UNIVERSITY OF CONNECTICUT
College of Agriculture, Health and Natural Resources
Department of Kinesiology
Professional Athletic Training Program

Policies and Procedures
2017-2018

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Scope of the Professional Athletic Training Program Policies & Procedures Manual

Information in this manual is not intended to be fully comprehensive. While every effort is made to keep all of these sources accurate, up-to-date, and in agreement with one another, occasional discrepancies may occur and will be resolved by consultation with the program director. Policies may change and these changes will be announced verbally and in writing to all faculty, students, administrators, and preceptors. Any such changes will supersede all previous policies.
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Vision and Mission Statement

The vision of the University of Connecticut Professional Athletic Training Program is to provide the student a dynamic and engaging learning environment that supports the growth and professional development necessary to excel within the field of athletic training.

The mission of the Athletic Training Program at the University of Connecticut is to provide our students with a high-quality education that incorporates inter-professional learning opportunities, exposure to evidence-based practice and high-quality research, and diverse educational experiences. We will inspire our students to be advocates for the profession and to be life-long learners committed to the delivery of quality patient-centered care.

Accreditation

The Professional Athletic Training Program is accredited by the Commission on Accreditation of Athletic Training Education (CAATE). Completion of the program leads to eligibility to take the Board of Certification examination.

CAATE
6836 Austin Center Blvd., Suite 250
Austin, TX 78731-3193
(512) 733-9700

Complaints can be filed with the CAATE, by contacting the CAATE at the above address or by submitting the complaint here: http://caate.net/contact/. Before filing a complaint with the CAATE, the student should explore all avenues to resolve the issue at the institution. Note that the CAATE does not accept anonymous complaints but does keep all information regarding the complaint confidential.

Program History

Athletic training education at the University of Connecticut began in 1999. The program was initially accredited by the Commission for Accreditation of Allied Health Education Programs (CAAHEP) in 2003 and re-accredited in 2006 by the Commission on Accreditation of Athletic Training Education (CAATE), and is pursuing re-accreditation this academic year (2017-2018).
Athletic Training Program Goals

1. Prepare athletic training students for success as a health care provider by:
   A. Providing clinical education experiences in a variety of settings, including high schools, universities, hospitals, and sports medicine clinics, with patients of diverse demographics and socioeconomic backgrounds, and with preceptors who demonstrate a commitment to teaching and learning while serving as role models for professional development.
      1. Preceptor evaluations completed by the students will demonstrate a high quality of instruction and support in learning.
      2. Exit interviews will demonstrate satisfaction with clinical education and preceptor interactions.
   B. Consistently providing challenging evidence-based course work, as well as research and teaching opportunities.
      1. Course evaluations will demonstrate that students are satisfied with the delivery of content in their courses.
      2. Exit interviews will highlight overall satisfaction with coursework, and with experiences related to research and teaching.
   C. Exposing the athletic training student to other health care professionals both in the classroom and in clinical settings.
      1. Exit interviews will demonstrate satisfaction with opportunities to develop their knowledge and interact with other members of the healthcare team.

2. Providing an opportunity for students to develop optimal skills in the prevention, recognition, evaluation, immediate care, rehabilitation & reconditioning of athletic-related injuries and conditions; health care administration; professional development & responsibility.
   1. Exit interviews will demonstrate satisfaction with overall experiences related to professional development and opportunities to develop as a practitioner.
   2. Board of certification examination results will demonstrate 100% first time pass rate, as well as scores that reflect a strong comparison to the national examination scores.

3. Placing students in supervised clinical education experiences that encourage appropriate professional and ethical behavior, common sense, evidence-based practice, and rational thinking and problem-solving skills.
   1. Exit interviews will demonstrate students who report satisfaction with clinical education experiences and report high scores for the program.
   2. Site Supervisor evaluations will report effective clinical education experiences that are supportive, challenging, and allow for professional growth.
   3. Student evaluations of the clinical site and Preceptor will demonstrate satisfactory scores regarding supervision, interaction, and opportunities for learning.
Athletic Training Student Responsibilities:

1. Adhering to the policies in the University Undergraduate Catalog, which was current at the time of initial registration, and of the Professional Athletic Training Program.

2. Meeting the requirements for graduation as stated in the University Undergraduate Catalog.

3. Meeting the requirements for following the policies and procedures appropriate to the various institutions within the University: a) Library; b) Parking; and c) Health Services.

