical rotations are formal education time. Students are expected to “dress up” and be in “AT uniform” for their clinical rotations regardless of setting or preceptor.

2. Customary attire is properly fitting* beige/khaki, black or grey pants or shorts with a UCM AT logo polo, UCM AT shirt or ATP t-shirt, and sneakers. “Social” UCM AT apparel should not be worn at clinical rotations (eg. AT slogan shirts, ATSA shirts). On days of events, ATS are expected to wear khaki pants or shorts unless your preceptor specifies differently. In some circumstances, your supervising athletic trainer may indicate that dress clothes and/or shoes are more appropriate.

4. Overall dress, fit, and appearance should be neat, clean, not restrict movement. It should be free of excess material or wrinkles. Be prepared to have clothing exposed to all bodily fluids and environmental conditions at any time.

5. No clothing is to be altered from its original form, e.g. cut off sleeves.

6. Apparel is adjusted for outdoor weather conditions. Other approved clothing may be worn.

7. For cold indoor and outdoor conditions please follow these guidelines:
   - Layer under polos by wearing a red, white, black, or grey short or long-sleeve undershirt.
   - Full windshirts, ½” – ¾” or full zippered jackets, or V-Necks must have an AT logo.
   - No garment with a hood is ever to be worn. Exceptions are ATP rain gear or heavy winter coat.

8. The following provide details on clothing specifics
   - **FOOTWEAR:** No sandals, flip-flops, or high heels. Feet–heel to toes–must be protected to prevent injury and covered to prevent any disease transmission. Footwear must be functional, must be able to run, crouch, or kneel. Exceptions are made when dress clothes are considered proper attire, but functional footwear is still necessary. OSHA standards are considered a standing rule.
   - **SHIRTS:** Untailored and loose-fitting shirts must be tucked in. Overall appearance dictates the “tuck-in rule”. No skin is to be exposed in the midssection with and without movement. Necklines in the front cannot expose the chest contour region or show cleavage and in the back, roughly C7 down should be covered. All shirts must have sleeves.
   - **PANTS AND SHORTS:** Khaki, black, or grey pants. Same colored shorts with at least 2 pockets. Mid-thigh is the recommended length. Cotton sweatpants, yoga pants, leggings, or jeggings are not considered professional attire and will not be tolerated at clinical sites.
   - **HATS AND HEADWEAR:** No hats or head covering are permitted indoors. This also applies to class attendance to athletic training courses. UCM ball caps and visors may be worn outdoors in the forward and intended position.
9. Name badges are provided for medical identification and when access is restricted. They are also a symbol of status. They are to be worn at any location or in any circumstance where identification is not immediately apparent or access is restricted. Preceptors may require name badges to be worn. Always wear a name badge if there is any question to your identity as an ATS. ATS must always have your name badge with you regardless of the setting.

**Examples of when to wear your name badge:**
- Medical rotations or surgery observation, e.g. general medical, OPPT clinic.
- Accompanying an athlete to an appointment or emergency department visit.
- Large home, invitational, post-season, or high school competition.

10. No apparel or accessories advertising drugs, alcohol, inappropriate or offensive material may be worn at any time.

11. Appearance for doctor rotations is strict. At a minimum: UCM Athletic Training polo, dress slacks, dress shoes and name badge are to be worn. Business casual is also acceptable with a name badge.

12. When attending a professional conference, business casual attire should be worn. *see NATA website or conference details for specific business casual Athletic Training attire examples*

13. Ear piercing is allowed provided that it is tasteful/conservative. Tongue, lip, eyebrow, nose piercing or other facial piercing is not permitted nor are other visible piercings, e.g. wrist.

14. Jewelry specifications include considerations for safety. As such only studs, circular loops of less than ¼”, in a single hole may be worn. Other exceptions and limitations are left to the judgment of the CEC.

15. A wrist watch is required at all clinical rotations due to necessity to keep time and for documenting timelines during emergency situations. Mobile devices are **not** to be used as timing devices.

16. Hair must be of reasonable length, be neatly groomed, and tied-back as to appear professional, and not interfere with any athletic training duties. It is recommended that any hair color choices are kept within a natural color spectrum. Students that choose to make changes to their appearance in this manner may be asked to change by faculty/staff/preceptor.

17. Facial hair is discouraged. Facial hair must be neatly trimmed and groomed daily. It should be visually apparent that daily maintenance is done otherwise the expectation is to be clean shaven. Employers often strictly prohibit facial hair.

18. Exposed tattoos, e.g. neck, wrist, fingers, lower leg, ankle need to be well-thought out as one’s professionalism may be questioned. It is recommended that any tattoo can be covered by approved AT attire. No offensive tattoos will be permitted.

19. Style and fashion are not given consideration when dressing to work in health care. The dress code is set to be functional. Students wearing tight fitting clothing or that dress provocatively will be warned, dismissed, or given a written infraction.

20. Any ATS presenting with an appearance that is a distraction will be asked to make an adjustment.

***Failure to adhere to this policy will be reflected in your evaluations through the course of the semester and may result in infractions***
**RAIN GEAR CHECK-OUT PRIVILEGE**

Rain gear is available through Dr. Greg Williams. Checking-out rain gear is done on a first come, first serve basis. To avoid monopolization of gear, students waiting to check-out items take priority over students who have items already checked-out and would like to check it out again. Rain gear must be returned by **12 pm** the day immediately following check-out. Students checking-out rain gear on a **Friday**, for a weekend event, must first receive approval from Dr. Williams, and if approved are required to return the gear by **12 pm** the following **Monday**. All rain gear is to be returned cleaned. Privilege to check-out gear will be forfeited for the remainder of the semester for any item turned in late. Every attempt must be made to return items to Dr. Williams in person. If rain gear is returned dirty or damaged, students will be subject to disciplinary action deemed appropriate by the Program Director and Dr. Williams, ranging from point infraction to loss of privilege to equipment replacement at the full expense of the student.

**SIGN-OFF RULE**

**Timely Completion of Clinical Proficiencies:**

For optimal learning, sign-offs for clinical proficiencies are intended to be completed in a concise timeline. This means that there is a short span of time that passes from when a competency/proficiency is introduced in lecture, practiced in the lab, signed off by an upperclassman, and then finalized by the preceptor or other ATP faculty member.

After acquiring a signature from an upperclassman, the student must wait a minimum of 48 hours to attain preceptor/instructor signature. For proficiencies requiring an upperclassman signature, the student must attain preceptor/instructor signature within 1 month of the date of the initial signature. If the student fails to complete the sign-off within 1 month of the initial signature, he/she must redo the sign-off with the same upperclassman. *If there becomes a pattern (i.e. as deemed inappropriate by upperclassmen/preceptor/instructor) of a student exceeding the “1 month rule” this might result in a write-up and be classified as a minor infraction.

Clinical proficiencies are due by the last day of the semester, unless otherwise specified by the instructor. Tardiness in submitting assignments on time will be handled by the instructor-consequences may include reduction in grade.

*Only the assigned preceptor(s) and the instructor of record are the only ATs that sign-off* because they are responsible for tracking and assessing the development of ATS assigned to them. Another ATP faculty member may complete sign-offs by permission of the instructor of record. Preceptors have the authority to impart deadlines for completion of proficiencies provided that they coincide with the course calendar. Students that delay completion can expect the evaluations done on them by their preceptor to reflect this lack of responsibility. 

*Professional Conduct (ethics, dress, attitude, demeanor, adhering to established deadlines).* The onus of responsibility to obtain sign-offs in a timely manner is firmly placed on the student.
ATS Proficiency Scoring Policy

1. The scale is a 0 – 2. The student’s performance of:
   0 = the proficiency was not done.
   1 = the proficiency was not satisfactory (at the expected level).
   2 = the proficiency was satisfactory (at the expected level).

2. ATSs who underperform will have a “1” documented with a preceptor/instructor’s initials and date. Underperforming is defined by a student who requires direction in order to complete a proficiency. Students will be required to repeat the failed sign-off with that same preceptor/instructor’s.

**ELECTRONIC DEVICES:** notebooks, phones, tablets, pads, readers, hands-free, laptops

*This policy is combined with the Social Media/Information Sharing Policy*

Undeniably these devices are a part of everyday life. As developing health care professionals ATS agree to follow a higher standard than a typical college student. The decision to pursue AT includes a commitment to prioritize learning and providing care above being constantly connected.

It is important to differentiate personal use from professional/educational use in both the classroom and clinical environment. Certainly there is a place for these devices for the purpose of learning and this is encouraged. Do not take advantage of such access.

While interpretation of this policy will vary widely, know that ATS are expected to consciously change their mobile device habits during clinical education time.

- Focus is to remain on patients and learning.
- No device may be used in a manner that may be interpreted as a distraction or competing for didactic or clinical education time.
- Train and discipline oneself not to act on the impulse to use or check one’s device.
- Use must relate to necessary communication, e.g. clinical supervisor, other ATS or First Year ATS, etc.
- Viewing personal information such as social forums, music, games, photos or other entertainment during clinical education time or class will not be tolerated.
- Expect to stow devices during office-based learning, doctors rotation.

**SOCIAL MEDIA/INFORMATION AND COMMUNICATION POLICY**

This policy is an additional layer to HIPAA and FERPA policies. All athletic training students are required to complete a confidentiality statement annually. This signed statement will become part of the athletic training students’ permanent file. All federal, state, local, NATA, and University policies supersede this policy as it is established to draw attention to the importance of the matter for ATSs and not to exclude any provision to the statements above or in this handbook. It is the intent of this policy to protect and screen information related to all aspects of athletic training and to develop understanding in how to appropriately handle information and communication. It includes, but is not limited to any information involving the following personnel in both active and passive roles: athletic training students and their families; first year athletic training students; UCM AT faculty; UCM athletic training clinicians; and UCM faculty,
staff, students, patients, and student-athletes; affiliated site populations; UCM alumni; and Friends of the ATP.

“Information” for the purposes of this policy is considered anything that can be imaged in any manner, photographed, recorded as visual or auditory media, drawn, voiced, depicted, represented, symbolized, or produced in any manner. It also includes the use of UCM AT logos and graphics. Interaction with all information including use of technology-based networking venues/forums/media outlets, e.g. Facebook, Twitter, Snapchat, FaceTime, screenshots, texting, emailing, blogs, discussion boards, etc. are strictly prohibited. Furthermore false representation of such information is also prohibited. Approval may be gained from ATP faculty or ATP clinical staff for appropriate use of such information related to their respective area.

Provisions:

1. Any ATS that is approached by a patient with a medical need, he/she is to contact the supervising athletic trainer/preceptor or appropriate health care professional.