4. Reading all material delivered to their e-mail address and posted on ATrack.

5. Any and all personal transportation necessary for class attendance, and to clinical education experiences.

6. Demonstrating appropriate and professional behavior at all times.

7. Maintaining a clean environment in their classrooms, laboratories and other student areas.

8. Attending all classes and laboratory sessions punctually; actively participating, and demonstrating self-reliance and personal responsibility for meeting the requirements of the program. Absences and tardiness reflect compromised participation and can affect the students’ grades.

9. Maintaining current certification in Professional Rescuer CPR/AED as long as they are in the Athletic Training program.

10. Completing all health and immunizations requirements and forms, in order to be in compliance with both university and clinical site requirements, and in order to participate in any clinical education experience. This includes any additional tests or examinations that may be required by a specific clinical site to which a student is assigned, including background checks, fingerprinting and drug screenings (see page 18).

11. Seeking out his/her faculty advisor and scheduling an appointment at least once during the semester. If the student is unable to find a mutual time for a meeting with the advisor, then the student should meet with the Program Director. The Program Director will then communicate to the assigned advisor.

12. Being academically honest. Academic misconduct is dishonest or unethical academic behavior that includes, but is not limited to, misrepresenting mastery in an academic area (e.g., cheating), failing to properly credit information, research, or ideas to their rightful originators or representing such information, research, or ideas as your own (e.g., plagiarism). See http://community.uconn.edu/the-student-code-appendix-a/ for more information.

13. Continue to meet the University of Connecticut Professional Athletic Training Program Technical Standards for Admission (see Appendix D).
Nondiscrimination Policy

The University of Connecticut’s Professional Athletic Training Program is committed to maintaining a safe and non-discriminatory learning, living and working environment for all members – students, faculty, preceptors, employees, and visitors. Academic and professional excellence can exist only when each member of our community is assured an atmosphere of safety and mutual respect. All members of the University community are responsible for the maintenance of an environment in which people are free to learn and work without fear of discrimination, discriminatory harassment or interpersonal violence. Discrimination diminishes individual dignity and impedes equal employment and educational opportunities.

The University of Connecticut complies with all applicable federal and state laws regarding non-discrimination, equal opportunity and affirmative action, including the provision of reasonable accommodations for persons with disabilities. UConn does not discriminate on the basis of race, color, ethnicity, religious creed, age, sex, marital status, national origin, ancestry, sexual orientation, genetic information, physical or mental disability, veteran status, prior conviction of a crime, workplace hazards to reproductive systems, gender identity or expression, or political beliefs in its programs and activities. Employees, students, visitors, and applicants with disabilities may request reasonable accommodations to address limitations resulting from a disability. The University's legal and ethical obligations to protect the civil rights of students and staff extends to clinical education settings.

For the full policy on Discrimination, Harassment, and Related Interpersonal Violence, please visit http://equity.uconn.edu/policiesprocedures/. For questions or more information, please contact the Associate Vice President, Office of Institutional Equity, 241 Glenbrook Road, Unit 4175, Storrs, CT 06269-4175; Phone: (860) 486-2943; Email: equity@uconn.edu / Website: http://www.equity.uconn.edu.

Retention Requirements

In order to successfully progress and complete the Professional Athletic Training Program, students must meet the following retention requirements:
1. Successful completion of all competencies and proficiencies outlined as part of ATP courses
2. Earn a “C” or better (2.0/3.0) in all Athletic Training core courses
3. Receive satisfactory evaluations from supervising preceptors
4. Continue to meet the University of Connecticut Professional Athletic Training Program Technical Standards for Admission.

Role of Advisors in the Professional Athletic Training Program:
At the beginning of the first semester in the program, all students will be assigned a faculty advisor. The initial assignment is by random process to a faculty member with a full-time appointment. As an advisor, the faculty member works closely with the Program Director. Students are strongly encouraged to meet with their advisor, as needed, throughout their time in the program. The faculty member should definitively meet with the student in the first few weeks of each semester or sooner when possible to ensure sufficient academic and clinical
experience progress is being made. During this meeting, previous student performance and the student’s plan for the upcoming semester should be discussed.

During the first semester in the program, students must meet with their advisor before March 1 to review their plan of study. This must be printed and signed by the student and advisor, and submitted to the Program Director.

**Plan of Study**

The University of Connecticut uses Plans of Study to list and track graduation requirements for the athletic training major. Students should use a Plan of Study to track their progress toward earning a degree and as a tool to assist with course registration.

Students must submit a Final Plan of Study to the Registrar's Office during the semester prior to the semester they intend to graduate. [http://grow.uconn.edu/plans-of-study/](http://grow.uconn.edu/plans-of-study/) Final plans need advisor and department head approval before being reviewed by Degree Audit. In order to submit your final plan online via the StudentAdmin system, you first need to apply for graduation online.

**How to find YOUR Plan of Study:**
1. Be sure to use the Plan of Study that corresponds to your assigned catalog year. If you do not know your catalog year, view your Academic Requirements report in Student Admin. Refer to the "Catalog Year" section at the top of your Academic Requirements report.
2. Choose the correct Catalog Year and then the Plan of Study listed for your specific major.

**Application for Graduation**

Graduation is not automatic; students who are candidates for graduation must apply to graduate through the Student Administration System, after which the Degree Audit section of the Office of the Registrar will determine whether all degree requirements will have been satisfied by the end of the semester.

Students must apply to graduate by the fourth week of their final semester. Students are able to apply once registration for their last semester opens up. Applying by the fourth week ensures students will be included in Commencement communications. For more information about using the system to apply for graduation, see Apply for Graduation on the Student Administration System Help website.

**Student Employment**

While it is recognized that students may have financial need during their educational career, it is recommended that due to the academic demands of the Professional Athletic Training Program that students limit employment commitments. Students who work are not considered to be representing the Athletic Training Program or the University of Connecticut.
Student Expectations and Behaviors

Foundational Behaviors of Professional Practice

The 5th Edition of the National Athletic Trainers’ Association Education Competencies outlines the Foundational Behaviors of Professional Practice. These basic behaviors permeate professional practice and are incorporated into instruction and assessed throughout the educational program. These behaviors are the minimal expectations that apply to students, faculty, and staff.

Primacy of the Patient

- Recognize sources of conflict of interest that can impact the client’s/patient’s health.
- Know and apply the commonly accepted standards for patient confidentiality.
- Provide the best healthcare available for the client/patient.
- Advocate for the needs of the client/patient.

Team Approach to Practice

- Recognize the unique skills and abilities of other healthcare professionals.
- Understand the scope of practice of other healthcare professionals.
- Execute duties within the identified scope of practice for athletic trainers.
- Include the patient (and family, where appropriate) in the decision-making process.
- Work with others in effecting positive patient outcomes.

Legal Practice

- Practice athletic training in a legally competent manner.
- Identify and conform to the laws that govern athletic training.
- Understand the consequences of violating the laws that govern athletic training.

Ethical Practice

- Comply with the NATA’s Code of Ethics and the BOC’s Standards of Professional Practice.
- Understand the consequences of violating the NATA’s Code of Ethics and BOC’s Standards of Professional Practice.
- Comply with other codes of ethics, as applicable.
Advancing Knowledge

- Critically examine the body of knowledge in athletic training and related fields.
- Use evidence-based practice as a foundation for the delivery of care.
- Appreciate the connection between continuing education and the improvement of athletic training practice.
- Promote the value of research and scholarship in athletic training.
- Disseminate new knowledge in athletic training to fellow athletic trainers, clients/patients, other healthcare professionals, and others as necessary.

Cultural Competence

- Demonstrate awareness of the impact that clients’/patients’ cultural differences have on their attitudes and behaviors toward healthcare.
- Demonstrate knowledge, attitudes, behaviors, and skills necessary to achieve optimal health outcomes for diverse patient populations.
- Work respectfully and effectively with diverse populations and in a diverse work environment.

Professionalism

- Advocate for the profession.
- Demonstrate honesty and integrity.
- Exhibit compassion and empathy.
- Demonstrate effective interpersonal communication skills.

Mentor Program

A mentor is defined as a knowledgeable and experienced guide, a trusted ally and advocate, and a caring role model. An effective mentor is respectful, reliable, patient, trustworthy, and a very good listener and communicator. Mentors can be found in the ranks of students themselves. Due to their close association with other students, peer mentors are very important and part of the professional development process of the athletic training student. There are many expectations and responsibilities placed upon the athletic training student and having a peer who has endured similar experiences can help support the novice athletic training student.