2. No records are to leave any athletic training facility. If medical records are needed for classroom purposes, e.g. a case study, the athletic training student must complete a release form and have it approved by both the student-athlete and the supervising athletic trainer/preceptor. This form provides the athletic training student access to the medical records of only the athlete noted on the form.

3. This policy also applies handling any information in a manner that is defamatory, harassing, offensive, or tasteless. Projecting any negative association with athletic training as negative also is considered a violation.

4. ATS are expected to immediately report any known or suspected violations as withholding such information is considered an equal violation.

Failure to adhere to this policy may result the following consequences:

1. Federal charges with large fines and potential imprisonment.
2. Civil charges from wronged parties and inability to become certified and gain state licensure.
3. Immediate dismissal from the ATP or eligibility for selection to the ATP is considered a minor consequence and should be expected for any violation of the policy.

Examples of prohibited activity include but are not limited to:

1. Having a conversation with another individual (ATS or other) about patient information where there is no “need to know.”
2. Texting one or multiple individuals about an injury that occurred at a clinical site.
3. Taking a selfie with a floor mate who is a student-athlete.
4. Tweeting about another student’s behavior.
5. Posting on Facebook a picture of yourself at a party wearing an AT shirt.
6. Being photographed at a party with student-athletes present.
7. Emailing anyone a picture of ATS practicing using an otoscope in a human disease lab.
8. Posting videos of sideline pregame preparation at a high school game. (They are minors in addition to being patient/student-athletes).
9. Leaving an injury report on a treatment table or taking a patient’s file home to review.
WORK ETHIC: Resilience and Tenacity
The skills and work ethic that athletic training students acquire at UCM will prepare them to work effectively in any setting. University of Central Missouri Athletic Training Students are never late. This is a standard that applies to all aspects of life. A major charge of an athletic trainer is the health and safety of the athletes. Dependability and commitment to all endeavors related to being at ATS at UCM are expected. This rule is unyielding.

Athletic training is not a high-paying, easily identified profession. ATs are required to work long hours, many evenings, weekends, and holidays. This is not a profession for everyone. Athletic trainers are very special people who receive few words of appreciation during long work days. Many of the rewards are intrinsic that are enjoyed while doing the necessary day-to-day tasks like cleaning water coolers, sweeping floors, doing hours of paperwork, scrubbing whirlpools, laundering towels. It is oftentimes difficult for students to put patients’ and facility maintenance needs in front of their own, but it is the nature of the business. In this regard, the requirements of the profession will not change. It is the individual who must embrace and not just tolerate that aspect of the profession. This is said for the sake of an ATS’s longevity in the profession. During the course of a long athletic season it is often difficult to remain focused. Athletic trainers may lose motivation to come to work, and instead complain about lack of free or study time, and even get caught up with the win/loss record of the team. It is important for all students to stay focused on the reasons that each of them chose to become an athletic trainer. This type of strong will and work ethic will benefit each individual whether they realize it at the time or not.

PERSONAL TIME/ATS EMPLOYMENT POLICY
It is one’s own choice on how time is spent outside the classroom and clinical environment. For some it necessitates work, family obligations, or personal time. Classroom and clinical education has the highest priority and ATS are expected to avoid any conflict between personal time and their education. Athletic Training Students are eligible for work-study through University of Central Missouri; however they are not permitted to obtain work-study during any type of clinical rotations. A work-study award is an employment earnings allotment, and represents an opportunity to work part time. Work-study employment opportunities are offered to full-time students with financial need who file the FAFSA prior to April 1st. Work-study employment opportunities may be found in the Office of Career Services. See the Office of Career Services for Federal Work Study Guidelines.

Athletic Training Students may choose to work on and off campus for various reasons. The rule is: program requirements (meetings, clinical rotations, etc.) have the highest priority following academic classes. ATSs are reminded that clinical rotation schedules can change suddenly and be unpredictable creating conflict with your employer. The terms of your employment must include an agreement that your employer understands your hierarchy of duties as an ATS.

ATS must receive approval from the ATP director and CEC in order to pursue a commitment that may compromise their education in any manner. This includes employment, on-campus CA.
STUDENT LEADERSHIP
As students progress through the program they should continually gain more experience and skills. Therefore, upper level students serve as role models for the lower level students. Underclassmen should utilize the upperclassmen as learning tools and resources. The program is structured for underclassmen to follow upperclassmen’s lead and directions and learn from them. Feel free to ask questions and challenge them regularly. When problems arise, ask/talk to them. Although upperclassmen are given more responsibility and should help the staff athletic trainers direct the younger students, the upperclassmen should not boss the younger students around or abuse their authority.

The place for seniority is with knowledge and skill level not solely based upon class rank. Getting the job done is accomplished through cooperation. The best leaders, lead by example. Do not ask someone to do something that you would not do. To develop professional skills ATSA (Athletic Training Students Association) is available as a venue.

REPORTABLE INCIDENTS
If a student should encounter any problems, e.g. sexual harassment, discrimination, unethical actions, within the athletic training experience, or with another individual, e.g. coach, peer, supervisor it is best to speak with the immediate supervisor or if the problem is with the immediate supervisor contact the next level in the chain of command.

ADDRESSING NON-REPORTABLE ISSUES
Ownership in the ATP includes voicing concerns in a productive manner. ATS are asked to bring an issue as it is occurring to the attention of their preceptor. For other issues ATS are asked to bring it to the attention of ATS leadership and/or ATP faculty and avoid perpetuating any issue. The following outlets are available:
1. If it is an egregious or potentially serious violation please refer to ATS handbook on reporting an issue. Please refer to the reportable incidents policy above.
2. Approach the AT Steering Committee Student Representative – Zach Hopkins.
3. Approach any AT faculty member.
4. Report it to the AT Program Director who can access the chain of command if necessary.
USE OF ALCOHOL AND TOBACCO POLICY
Living a healthy lifestyle is encouraged, which includes making smart choices about what legal substances one ingests or inhales. Alcohol and Tobacco use is only permitted during non-clinical hours when its use will not interfere or hinder performance. Students will be held accountable for their actions during and related to alcohol or tobacco use. Students are required to abide by STATE AGE LIMITS. Students are expected to handle themselves in a manner that reflects well on themselves, their family, and University of Central Missouri.

This policy also extends to the classroom setting as such behavior truly interferes with teaching and learning and will not be tolerated. An infraction notice is to be expected if academic or clinical performance is hindered to any degree due to any substance use/abuse.

Legal infractions or repeated offenses will be subject to ATP review, disciplinary action, and may prevent the ability to obtain state licensure.

*Please refer to Section X regarding consequences and disciplinary action of violating alcohol, tobacco, use and abuse of restricted and illegal substances.

DRUG TESTING
Remaining drug-free for the health and safety of the population athletic trainers serve is of paramount importance. UCM’s ATP prepares students in their program for this real-world employment practice to ensure this policy. 10% of each cohort group will be selected for random drug testing one time per year. An outside agency will be provided with a list of ATS names by class. The students will be responsible for transportation to the testing agency facility. ATSs selected will receive twenty-four to forty eight hour notice. Failure to report for drug testing will result in dismissal from the program. Cost of this drug screen will be the responsibility of the ATS through their UCM student account.

Clinical sites may require drug testing as part of their orientation process prior to the first day of scheduled rotations. The cost of this drug screening is the responsibility of the ATS.

The policy is Zero Tolerance. Any positive drug test will result in removal from being an active member of the ATS. Any additional follow-up drug screen costs will be the responsibility of the ATS.

● ATSs who identify themselves as having a problem or potential violation of this policy are expected to disclose such information to the program director where available resources will be utilized.
● ATS with concern or suspicion about a fellow ATS are expected to report to the program director who will investigate.
● ATS are reminded that any type of legal record tied to the use of any substance may prevent them from obtaining licensure which will prevent them from being employed as an athletic trainer across the country.
● Legal infractions will be subject to ATP review and disciplinary action.
*Please refer to Section X regarding consequences and disciplinary action of violating alcohol, tobacco, use and abuse of restricted and illegal substances.

**CRIMINAL BACKGROUND CHECKS**
The ATP and its off-campus clinical sites require a criminal background check to help ensure the safety of the patient population. This process takes considerably longer for international students, students for other states, and students whose residence has changed recently. This also must be done annually during summer break and due to the PD prior to July 15. The charge of this order is the responsibility of the student and a credit or debit card will be needed for this transition to take place. Your PD will provide you with the necessary link late spring semester.

**ANNUAL IMMUNIZATIONS**
Prior to attending your Fall semester clinical rotations, you must submit a current, negative TB test that has been administered and read between the dates of May 1\textsuperscript{st} to August 1\textsuperscript{st}. \textit{THIS MUST BE DONE ANNUALLY (as per CAATE Accreditation standards).}

You will need an annual flu shot submitted to PD by October 15, in order to attend clinical assignments. Please see Sections IV and VII for more information.
SECTION V: POLICY AND PROCEDURE OF THE UCM ATHLETIC TRAINING PROGRAM

ACADEMIC/CLINICAL PROGRESSION THROUGH ATHLETIC TRAINING MAJOR

Education and clinical preparation of athletic training students is unique compared to most other majors largely due to accreditation standards. There is a pre-set curricula sequence that must be followed in order to successfully complete program matriculation. This is done to set students up for success. The methodology behind this is one of “learning over time” and “lock-step” progression. Failure to attain a B or better in an AT prefix course, or a C or better in the other courses within the academic major will result in consequences and/or infractions (which may involve repeating the course). Students must successfully complete all competencies/proficiencies, and acquire the necessary clinical hours before they will be allowed to progress to the next level within the program or be endorsed by the Program Director for the BOC exam upon completion of the program and the required PDUs. Should a student’s sequence be interrupted for any reason, that individual must meet with the Program Director and Clinical Education Coordinator to determine the course of action. This decision will be on an individual basis taking the situation and circumstances into consideration.

ATHLETIC TRAINING DEGREE SEQUENCE

FIRST YEAR (ENTRY-LEVEL STUDENTS)

Fall
- AT 1610 Introduction to Athletic Training
- AT 1611 Introduction to Athletic Training Lab I
- AT 1625 CPR/AED for the Health Care Professional
- MATH 1111 College Algebra
- CHEM 1104 Introduction to Sciences: Chemistry
- ENGL 1020 Composition I

Spring
- AT 1630 Foundations of Athletic Training
- AT 1631 Foundations of Athletic Training Lab II
- AT 1640 Medical Terminology
- AT 1650 Responding to Emergencies for the Professional Rescuer
- KIN 1800 Functional Anatomy
- ENGL 1030 Composition II
- BIOL 3401 Human Anatomy
- LIS 1600 University Library and Research Skills

SECOND YEAR

Fall
- AT 2610 Orthopedic Assessment: Lower Extremity
- AT 2611 Orthopedic Assessment: Lower Extremity Lab III
- AT 2640 Introduction to Therapeutic Rehabilitation
- HLTH 1100 Personal Health
- HIST 1350/1 US History
- KIN 2850 Foundations of Exercise Physiology
- BIOL 3402 Human Physiology
Spring
AT 2620 Orthopedic Assessment: Upper Extremity
AT 2621 Orthopedic Assessment: Upper Extremity Lab IV
AT 2630 Therapeutic Modalities
AT 2631 Therapeutic Modalities Lab
COMM 1000 Public Speaking
KIN 2800 Biomechanics
PSY 1100 General Psychology
NUTR 4300 Nutrition and Human Performance

Summer
PE 4340 Adapted Physical Education

THIRD YEAR
Fall
AT 3620 Clinical Athletic Training V
AT 3630 Therapeutic Rehabilitation
AT 3631 Therapeutic Rehabilitation Lab
AT 3650 Sport and Exercise Pharmacology
AT 4650 Human Diseases Lab for AT
HLTH 4370 Human Diseases
CTE 3060 Technical Writing
General Education or free elective (2-3)

Spring
AT 3640 Clinical Athletic Training Lab VI
AT 4630 Organization and Administration of Athletic Training
PE 4740 Legal Liability in Fitness/Wellness, Physical Education, Recreation and Sport Settings
General Education & Electives (7)

FOURTH YEAR
Fall
AT 4610 Clinical Athletic Training Lab VII
AT 4640 Senior Seminar in Athletic Training
PE 4830 Psychological Aspects of Physical Education
PSY 3030 Statistics for the Behavioral Sciences
General Education & Electives (6)

Spring
AT 4620 Clinical Athletic Training Lab VIII
KIN 4850 Assessment and Evaluation of Fitness & Wellness
General Education & Electives (7-8)

* Transfer students sequence may vary depending on year entering Athletic Training Program and previous collegiate academic work.
TRANSFER STUDENTS
Transfer students should make an appointment to meet with the Program Director as soon as possible. Students are required to meet the academic standards of the ATP prior to application.

If the student is transferring from another CAATE accredited ATP the student will be required to present all syllabi, competencies/proficiencies completed to date, transcripts and all clinical hours then the student may be eligible for immediate application and interview into the ATP upon approval by the Program Director, Clinical Education Coordinator and Selection Committee.

If the student is transferring into the major from community college or another four-year institution or from another UCM major they will have to meet the same requirements of a first-year student.

ATTENDANCE TO CLINICAL ROTATIONS
Classroom and laboratory attendance policy are set at the discretion of each individual professor or instructor of record. Class attendance is essential and deliberately skipping class is not tolerated, and is grounds for an unexcused absence. An unexcused absence for any class prohibits the student from being able to attend his/her clinical assignment for that day per handbook policy. In turn, this will trigger an infraction write-up. It is the responsibility of the professor or instructor of record to notify the CEC who will then relay the information to the student’s assigned Preceptor of any unexcused absences. *For unforeseen circumstances such as illness/injury see Section VII.

ATHLETIC TRAINING FACILITY MAINTENANCE AND OPERATION
Use and access to the UCM ATP Lab and classroom is a privilege and not a right and is to be treated with respect. Therefore, maintenance of ATP lab equipment and restocking of supplies is the responsibility of each ATS and/or ATP staff member using the equipment or materials and should be completed before one leaves the facility. Consequences to fail to do so will be determined by the UCM ATP CEC and/or Program Director and may result in a loss of lab access privileges.

Lab Rules and Etiquette:
- No printing during any class or lab sessions
- Do not use the locker area as a personal wardrobe or kitchenette
- During the hours of 8:00-3:00 and/or during any other time the lab is in use, treatment and taping tables are to be used for educational purposes only (i.e. no napping, laundry, loitering, etc. during these times).
- Never leave the lab with the door propped open at the end of the day. If you are the last one to leave, make sure the lab door is not left open. The ATP is not responsible for any misplaced/stolen items out of the lab.
- This is a highly visible area (new faculty/student tours, alumni, donors, etc.), and the pride of this program and department. Do not be an embarrassment.
END OF YEAR EXAMINATIONS
The end of the year examinations were implemented to create scaffolding for the Athletic Training Student’s learning, studying, and preparation for the BOC examination. This system will require ATSs to pass a year-end examination (level specific and below) that will assess their knowledge of the athletic training profession. The exam will be computer-based, timed, and will consist of approximately 150 questions to mock the BOC examination conditions. Questions are based upon instruction to the date of the exam. Students must achieve 75% on the program’s End of the Year Exam taken every year. Each academic year students formally admitted to the program are required to take and pass with a 75% on End of the Year Exam. Juniors will take the exam at the end of the spring semester and seniors will take it early October. Juniors will be given three attempts to pass the exam. If a junior student fails to pass the exam after three attempts, they must meet with the PD to discuss a remediation plan. If a senior does not pass on the first attempt, they will take it again in early November. If a senior student does not pass on their second attempt, the student will not be endorsed to take the exam prior to graduation.

The exam system is not connected to the student’s academic and clinical evaluation. The testing system is designed to ensure students in the ATP are meeting the studying and learning benchmarks for each academic year in addition to retention of previously learned material. Due to the BOC testing schedule, Fourth year ATSs will be required to take the Fourth year exam at the end of the fall semester following the same testing window, prior to their eligibility for endorsement and taking the BOC exam. First Year students are required to take the end of the year exam to assess the gained knowledge from the year however they are not required to pass the exam as they are not officially in the program.

USER'S GUIDE TO COMPETENCY-BASED INTRODUCTION IN ATHLETIC TRAINING CLINICAL EDUCATION
The first year of the four-year athletic training clinical education program at University of Central Missouri is the observational period. The first phase, known as ENTRY-LEVEL or First Year of "directed observation phase", is open to students enrolled in AT sequence courses. In order to qualify for candidacy to the Athletic Training Program, each student must complete all of the clinical competencies associated with AT Core Courses. Additionally, each student must complete the required hours of directed observation during the academic year.

Following formal admission into the Athletic Training Education Program, each student's progress through the competency manual will be assessed when completing each competency as assigned by the corresponding classes. In order to help achieve the competencies required for each student in the ATP, regularly scheduled classes will be conducted by faculty and staff Certified Athletic Trainers on the topics found in this manual.

ATHLETIC TRAINING COMPETENCIES CRITERIA
In order to protect the health and safety of patients, ATS must be proficient in specific athletic training competencies. For each level of the program there will be competencies for which the Athletic Training Student must demonstrate proficiency. Students will be clinically tested on each competency by their Preceptor during the academic year. In addition, athletic training students will be evaluated on their performance in the clinical setting. Failure to perform adequately during clinical rotations and/or failure to show proficiency in required competencies may result in academic consequences and delay progression through the ATP.
SECTION VI: POLICY AND PROCEDURE OF UCM ATHLETIC TRAINING CLINICAL EDUCATION

CLINICAL EXPERIENCES IN ATHLETIC TRAINING
Participation in the Clinical Experience in Athletic Training will have a number of specific criteria, which must be met to successfully complete the course. This manual contains much of the information necessary to meet the criteria, along with additional information pertinent to the scheduling of events for the upcoming semester. It is the intention that the learning experience provided over the next few months will contribute to the broadening of each student’s background and, in the process, better prepare him/her to become successful athletic trainers. The NATA has developed a Code of Ethics, which should be utilized as a guide to developing ethical and professional practices.

PROGRAM REQUIREMENTS FOR CLINICAL EXPERIENCE POLICY
Each student will be required to accumulate a range of hours per semester each consecutive semester. Completion of the total hour requirement fulfills only one portion of the practicum. A student must accumulate their clinical clock hours through the course of the whole semester.

The following chart was developed to break down hours values across the semester. If you are trying to gage your hours on a weekly/monthly basis, the following chart should give you the necessary parameters to meet programmatic minimum and maximum values.

<table>
<thead>
<tr>
<th>4th years</th>
<th>Minimum Hours</th>
<th>Recommended Maximum Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Hours</td>
<td>200</td>
<td>500</td>
</tr>
<tr>
<td>Weekly Hour Averages</td>
<td>13.333</td>
<td>33.333</td>
</tr>
<tr>
<td>Monthly Hour Averages</td>
<td>50</td>
<td>125</td>
</tr>
</tbody>
</table>

All students must adhere to the following policies and procedures.
- All clinical hours must be directly supervised and signed by the assigned Preceptor.
- Clinical hours must be documented in the online system on a regular daily to weekly basis.
- Clinical rotation evaluations will be completed three (3) times a semester by the supervising Preceptor.
- Clinical rotation self-evaluations will be completed three (3) times a semester by the ATS.
- Preceptor and Site Evaluations will be completed three (3) times a semester by the ATS.

The supervised clinical experiences of those graduating from an accredited program MUST be obtained from athletic training settings formally associated with the accredited program.
* Please note that clinical experiences in athletic training are a required component of the athletic training student’s education and will be a scheduling priority; outside work, activities, or obligations will not be given priority during the scheduling process.
* Please note that clinical experiences will take place during weekday afternoons, evenings and weekends as required by preceptors.
REQUIRED UCM CLINICAL ROTATIONS
To provide the best clinical educational experiences the following rotation requirements have been implemented, each athletic training student will complete at least one of each of the following (CAATE Standard 51):

- **Gender Specific** (i.e. Women’s Soccer, Men’s Basketball)
- **Other Populations** (i.e. Pediatric, Geriatric, Military, Special Olympics, IM, etc.)
- **General Medical** (i.e. Physicians Rotation, Nicaragua)
- **Equipment Intensive** (i.e. Football, Ice Hockey, Lacrosse)
- **Rehabilitation** (i.e. Athletic Training Facility, Physical Therapy Clinic, etc.)
- **Team Sports** (i.e. Softball, Baseball, Basketball)
- **Individual Sports** (i.e. Track and Field, Wrestling, Tennis, etc.)

*the above listed are examples only, some options may not be available as clinical sites

Specific details regarding off-campus rotations
1. An off-campus general medical, orthopedic clinical rotations (3rd and/or 4th Year).
2. A high school rotation (3rd and/or 4th Year).
   - Minimum of 10 consecutive weeks at your high school rotation (weeks 1-10)
3. In-season football at either UCM or a high school.

OTHER CLINICAL ROTATION INFORMATION
1. Transportation to all clinical rotations is the responsibility of the individual student to secure on their own. Students should be prepared to have reliable transportation available for travel to distant clinical assignments.
2. The Clinical Education Coordinator, in consultation with the Program Director, will make all clinical rotations assignments. Assignments will be based on the preceding requirements, students’ past evaluations and assignments, the student’s strengths and weaknesses and available preceptor’s and clinical sites.
3. Requesting a particular clinical rotation will be taken into consideration by the CEC, however, your needs must be assessed prior to taking requests. Also, the only circumstance in which you may request to NOT be assigned to a clinical placement is if there is a conflict of interest at that particular site.
4. It is the responsibility of the student to submit their class schedule and notify the Preceptor of any conflicts. As an Athletic Training Student, you need to be familiar with the different types of educational opportunities presented to you throughout your education at University of Central Missouri.
5. Morning rotation hours in the clinic. Juniors and Senior Students 3 hours/week; Sophomore 2 hours/week. Students on high school rotations are exempt from morning rotation
6. Hours must be recorded through the online platform. You can not log hours more than seven days prior. Failure to enter hours will result in hours not counting towards your total hours. In addition to hours, each experience should also be entered in the online tracking system.
7. **Travel time** to and from an away event **may not be included** in your practical hours. Hours not verified will not be credited towards practicum experience or ATP program requirements for BOC eligibility. Hours will be approved on a rolling basis.
8. All ATS must maintain current ECC credentials for clinical rotations.
9. Oftentimes your off-campus clinical sites will require proof of various pieces of information such as ECC, immunization, flu shots, etc. prior to your first day of clinical rotations. Please be very cognizant of this as your PD and/or CEC will have to submit this information to your site supervisor and enough time must be allotted for data collection and submission to the site. In addition, please retain a copy of your current ECC credentials as you will need them for BOC application and state licensure.

**CLINICAL SUPERVISION**

Third year and fourth year ATS clinical education experience include general medical, collegiate, and secondary school athletics. These clinical rotations will be based on three rotations per semester. The general medical rotation will be two (2) agreed upon days with the physician and the ATS for the rotational period. The remaining days will be with the primary collegiate athletic rotation.

ATSs on the high school rotation will be at the high school as their primary site for the entire period. ATSs schedule on orthopedic rotation will be dictated by the attending physician, the remaining days will be spent at their primary collegiate athletic rotation. If the ATS wants to observe surgeries, which is encouraged, it must be approved by the preceptor. Doctor’s rotations supersede any other clinical rotation. Athletic Training Students interested in obtaining a longer or shorter high school athletic experience need to see the clinical education coordinator to arrange the opportunity. During the longer clinical assignment the ATS will not be assigned to general medical or orthopedic rotations. Those rotations will be made up in another semester.

Athletic Training Students who wish to engage in other ATS type activities must have them approved by the CEC. Approval for such activities requires clinical site agreements and other various CAATE approved documentation prior to a final decision being made. These things take time, so plan accordingly. Obtaining “credit” for these activities (i.e. hours, off-rotation, PDU, etc.) will be determined by the CEC, granted all paperwork is in place. Any opportunities students engage in without proper approval are done at their own risk and are highly discouraged; this puts students at risk of violating state practice acts. The UCM athletic training program and the University of Central Missouri will be held harmless.

**PROFESSIONAL DEVELOPMENT UNIT (PDU) SYSTEM**

The Professional Development Unit (PDU) system was developed to foster student success within the profession of athletic training. It exposes students to a system similar to that of obtaining continuing education units needed of a certified athletic trainer. Additionally, it encourages students to seek opportunities outside of their assigned clinical rotation. Allowing students to become a better prepared and well-rounded clinician.

To receive PDU credit, all components of PDU verification (outside of preseason and off-rotation hour sheets, which are submitted solely to the CEC) can be submitted to either the CEC or PDU supervisor prior to the final day of **EACH** semester. If students have approval to participate in opportunities falling outside of the regular academic calendar (spring break, winter break, etc.), students must submit verification once the regular academic schedule resumes.

- Spring/fall break opportunities must be submitted by the end of their respective semesters.
- Winter break opportunities must be submitted by the end of the spring semester.
As it is recommended for certified athletic trainers to retain copies of registration forms and ECC cards for proof of compliance with credentialing requirements, it is recommended that students retain copies of PDU verification forms and track PDU credit to insure accuracy of totals and compliance with PDU policy.

_ATP faculty have full authority to approve or deny PDU credit pending an inquiry._

**Procedures**

1. All PDU verification forms can be found in the AT Commons on Blackboard.
2. To access the forms, following the steps provided below:
   a. After logging into Blackboard select “Athletic Training Student Commons” under “My Organizations.”
   b. Located on the left hand side in the menu panel, select the “PDU Tracking” tab.
   c. Select the appropriate category and fill out the correlating PDU Tracker Form.
   d. Be sure all required materials are completed along with the online forms…i.e. time sheets, verification forms with instructor signatures, and proof of attendance.

**PDU Category Break Down**

Students are required to obtain a specific amount of PDUs per academic year in each of the below categories. The exception being the “Professional Service” category in which PDUs are obtained throughout the course of the student’s formal tenure in the program.

<table>
<thead>
<tr>
<th>Year</th>
<th>Category 1: Preseason</th>
<th>Category 2: Off-Rotation</th>
<th>Category 3: In-services</th>
<th>Category 4: Professional Growth</th>
<th>Category 5: NATA Membership</th>
<th>Category 6: End of Year Exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior</td>
<td>___/1</td>
<td>___/10</td>
<td>___/2</td>
<td>___Total for year</td>
<td>___/1</td>
<td>___/1 (Fall)</td>
</tr>
<tr>
<td>Total</td>
<td>1</td>
<td>10</td>
<td>2</td>
<td>10</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

**Category 1. Preseason (1 unit per academic year):** Preseason hours are a separate entity and are not counted towards your required semester totals. Preseason dates may vary from site to site, consult the CEC for official approval.

- Clinical assignments with a formal preseason: If you are assigned to a clinical rotation with a formal preseason, you will need to fill out a “Preseason” form provided on Blackboard.
- Clinical assignments with no formal preseason: If you are assigned to a clinical rotation with no formal preseason, you will still need to fill out the “Preseason” form provided on Blackboard but will choose the “No Preseason” option. However, students with no formal preseason are still encouraged to participate in preseason opportunities for off-rotation credit. Consult the CEC for official approval of off-rotation hours.
  - Regardless of preseason status, ALL students must complete the “Preseason” form provided in the AT Commons.

**Category 2. Off-rotation (10 units per academic year):** Off-rotation hours are defined as, “On campus clinical experiences not with your regularly assigned preceptor AND outside the
population associated with that assignment.” Students will receive 1-unit per 1-hour of game
time or practice off-rotation experience with no per semester minimum.

- Students are required to obtain a total of 10 off-rotation units per academic year.
- No more than 5 units may be obtained from a previous clinical site/preceptor.
- Off-rotation may only be obtained through on-campus opportunities only.
- Off-rotation hour log: Hours are to be tracked using the online platform.
- It is the responsibility of the student to seek out off-rotation opportunities and to
  communicate with all appropriate parties. It is strongly encouraged students seek
  opportunities which do not interfere with their regularly scheduled rotations.
- Students must receive approval from their assigned preceptor and the CEC **PRIOR** to
  participate in any off-rotation opportunity that may conflict with their regularly assigned
  clinical assignment. If a student does not receive approval or does not communicate
  appropriately with the respective parties, hours obtained will not be approved and may
  result in an infraction.

Approved and Non-approved Examples:

- Kara’s preceptor is Kevin, ATC whose primary sport is UCM Wrestling. Kara want’s to
  assist with the High School State Wrestling Tournament during her time off from her
  regular rotation hours with Kevin. Roger, ATC is the supervising AT for the tournament
  and will be supervising Kara and the other students assisting with the tournament.
  - Different preceptor, different population, off-campus: hours not approved
- Jesse’s preceptor is Betty, ATC whose primary sports are UCM men’s soccer and
  football. Rob, ATC is covering men’s soccer practice while Betty is at a doctor’s
  appointment with an athlete and is supervising Jesse while at rotation.
  - Different preceptor, same population, on-campus: hours not approved

**Category 3. In-services (2 units per academic year):** Students are required to attend 2 additional
in-services per academic year outside of the mandatory in-services provided at the beginning of
the fall semester (BBP, HIPAA/FERPA, Spine boarding). Students will receive 1 unit per in-
service attended. In-services will be offered throughout the semester at varying times and
locations. After each in-service students are required to complete the In-services form for each
individual in-service to receive credit.

**Category 4. Professional Growth (10 units per tenure):** Many opportunities are available for
professional growth throughout the year. There is no yearly minimum for this category; however,
it is recommended students begin accumulating units their sophomore year. To obtain credit,
students must submit a paper copy of conference attendance or a photocopy of conference name
badge. Complete the PDU Tracker form and the correlating verification process. PDU
Verification forms must be completed with the “Academic,” and “Research” categories. These
forms can be found on Blackboard in the AT Commons.

Credit may be obtained through the following:

- Researcher/Professional presentations:
  - Free-Communications (2 units)
  - Poster Presentation (2 units)
  - Research Assistant (2 units)
- Academic Teaching Experience (must have instructor signature on verification form):
  - Classroom Lecture (1 unit)
Lab assistance (1/2 a unit)

- Professional Meetings:
  - Local meeting (1 unit)
  - State meeting (2 units)
  - District meeting (4 units)
  - National meeting (6 units)

- Volunteering at a Professional Meeting:
  - Moderator or Room Rep. (1 unit per session)
  - General volunteer (1 unit per hour)

Category 5. Professional Membership (1 unit per academic year): Professional membership is valued among the profession. As a member of the NATA, you will have discounted meeting/conference registration dues, MoATA and MAATA membership, and access to beneficial resources such as the NATA Career Center and the many NATA Publications.

- Memberships can be obtained through the NATA website (www.nata.org).
- Membership is a yearly renewal.
- In the state of Missouri dues are $60 for new student members and $80 for renewing student members.
- After successful acquisition of membership or membership renewal, you will need to submit a paper copy of your membership card to the PD.

Category 6. End of the Year Examination (1 unit per academic year): Each academic year students formally admitted to the program are required to take and pass with a 75% on End of the Year Exam. Juniors will take the exam at the end of the spring semester and seniors will take it early October. Juniors will be given three attempts to pass the exam. If a junior student fails to pass the exam after three attempts, they must meet with the PD to discuss a remediation plan. If a senior does not pass on the first attempt, they will take it again in early November. If a senior student does not pass on their second attempt, the student will not be endorsed to take the exam prior to graduation.

**Any PDU credit received in previous PDU systems is grandfathered in and students are only required to abide by the most recent PDU credit system.**

**IN-SERVICE EDUCATION**

In-services are a part of the practicum experience, therefore students are required to attend. These in-services will be scheduled throughout the semester. Various professionals in the field of sports medicine will conduct these lectures. In-services are also part of the PDU system. Students wishing to hear a particular topic discussed may make a request to the Clinical Education Coordinator.

If a student is unable to attend, he/she must notify the Clinical Education Coordinator in advance. If an athletic training student misses an in-service due to travel or other excusable reason as determined by the coordinator, they will be allowed to make-up the in-service by watching a video tape or audio recording of the presentation and may be asked to submit a short paper on the topic. This must be done before the next in-service to receive credit.
SECTION VII: HEALTH AND SAFETY OF THE ATS

COMMUNICABLE DISEASE POLICY
The purpose of the University of Central Missouri’s Athletic Training Program’s Communicable Disease Policy is to protect the health and safety of all the students enrolled within the ATP, the faculty and staff, as well as those athletes/patients you may come in contact with during your clinical experiences. It is designed to provide Athletic Training Students, Preceptor, and athletic training faculty with a plan to assist in the management of students with infectious diseases as defined by the Centers for Disease Control and Prevention (CDC). This policy was developed using the recommendations established by the CDC for health care workers (www.cdc.gov).

What are Communicable Diseases?
A communicable disease is a disease that can be transmitted from one person to another. There are four main types of transmission including direct physical contact, air (through a cough, sneeze, or other particle inhaled), a vehicle (ingested or injected), and a vector (via animals or insects).

Immunizations
Proof of current state immunizations records need to be submitted prior to starting any clinical rotation. The requirements apply to all ATS. Some shots are needed annually.
- Polio
- Diphtheria and Tetanus
- Hepatitis-B Series
- Measles, Mumps, Rubella (MMR)
- Varicella
- Tuberculosis*
- Influenza*

*To be completed and documentation submitted annually.

Guidelines for Identifying Exposure and Infection
It is not possible to prevent exposure from all communicable diseases. In the setting of the athletic training room and various other facilities, an athletic training student will be exposed to a variety of different microorganisms that are capable of passing from one individual to another. However, with the proper precautions, the spread of communicable disease in the athletic training setting may be controlled.

1. Students must successfully complete annual training about blood borne pathogens training prior to starting formal clinical experiences.
2. Students are required to use proper hand washing techniques and practice good hygiene at all times.
3. Students are required to use Universal Precautions at all times. This applies to all clinical sites.
4. Patient care should not be performed when the athletic training student has active signs or symptoms of a communicable disease.
5. Bandages, towels, syringes, or other materials that come into contact with bodily fluids should be properly disposed of in the appropriate biohazard or sharps container.

6. Athletic training students should make a sincere effort to keep the athletic training room as clean as possible. Appropriate cleaning supplies should be used to disinfect all counters, tables, chairs, desks, whirlpools, floors, and any other surface in the athletic training room that may harbor microorganisms.

These practices, if followed by athletic training students, should decrease the spread of communicable disease in the athletic training setting. There are times when an athletic training student may be at an increased risk for contracting or spreading a communicable disease while at clinical rotations. During these times, the athletic training student should speak with his or her clinical instructor to determine the best course of action.

Keep in mind that the action taken should be in the best interest of all parties involved (the athletic training student, the clinical instructor, other members of the sports medicine staff, student athletes, coaches, and all support personnel) and not just the athletic training student. At times when the incident rates rise to illnesses like the flu, all AT personnel will contribute to a ceiling to floor cleaning to assure our facilities are not the source of disease transmission.

**Guidelines for Managing Potential Infection**

The following situations and/or conditions may place an athletic training student at an increased risk for contracting or spreading communicable disease:

- Any skin lesions may provide an entry point for a microorganism to enter the body. Skin lesions may also be able to pass microorganisms to another individual by direct or indirect contact. In the athletic training setting, all skin lesions should be properly covered to avoid contact with other individuals.

- If an athletic training student is suffering from an illness, he or she will be considered contagious, and be able to pass microorganisms to others. It may be assumed that an athletic training student is suffering from some form of illness if he or she has a fever, is vomiting, or has diarrhea.

- A diagnosis of any highly contagious disease, e.g. flu, strep throat, mononucleosis, conjunctivitis, COVID-19 would put an athletic training student at risk for spreading or contracting microorganisms.

- If an athletic training student has been diagnosed with a chronic blood borne pathogen e.g. HIV, HBV, he or she may participate in the athletic training setting. However, the student must practice universal precautions at all times.

- Any other chronic medical condition that may result in an athletic training student contracting or spreading a microorganism should be evaluated by a physician. The physician should determine the athletic training student’s ability to return to the clinical setting.

**INJURY/ILLNESS**

Any ATS whose health or well-being is impaired during a clinical assignment may be required to show documentation of medical approval to continue the clinical assignment.
If an athletic training student feels that he or she may be at risk for contracting or spreading a microorganism, or if the Athletic Training Student’s Preceptor feels that the Athletic Training Student may be at risk for contracting or spreading a microorganism, physician referral will be necessary. Once a physician referral has been made, the physician will ultimately determine the ability of the athletic training student to continue in the clinical setting.

1. If any student feels as though they have been exposed to or know they have been exposed to a potential infection before, during, or after a clinical experience should report that exposure to his/her supervising preceptor immediately and to the CEC.

2. If the exposure occurs on campus, immediately inform your preceptor and call Public Safety at 660-543-4123. Public Safety will then be notified to fill out the proper exposure forms and be referred to the Western Missouri Medical Center (WMMC) for examination and treatment. If there is an exposure while at an off-campus rotation it is the responsibility of the student to report the incident to their respective immediate supervisor, e.g. MD/DO/RN/ATC, and follow their infectious contamination policy. Necessary actions will be taken to ensure the safety and well-being of the student.

3. Any student, who demonstrates signs or symptoms of infection or disease that may place him/her and/or his/her patients at risk, should report that potential infection or disease immediately to his/her supervising preceptor.

4. The athletic training student is responsible for keeping the clinical education coordinator informed of his/her conditions that require extended care and/or missed class/clinical time. The student may be required to provide written documentation from a physician to return to class and/or clinical site. In some circumstances a physical examination from a physician may be required to determine when it is safe to return to the clinical setting.

5. If a student feels ill enough to miss ANY class or clinical experience that student should notify the appropriate instructor or supervising preceptor immediately.

*It is the student’s responsibility to make up any skills, hours, and experience that is missed.

**UNIVERSAL PRECAUTIONS**

- Gloves will be worn for touching blood, body fluids, mucus membranes, or non-intact skin of all patients, and for handling items or surfaces soiled with blood or body fluids.
- Gloves will be changed after contact with each patient.
- Masks or face shields will be worn as mandated per University policy and clinical site policy.
- Masks and goggles or face shields will be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of mucus membranes of the mouth, nose and eyes.
- Gowns or protective aprons will be worn during procedures that are likely to generate splashes of blood or other body fluids.
- Hands and other skin surfaces will be washed immediately and thoroughly with an antimicrobial soap, after each patient contact and frequently throughout clinical rotations as well as if contaminated with blood or other body fluids.
- Hands will be washed immediately after gloves are removed.
- All students will take precautions to prevent injuries caused by hypodermic needles, scalpels and other sharp instruments or devices during procedures.
- When cleaning work areas the following guidelines must be strictly followed:
To prevent needle-stick injuries, needles will not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand.

Used disposable syringes and needles, scalpel blades and sharp items will be placed in puncture resistant containers which should be located as close to the patient care area as possible.

- Disposable mouthpieces, resuscitation bags and other ventilation devices are to be used if resuscitation is necessary.
- Students who have exudative and/or lesions or weeping dermatitis are to report to the ATP program director and may be required to refrain from all direct patient care until the condition resolves.
- All patients' blood or bodily fluids, or tissue specimen spills will be cleaned up promptly with a bleach solution diluted 1:10.
- Any needle stick, blood/body fluid exposure to a student will be reported promptly to the supervisor. In event an investigation is required, follow-up care may be instituted.
- Orientation to the Universal Precautions will be provided for all new students prior to their clinical rotation and updates will be provided each semester for all students in the program.

STUDENT MENTAL HEALTH AND WELL-BEING

If a student has been a part of a traumatizing incident as part of their educational experiences, please talk to your preceptor, CEC and/or PD on how the ATCares initiative by the NATA can help you. The ATsCare contact information is ATsCare@nata.org or 972-532-8821.
SECTION VIII: INSURANCE AND EMPLOYMENT OPPORTUNITIES

HEALTH/MEDICAL INSURANCE POLICY
All Athletic Training Students must maintain and verify personal health insurance annually to program administrators. Health Insurance information will be collected annually prior to the start of an academic year. If you are not currently covered by your parent’s/guardian’s medical insurance policy then please contact the UCM Student Health Center for information about their insurance plan. If a student fails to maintain a current policy then they will be removed from all clinical rotations until proof of medical insurance is provided. Students are expected to report any changes in their health insurance immediately.

ATS LIABILITY INSURANCE/EMPLOYMENT OPPORTUNITIES
- All Athletic Training Students who are enrolled in the major and are assigned to educational clinical rotations are covered by a UCM student malpractice blanket liability $1,000,000 for the first incident and $3,000,000 aggregate. See AT commons for PDF
- This policy only covers the formal educational experiences Lab course or PDU activities. It does not cover summer athletic camps or other work opportunities. Students who choose to participate in these activities must purchase their own private liability policy and are not to take on the title athletic trainer.
- Falsely representing oneself as an athletic trainer without proper BOC credentialing may prevent being granted state licensure.

PROFESSIONAL ORGANIZATION MEMBERSHIP
All Athletic Training Students are encouraged to become involved in the profession by becoming members of MoATA, MAATA, and NATA. These professional organizations provide the student with valuable information, contacts, and opportunities. Students are strongly encouraged to attend as many professional and educational meetings as possible. Invaluable networking is enjoyed at such events.

ATHLETIC TRAINING INTERNSHIPS/FELLOWSHIPS/ASSISTANTSHIPS
A variety of internships offered through professional sports teams, development camps, Olympic organizations, and industrial settings are available to athletic training students. Interested students are strongly encouraged to apply for any internship relating to athletic training and his/her career interest. Students are encouraged to notify staff and faculty athletic trainers for guidance and assistance in the application process to secure an internship. Facilities offering such opportunities may require more stringent requirements to be met such as drug testing and criminal background checks done within the calendar year. It can also be expected that sponsoring facilities and/or organizations become an affiliated site per the CAATE. Students who choose to participate in these activities must purchase their own private liability policy and are not to take on the title athletic trainer.
SECTION IX: STUDENT RESOURCES

SCHOLARSHIPS
There are numerous opportunities for Athletic Training Students to obtain scholarships and other funds to assist with the cost of education. Scholarships are offered through the School of Nutrition Kinesiology & Psychological Science, CHST, UCM, NATA, MoATA, MAATA, and other athletic training organizations. Staff and faculty athletic trainers will assist students in any way they can to secure these funds.

COUNSELING SERVICES
If any student believes that they need to talk to a professional counselor then they are encouraged to seek help in the UCM Psychological Services offices located in Humphreys 131, 660-543-4060. ATP faculty are available to facilitate securing such resources.

OFFICE OF STUDENT EXPERIENCE AND ENGAGEMENT
Should a student experience life issues that will impact their academic career, it is the responsibility of the student to contact student affairs to arrange for an appropriate plan of action. The Office of Student Experience and Engagement can be reached at 660-543-4114 or Administration Building Room 214.

EARLY ENROLLMENT
Students enrolled in athletic training courses at UCM are eligible to enroll in their next semester’s courses through early enrollment with the UCM Department of Intercollegiate Athletics. This opportunity is not a right but a privilege and should be treated as such. If a student is not planning on continuing into the next semester course sequence within the ATP, then the ATP would insist that you not attend the ATP early enrollment session. Every student is required to attend our specific time slot and can only miss this requirement due to illness or class conflict. Attendance at a clinical rotation is not an excuse and arrangements with their supervisor should be made well in advance.

ACADEMIC SERVICES
Athletic Training Students who need assistance with their coursework are highly encouraged to talk to the Clinical Education Coordinator or Program Director to discuss their academic progress and to help arrange tutorial assistance through UCM Department of Intercollegiate Athletics or in other tutorial programs across campus at no cost.
SECTION X: DISCIPLINARY ACTION AND RESIGNATION

DISCIPLINE
If a situation arises where an ATS fails to fulfill his/her responsibilities with their academic performance in the classroom and/or at their clinical assignments, then the Clinical Education Coordinator will meet with the staff to determine a course of action. This action may range from suspension from the athletic training room for a period of time, or a reduction in the responsibilities of the athletic training student involved, or dismissal from the program.

INFRACTION POLICY
This policy is based upon the following point system:

<table>
<thead>
<tr>
<th>Infraction Level</th>
<th>Point Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild</td>
<td>1 point</td>
</tr>
<tr>
<td></td>
<td>2 points</td>
</tr>
<tr>
<td></td>
<td>3 points</td>
</tr>
<tr>
<td>Moderate</td>
<td>4 points</td>
</tr>
<tr>
<td></td>
<td>5 points</td>
</tr>
<tr>
<td></td>
<td>6 points</td>
</tr>
<tr>
<td></td>
<td>7 points</td>
</tr>
<tr>
<td>Severe</td>
<td>8 points</td>
</tr>
<tr>
<td></td>
<td>9 points</td>
</tr>
<tr>
<td></td>
<td>10 points</td>
</tr>
</tbody>
</table>

Upon accruing a total of five (5) points during a single academic year, the athletic training student (ATS) will be dismissed from their clinical assignment for a time period determined by the Program Director and the Clinical Education Coordinator. During which time the PD and CEC will determine the appropriate course of action.

During this time period, the ATS cannot earn hours towards the lab classes and clinical responsibilities will be removed. Required proficiencies per course syllabus and required clinical hours will not change.

**Permanent dismissal from the ATP will occur upon accruement a total of ten (10) points in one’s ATS academic career.**

ATS will be notified of his/her infraction in writing. A meeting will be set up with the Clinical Education Coordinator and the Program Director. Every attempt will be made to meet within one week of notification of infraction. The original infraction notice and all correspondence will be kept in the ATS’s file.

Legal ramifications for criminal activity can result in anything from a write-up with points, to program dismissal depending on the final court decision. Your initial charge is not what the write-up and potential dismissal is based upon, it is the final decision made by the courts. This write-up/dismissal will be made in conjunction with the PD and the office of UCM student engagement.
This following list is provided as a guide and not intended to be all-inclusive. Any action, inaction that reflects negatively upon the ATS or program in considered an offense:

<table>
<thead>
<tr>
<th>Examples of Infractions</th>
<th>Consequence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reporting late to a clinical assignment, class, or meeting (without direct communication)</td>
<td>🡪 Mild</td>
</tr>
<tr>
<td>Reporting to a clinical assignment not in appropriate attire or unprofessional appearance</td>
<td>🡪 Mild</td>
</tr>
<tr>
<td>Missing a required meeting</td>
<td>🡪 Mild</td>
</tr>
<tr>
<td>Complaints from a coach or administrator</td>
<td>🡪 Mild/Moderate</td>
</tr>
<tr>
<td>Unprofessional behavior or illegal activity, e.g. participating in social media forums</td>
<td>🡪 Mild/Moderate/Severe</td>
</tr>
<tr>
<td>Failure to adhere to academic/classroom expectations</td>
<td>🡪 Mild/Moderate/Severe</td>
</tr>
<tr>
<td>Academic misconduct (Plagiarism)</td>
<td>🡪 Moderate/Severe</td>
</tr>
<tr>
<td>Reporting to any ATP sponsored event or athletic training educational or clinical experience impaired by drugs or alcohol.</td>
<td>🡪 Severe</td>
</tr>
<tr>
<td>Any violation of HIPAA or FERPA regulations</td>
<td>🡪 Severe</td>
</tr>
<tr>
<td>Intent to distribute a controlled substance</td>
<td>🡪 Severe</td>
</tr>
<tr>
<td>Criminal conviction</td>
<td>🡪 Severe/Dismissal</td>
</tr>
</tbody>
</table>

* First year students are expected to adhere to the same guidelines as ATP students. Failure will reflect negatively on their eligibility for selection to the program.

**APPEAL PROCESS**

Any Athletic Training Student in the Athletic Training Education Program has the right to appeal or petition any decision made by the Athletic Training Education Program. Students are encouraged to become familiar with the UCM student handbook which outlines various rights and options for appeal available to students. The appeal process is as follows:

- The student will appeal (in writing) the decision to the Athletic Training Education Program Director within 7 days.
- If the student is not satisfied, he/she can appeal in writing to the Department Chair of Nutrition & Kinesiology within 7 days of the PD’s decision.
- The student may then appeal in writing to the Dean of the College of Health, Science and Technology within 7 days of the Chair’s decision.
- The student may then appeal in writing to the Provost and the Vice President for Academic Affairs within 7 days of the Dean’s decision.
- The student may then appeal in writing to the President of the University within 7 days of the Vice President’s decision.

**PROBATION OR DISMISSAL FROM CLINICAL EDUCATION**

Athletic Training is a medical profession and academic performance should be your main priority in the Athletic Training Program at UCM. Students must maintain a cumulative grade
point average (GPA) of 2.75 or higher (on a 4.00 scale). Should the cumulative GPA fall below a 2.75 the student will be placed on programmatic academic probation. Any Athletic Training Student on probation is required to earn a 2.75 or better semester GPA in each subsequent semester (summer courses will not factor into GPA for semester). A student shall not be on programmatic academic probation more than two total semesters while in the ATP. Dismissal from the program will occur upon the occurrence of the third semester where the student fails to meet academic expectations.

Notification of requirements to be maintained, or of permanent dismissal from the ATP will be addressed in a formal letter from the Program Director. In addition, the student will discuss their deficiency with PD, CEC, and the instructor of record. On occasion, a remediation plan may be imposed or recommended to help students recover from their fallen academic status by the PD, CEC, and instructor of record. These may include study hall assignments, tutoring services, and other counseling recommendations.

Failure to attain a B or better in an AT prefix course, or a C or better in the other courses within the academic major will result in consequences and/or infractions

- Students who fall in or after the 2016-2017 catalog will have the following consequences:
  - Failure to attain a B or better in AT prefix course
    - The student will be held back one full academic year to retake and successfully pass the AT course with a B. These students will not be placed on programmatic academic probation.
    - If the student fails to maintain the minimum GPA requirements for the ATP, they will be placed on academic probation. ADDITIONALLY, they will be held back one year to retake the AT course. During that year, the student will remain under the policies of the ATP during the year they are held.
    - After the course has been successfully remediated, then the student will be re-assigned to a new cohort group and will resume programmatic privileges.
  - Failure to attain C or better in major required classes – students must repeat the course to earn a satisfactory grade. The final grade can potentially affect the students’ programmatic academic probation status.

RESIGNATION

At any time a student decides that athletic training is not the profession for them, they are encouraged to discuss the decision with a faculty member. The Athletic Training Student needs to inform the Program Director and submit a letter stating their resignation to the Program Director. All clothing and supplies distributed to the student by the program must be returned. If the clothing and supplies are not returned the student will be charged accordingly. In addition, the student handbook must be returned to the Program Director.

ATHLETIC TRAINING STUDENT HANDBOOK

In the event of a separation from the Program, the Athletic Training Student Handbook must be surrendered to the Program Director as the handbook is the property of the ATP.
SECTION XI: ATTESTATION - Student Copy

ATTESTATION
I, ________________________________ , have carefully and completely read, understand, and provided my signature on the individual policies to this UCM ATP 2020-2021 Handbook, and have had all my questions satisfactorily answered. I understand that by my signature, I agree to abide by all terms, policies, and procedures contained therein. I accept any consequences that result from not abiding by these policies.

Student Signature: ________________________________________

Date________________

Program Director Signature: _________________________________

Date________________
SECTION XI: ATTESTATION - ATP Copy

ATTESTATION

I, _______________________________________, have carefully and completely read, understand, and provided my signature on the individual policies to this UCM ATP 2020-2021 Handbook, and have had all my questions satisfactorily answered. I understand that by my signature, I agree to abide by all terms, policies, and procedures contained therein. I accept any consequences that result from not abiding by these policies.

Student Signature: _______________________________________

Date________________

Program Director Signature: ________________________________

Date________________
<table>
<thead>
<tr>
<th>Preceptor</th>
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<tbody>
<tr>
<td><strong>College</strong></td>
<td></td>
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<tr>
<td>UCM Athletics</td>
<td>AT</td>
</tr>
<tr>
<td>Ron Dubuque</td>
<td>AT</td>
</tr>
<tr>
<td>Crystal Meeks</td>
<td>AT</td>
</tr>
<tr>
<td>Rebecca David</td>
<td>AT</td>
</tr>
<tr>
<td>Christian Bedard</td>
<td>AT</td>
</tr>
<tr>
<td>Amanda Ralton</td>
<td>AT</td>
</tr>
<tr>
<td>Missouri Valley College</td>
<td>AT</td>
</tr>
<tr>
<td>Vince Fedorowich</td>
<td>AT</td>
</tr>
<tr>
<td><strong>High Schools</strong></td>
<td></td>
</tr>
<tr>
<td>Blue Springs High School</td>
<td>AT</td>
</tr>
<tr>
<td>Steve Morrow</td>
<td>AT</td>
</tr>
<tr>
<td>Blue Springs South High School</td>
<td>AT</td>
</tr>
<tr>
<td>Andre Taylor</td>
<td>AT</td>
</tr>
<tr>
<td>Grain Valley High School</td>
<td>AT</td>
</tr>
<tr>
<td>Jason Means</td>
<td>AT</td>
</tr>
<tr>
<td>Lee Summit High School</td>
<td>AT</td>
</tr>
<tr>
<td>Angela Oswald</td>
<td>AT</td>
</tr>
<tr>
<td>Noelle Fielder</td>
<td>AT</td>
</tr>
<tr>
<td>Lee Summit West High School</td>
<td>AT</td>
</tr>
<tr>
<td>Susie Humphreys</td>
<td>AT</td>
</tr>
<tr>
<td>Will Ballantyne</td>
<td>AT</td>
</tr>
<tr>
<td>Oak Grove High School</td>
<td>AT</td>
</tr>
<tr>
<td>Cole Webster</td>
<td>AT</td>
</tr>
<tr>
<td>Raytown High School</td>
<td>AT</td>
</tr>
<tr>
<td>Smith Cotton High School</td>
<td>AT</td>
</tr>
<tr>
<td>Jake Bellon</td>
<td>AT</td>
</tr>
<tr>
<td><strong>Physical Therapy Clinics</strong></td>
<td></td>
</tr>
<tr>
<td>SERC-Warrensburg</td>
<td>PT</td>
</tr>
<tr>
<td>Kelsi Bennett</td>
<td>PT</td>
</tr>
<tr>
<td>SERC-Sedalia</td>
<td></td>
</tr>
<tr>
<td>Adam Gerke</td>
<td>PT</td>
</tr>
<tr>
<td><strong>Physician groups and hospitals</strong></td>
<td></td>
</tr>
<tr>
<td>Central Family Medicine- WMMC Affiliate</td>
<td></td>
</tr>
<tr>
<td>Dr. David Glover</td>
<td>MD</td>
</tr>
<tr>
<td>Dr. Drew Glover</td>
<td>MD</td>
</tr>
<tr>
<td>Dr. Brent Hoke</td>
<td>DO</td>
</tr>
<tr>
<td>Dr. Dana Brewington</td>
<td>MD</td>
</tr>
<tr>
<td>WMMC- Wound Center</td>
<td></td>
</tr>
<tr>
<td>Carly Kellogg</td>
<td>RN</td>
</tr>
<tr>
<td>Name</td>
<td>Title</td>
</tr>
<tr>
<td>-----------------------</td>
<td>---------</td>
</tr>
<tr>
<td>Jennifer Patterson</td>
<td>RN</td>
</tr>
<tr>
<td>Western Missouri Bone and Joint</td>
<td></td>
</tr>
<tr>
<td>Dr. Aaron Rupp</td>
<td>DO</td>
</tr>
<tr>
<td>Bothwell Regional Hospital</td>
<td></td>
</tr>
<tr>
<td>Dr. Doug Kiburz</td>
<td>MD</td>
</tr>
<tr>
<td>Dr. Evan Stout</td>
<td>MD</td>
</tr>
<tr>
<td>Rockhill Orthopedics</td>
<td></td>
</tr>
<tr>
<td>Dr. Jarron Tilghman</td>
<td>MD</td>
</tr>
<tr>
<td>SANO</td>
<td></td>
</tr>
<tr>
<td>Dr. Matthew Daggett</td>
<td>DO</td>
</tr>
<tr>
<td>Dr. Tim Roberts</td>
<td>DO</td>
</tr>
<tr>
<td>Joe Whetstone</td>
<td>AT</td>
</tr>
<tr>
<td>Samantha Tienken</td>
<td>AT</td>
</tr>
<tr>
<td>Elisa Ray</td>
<td>AT</td>
</tr>
<tr>
<td>Allison Hlavin</td>
<td>AT</td>
</tr>
<tr>
<td>Golden Valley Memorial Hospital – ER</td>
<td></td>
</tr>
<tr>
<td>Brittney Witherspoon</td>
<td>RN</td>
</tr>
<tr>
<td>Golden Valley Memorial Hospital – Wound Center</td>
<td></td>
</tr>
<tr>
<td>Jettie Bailey</td>
<td>RN</td>
</tr>
<tr>
<td>Golden Valley Memorial Hospital – Aquatic</td>
<td></td>
</tr>
<tr>
<td>Ashley Beck</td>
<td>PTA</td>
</tr>
</tbody>
</table>

**Miscellaneous**

Kansas City Royals

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dylan Wilson</td>
<td>AT</td>
</tr>
</tbody>
</table>

List is subject to updates as preceptors are added/removed
SECTION XII: EMERGENCY ACTION PLANS

UNIVERSITY OF CENTRAL MISSOURI

SPORTS MEDICINE
EMERGENCY ACTION PLAN

(Updated July 2020)
ACKNOWLEDGMENT

This document is an institutional development of individualized emergency plans for all athletics activities as noted in Section No. 11 of NCAA Sports Medicine Handbook Guideline No. 1-A.

INTRODUCTION

Emergency situations may arise at any time during athletic events. Expedient action must be taken in order to provide the best possible care to the athletes of emergency and/or life threatening conditions. The development and implementation of an emergency plan will help ensure that the best care will be provided.

University of Central Missouri has a duty to develop an emergency plan that may be implemented immediately when necessary and to provide appropriate standards of health care to all sports participants. As athletic injuries may occur at any time and during any activity, the sports medicine team must be prepared. This preparation involves formulation of an emergency plan, proper coverage of events, maintenance of appropriate emergency equipment and supplies, utilization of appropriate emergency medical personnel, and continuing education in the area of emergency medicine. Hopefully, through careful pre-participation physical screenings, adequate medical coverage, safe practice and training techniques and other safety avenues, some potential emergencies may be averted. However, accidents and injuries are inherent with sports participation, and proper preparation on the part of the sports medicine team will enable each emergency situation to be managed appropriately.

*ATS assigned to off-campus affiliated sites are to UCM Blackboard, AT Commons to download EAPs prior to starting their assignment. The EAP is to be included in their Handbook which is to remain with them at their clinical site at all times.

Components of the Emergency Plan

There are three basic components of this plan:

- Emergency personnel
- Emergency communication
- Emergency equipment
Emergency Plan Personnel

With practice and competition at University of Central Missouri, the first responder to an emergency is typically a member of the sports medicine staff, most commonly a certified athletic trainer. A team physician may not always be present at every organized practice or competition. The type and degree of sports medicine coverage for an athletic event may vary widely, based on such factors as the sport or activity, the setting, and the type of training or competition. The first responder in some instances may be a coach or other institutional personnel. Certification in cardiopulmonary resuscitation (CPR), first aid, prevention of disease transmission, and emergency plan review is required for all athletics personnel associated with practices, competitions, skills instruction, and strength and conditioning.

The development of an emergency plan cannot be complete without the formation of an emergency team. The emergency team may consist of a number of healthcare providers including physicians, emergency medical technicians, certified athletic trainers, athletic training students, coaches, and managers. Roles of these individuals within the emergency team may vary depending on various factors such as the number of members of the team, the athletic venue itself, or the preference of the head athletic trainer. There are four basic roles within the emergency team. The first and most important role is immediate care of the athlete and/or patient. Acute care in an emergency situation should be provided by the most qualified individual on the scene. Individuals with lower credentials should yield to those with more appropriate training. The second role, equipment retrieval, may be done by anyone on the emergency team who is familiar with the types and location of the specific equipment needed. Athletic training students, managers, and coaches are good choices for this role. The third role, EMS activation, may be necessary in situations where emergency transportation is not already present at the sporting event. This should be done as soon as the situation is deemed an emergency or a life-threatening event. Time is the most critical factor under emergency conditions. Activating the EMS system may be done by anyone on the team. However, the person chosen for this duty should be someone who is calm under pressure and who communicates well over the telephone. This person should also be familiar with the location and address of the sporting event. After EMS has been activated, the fourth role in the emergency team should be performed, that of directing EMS to the scene. One member of the team should be responsible for meeting emergency medical personnel as they arrive at the site of the contest. Depending on ease of access, this person should have keys to any locked gates or doors that may slow the arrival of medical personnel. An athletic training student, manager, or coach may be appropriate for this role.

University of Central Missouri Athletic Training Personnel

Ron DuBuque- Athletic Trainer
Crystal Meeks- Athletic Trainer
Rebecca David- Athletic Trainer
Graduate Assistant Athletic Trainers 2020-2021
Amanda Ralton
ROLES WITHIN THE EMERGENCY TEAM

Immediate care of the athlete
Emergency equipment retrieval
Activation of the Emergency Medical System
Direction of EMS to scene

ACTIVATING THE EMS SYSTEM

Making the Call:
- 911 (if available)
- telephone numbers for local police, fire department, and ambulance service

Providing Information:
- name, address, telephone number of caller
- number of athletes
- condition of athlete(s)
- first aid treatment initiated by first responder
- specific directions as needed to locate the emergency scene ("come to south entrance of the Multipurpose Building")
- other information as requested by dispatcher

When forming the emergency team, it is important to adapt the team to each situation or sport. It may also be advantageous to have more than one individual assigned to each role. This allows the emergency team to function even though certain members may not always be present.

EMERGENCY COMMUNICATION

Communication is the key to quick delivery of emergency care in athletic trauma situations. Athletic trainers and emergency medical personnel must work together to provide the best possible care to
injured athletes. Communication prior to the event is a good way to establish boundaries and to build rapport between both groups of professionals. If emergency medical transportation is not available on site during a particular sporting event then direct communication with the emergency medical system at the time of injury or illness is necessary.

Access to a working telephone or other telecommunications device, whether fixed or mobile, should be assured. The communications system should be checked prior to each practice or competition to ensure proper working order. A back-up communication plan should be in effect should there be failure of the primary communication system. The most common method of communication is a public telephone. However, a cellular phone is preferred if available. At any athletic venue, whether home or away, it is important to know the location of a workable telephone. Pre-arranged access to the phone should be established if it is not easily accessible.

**EMERGENCY EQUIPMENT**

All necessary emergency equipment should be at the site and quickly accessible. Personnel should be familiar with the function and operation of each type of emergency equipment. Equipment should be in good operating condition, and personnel must be trained in advance to use it properly. Emergency equipment should be checked on a regular basis and used by emergency personnel. The emergency equipment available should be appropriate for the level of training for the emergency medical providers.

It is important to know the proper way to care for and store the equipment as well. Equipment should be stored in a clean and environmentally controlled area. It should be readily available when emergency situations arise.

**TRANSPORTATION**

Emphasis is placed at having an ambulance on site at high risk sporting events. EMS response time is additionally factored in when determining on site ambulance coverage. University of Central Missouri coordinates on site ambulances for competition in football. Ambulances may be coordinated on site for other special events/sports, such as major tournaments or Conference/NCAA regional or championship events. Consideration is given to the capabilities of transportation service available (i.e., Basic Life Support or Advanced Life Support) and the equipment and level of trained personnel on board the ambulance. In the event that an ambulance is on site, there should be a designated location with rapid access to the site and a cleared route for entering/exiting the venue.

In the emergency evaluation, the primary survey assists the emergency care provider in identifying emergencies requiring critical intervention and in determining transport decisions. In an emergency situation, the athlete should be transported by ambulance, where the necessary staff and equipment is available to deliver appropriate care. Emergency care providers should refrain from transporting
unstable athletes in inappropriate vehicles. Care must be taken to ensure that the activity areas are supervised should the emergency care provider leave the site in transporting the athlete.

CONCLUSION

The importance of being properly prepared when athletic emergencies arise cannot be stressed enough. An athlete's survival may hinge on how well trained and prepared athletic healthcare providers are. It is prudent to invest athletic department "ownership" in the emergency plan by involving the athletic administration and sport coaches as well as sports medicine personnel. The emergency plan should be reviewed at least once a year with all athletic personnel, along with CPR and first aid refresher training. Through development and implementation of the emergency plan, University of Central Missouri helps ensure that the athlete will have the best care provided when an emergency situation does arise.
Emergency Personnel: Certified athletic trainer and athletic training student(s) on site for practice and competition (if available); MD on site for basketball games and other special occasions; ambulance available by phone (911)

Emergency Communication: Notify Public Safety at 543-4123 via land line from any phone in the Complex. Dial 911 from any mobile phone.

Emergency Equipment: supplies (trauma kit, splint kit, spine board) maintained in Multipurpose Building Athletic Training Facility. AED is located on the wall in the east lobby area by the ticket counter.

Insert Picture

Roles of First Responders
- Immediate care of the injured or ill student-athlete
- Emergency equipment retrieval
- Activation of emergency medical system (EMS)
  - Call 911
  - provide name
- address
- telephone number
- number of individuals injured
- condition of injured
- first aid treatment
- specific directions
- other information as requested

- Notify Public Safety at 543-4123
- Direction of EMS to scene
- Open appropriate gates
- Designate individual to "flag down" EMS and direct to scene
- Scene control
  - Limit scene to first aid providers and move bystanders away from area

**Venue Directions:** Multipurpose Building is located between Washington (East) and Warren Streets (West) and King Street (North). The Multipurpose Building has multiple entrances. The following provides the quickest access to the court level as well as the athletic training facility:

- Main gymnasium: Use doors on East or West side of building
- Athletic Training Room: Use doors on East or West side of building
- Weight room: Use doors on Northeast side of the building
- Swimming pool: Use doors on the North side of building.
EMERGENCY PLAN FOOTBALL STADIUM VENUE

Emergency Personnel: certified athletic trainers and athletic training student(s) on site for practice and competition (if available); additional sports medicine staff accessible from; MD on site for football games and other special occasions; ambulance available on game days, ambulance available by phone (911) during any other locations

Emergency Communication: Notify Public Safety at 543-4123 via landline from any phone in the Complex. Dial 911 from any mobile phone.

Emergency Equipment: supplies (trauma kit, splint kit, etc) maintained in the football athletic training room. Additional medical equipment is available from Multipurpose Building Athletic Training Facility. Mounted AED located under the stands outside of the weight room. Mobile AED during games with Athletic Training Staff.

Roles of First Responders

- Immediate care of the injured or ill student-athlete
- Emergency equipment retrieval
- Activation of emergency medical system (EMS)
  - Call 911
-provide name
-address
-telephone number
-number of individuals injured
-condition of injured
-first aid treatment
-specific directions
-other information as requested

-Notify Public Safety at 543-4123
-Direction of EMS to scene
-Open appropriate gates
-Designate individual to "flag down" EMS and direct to scene
-Scene control
  -Limit scene to first aid providers and move bystanders away from area

**Venue Directions:** Football Stadium is located between Washington (West) and Holden Streets (East). The Football Stadium has three entrances. The following provides the quickest access to the field:

Washington Street main entrance provides direct access to the field.

**Venue Map:**
EMERGENCY PLAN MORROW GARRISON/STUDENT RECREATION CENTER COMPLEX

Emergency Personnel: certified athletic trainer and athletic training student(s) on site for practice and competition (if available); Main Athletic Training Room located in G032 or basement of facility.

Emergency Communication: Notify Public Safety at 543-4123 via land line from any phone in the Complex. Dial 911 from any mobile phone.

Emergency Equipment: supplies (trauma kit, splint kit, spine board) maintained in Dr. Ron “Doc” VanDam Athletic Training Facility. 3 AEDs are located in the complex:
Unit 1 - Wall mounted at the east hallway of the main check-in desk
Unit 2 - Wall mounted outside Elevator A lower level of North Morrow
Unit 3 - Wall mounted outside Elevator C lower level of Garrison gym

**Roles of First Responders**

- Immediate care of the injured or ill student-athlete
- Emergency equipment retrieval
- Activation of emergency medical system (EMS)
  - Call 911
    - provide name
    - address
    - telephone number
    - number of individuals injured
    - condition of injured
    - first aid treatment
    - specific directions
    - other information as requested

- Notify Public Safety at 543-4123
- Direction of EMS to scene
- Open appropriate gates
- Designate individual to "flag down" EMS and direct to scene
- Scene control
  - Limit scene to first aid providers and move bystanders away from area

**Venue Directions:** Morrow Garrison/SRC Complex is located off of McGuire and just north of Clark Street. The MG/SRC Complex has multiple entrances. The following provides the quickest access to the gymnasium as well as the athletic training facility: Turn onto Tyler Street off of McGuire between the Student Recreation Center and Lovinger Education Building. The lower level is accessible at the southeast corner of the building. The doors on the lower level will give direct access to the building. An elevator on the lower level will give allow access to Garrison Gymnasium and the Student Recreation Center
Venue Map:
Emergency Personnel: certified athletic trainer and/or athletic training student(s) on site for practice and competition when available;

Emergency Communication: Notify Public Safety at 543-4123 via landline from any phone in the Complex. Dial 911 from any mobile phone.

Emergency Equipment: supplies (trauma kit, splint kit, etc) maintained in the Athletic Training Facility at the Multipurpose Building and the Football Athletic Training Room, Mobile AED present when athletic trainer present

Roles of First Responders

- Immediate care of the injured or ill student-athlete
- Emergency equipment retrieval
- Activation of emergency medical system (EMS)
- Call 911
provide name
- address
- telephone number
- number of individuals injured
- condition of injured
- first aid treatment
- specific directions
- other information as requested

- Notify Public Safety at 543-4123
- Direction of EMS to scene
- Open appropriate gates
- Designate individual to "flag down" EMS and direct to scene
- scene control:
  - limit scene to first aid providers and move bystanders away from area

**Venue Directions:** Baseball stadium is located on the corner of King Street and Main Street. Two gates provide access to the stadium: Main Street (1st base side) and King Street (3rd base side) drive leads to field as well as rear door of complex (locker room)

**Venue Map:**
EMERGENCY PLAN SOUTH RECREATION VENUE

Emergency Personnel: certified athletic trainer and/or athletic training student(s) on site for practice and competition when available.

Emergency Communication: Notify Public Safety at 543-4123 via landline from any phone in the Complex. Dial 911 from any mobile phone.

Emergency Equipment: supplies (trauma kit, splint kit, spine board) maintained in South Recreation Satellite Athletic Training Facility; AED is located in the brick office/locker room at the South Recreation Complex.

Roles of First Responders:
- Immediate care of the injured or ill student-athlete
- Emergency equipment retrieval
- Activation of emergency medical system (EMS)
  - Call 911
    - provide name
    - address: Physical Address for South Rec 109 S Marr Dr
    - telephone number
    - number of individuals injured
    - condition of injured
    - first aid treatment
- specific directions
- other information as requested

- Notify Public Safety at 543-4123
- Direction of EMS to scene
- Open appropriate gates
- Designate individual to "flag down" EMS and direct to scene
- scene control:
  - limit scene to first aid providers and move bystanders away from area

**Venue Directions:** Softball stadium is located on the south side of DD Highway adjacent to Zoll Street. One gate provides access to the stadium: 3rd base side (go through the parking lot), has access to the field. Soccer stadium is located on the south side of DD Highway adjacent to Zoll Street. Gate located on the south side of the field will provide access to the whole field.
Venue Map:
POLICY ACADEMY-WRESTLING PRACTICE

Emergency Personnel: certified athletic trainer and/or athletic training student(s) on site for practice when available.

Emergency Communication: Notify Public Safety at 543-4123 via landline from any phone in the Complex. Dial 911 from any mobile phone.

Emergency Equipment: supplies (trauma kit, splint kit, etc) maintained in the Athletic Training Facility at the Multipurpose Building and the Football Athletic Training Room, Mobile AED present when an athletic trainer is present. Athletic Trainer will also have basic first aid supplies and splints when present.

Roles of First Responders:

- Immediate care of the injured or ill student-athlete
- Emergency equipment retrieval
- Activation of emergency medical system (EMS)
- Call 911
  - provide name
  - address
  - telephone number
  - number of individuals injured
  - condition of injured
-first aid treatment
-specific directions
-other information as requested
-Notify Public Safety at 543-4123
-Direction of EMS to scene
-Open appropriate doors
-Designate individual to "flag down" EMS and direct to scene
-scene control:
- limit scene to first aid providers and move bystanders away from area

**Venue Directions:** The Police Academy is located off S Washington Street. It shares a street corner with the UCM Crossing. It is best reached by the parking lot entrance on W South Street.

**Venue Map:**
Emergency Personnel: certified athletic trainer and/or athletic training student(s) on site for practice when available.


Emergency Equipment: supplies (trauma kit, splint kit, etc) maintained in the Athletic Training Facility at the Multipurpose Building. Mobile AED present when athletic trainer present. Athletic Trainer will also have basic first aid supplies and splints when present.

Roles of First Responders:

- Immediate care of the injured or ill student-athlete
- Emergency equipment retrieval
- Activation of emergency medical system (EMS)
  - Call 911
    - provide name
    - address
    - telephone number
-number of individuals injured
-condition of injured
-first aid treatment
-specific directions
-other information as requested

-Notify Public Safety at 543-4123
-Direction of EMS to scene
-Open appropriate gates
-Designate individual to "flag down" EMS and direct to scene

-scene control:
- limit scene to first aid providers and move bystanders away from area

**Venue Directions:** When directing EMS to location, location should be described as King Street in between South Mulberry Street and South Warren Street by UCM West Ground Shed.

**Venue Map:**