Upon enrollment into the Athletic Training Program, underclassmen will be assigned to an upperclassman. The underclassman will utilize the upperclassman as a resource to assist acclimation into the program, navigating coursework and clinical experiences, and any other advice needed. The upperclassman will gain valuable experience in mentoring a peer and will serve as a valuable opportunity to review, practice, and pass down clinical skills. Additionally, each student will also be assigned a PhD student as a second level mentor. It is our hope that
students will develop strong relationships that will continue during their studies in the Athletic Training Program.

Students will schedule informal meetings between themselves and their peer mentor. Ultimately, frequency is dependent upon needs, but is encouraged throughout the semester. These meetings should continue until the peer mentor graduates and/or the student becomes a peer mentor themselves. Open communication is necessary and helpful. Remember a peer mentor is a teacher, role model, an advocate, and an ally. The benefits of this relationship include increased confidence, valuable insights into the future, develop effective communication skills and coping skills.

The PhD mentor is another resource to help with studying or answer questions related the program and professional development. During their first semester in the program, incoming students MUST meet 3 times, formally, during the semester [approximately once a month] to discuss your experiences. During the formal meetings, you can discuss classes, clinical experiences, and any other items [positives, concerns, challenges, etc.]. The meeting with your PhD mentor is required during the first semester of the program for KINS 3110. It is our hope that these relationships will continue throughout the entire time enrolled in the program.

Social Media Policy

This policy speaks to the expectations for students related to social media (i.e. FaceBook, Twitter, etc.) and electronic forms of communication (i.e. email, texting), as it relates to clinical education. Violations of the policy are assessed on an individual basis, but violations and punishments will follow the Discipline Policy.

1. Students should avoid social media interaction (e.g., Facebook friends, Snapchat, Twitter) with current Athletic Training faculty, staff, preceptors, and student-athletes/patients. This also is inclusive of graduate students, interns, and other athletic training staff members. If a current social media relationship exits, prior to admission into the athletic training program, the student should limit interactions to be professional and ethical.
2. Students should avoid social media/electronic forms of communication to discuss health-related issues with student-athletes or patients.
3. Students should avoid any social media/electronic forms of communication with any athletes or patients who are minors.
4. Students should avoid taking pictures or posting anything about the student-athletes or patients they are providing care to, or patients other students are providing care to, on any social media.
5. Students should not share any information regarding patient diagnosis, diagnostic imaging, injury-related information, or suggestions for injury care, etc. to any form of social media or electronic forms of communication. *Note: If the student has any concerns or questions about the use of social media or electronic communication they should contact their preceptor or program director or clinical education coordinator immediately.*
Professional Relationships

The UCONN Professional Athletic Training Program strongly prohibits fraternizing with a student-athlete or other personnel within their clinical site or at another clinical site. This includes social interaction with athletes outside of the student’s clinical experience via phone, text, online or in person. It is recognized that in working closely with a team, friendships may arise between athletic training students and athletes. A professional demeanor should be exercised at all times. At no time, throughout a clinical rotation, should a student engage in conduct that could undermine their patients’ confidence or cause a conflict of interest in their patients’ care. If such conflicts arise the athletic training student may be reprimanded, removed or dismissed from their assigned duties. If an athletic training student is in an existing relationship that involves an athlete at a clinical site the Program Director and/or the Clinical Coordinator must be made aware of such relationships immediately. Appropriate actions will be taken to avoid potentially contentious circumstances and to maintain an optimal learning environment for the athletic training student.

Disclosure of a Disability:

The University of Connecticut is committed to protecting the rights of individuals with disabilities and assuring that the learning environment is accessible. Students with disabilities who request accommodations in a course or at a clinical site must contact the Center for Students with Disabilities (CSD). The CSD will work through an interactive process with students, instructors, the Program Director and the Clinical Education Coordinator to determine reasonable and appropriate accommodations on a case-by-case, course-by-course basis. Upon approval of accommodations, the CSD will notify the student and course instructor of record of those accommodations. It is the students’ responsibility to discuss the coordination of accommodations with instructors, the Program Director, and in the case of clinical education courses, the Clinical Education Coordinator and preceptor. Additional information regarding working with the CSD, including online registration with the Center, can be found at csd.uconn.edu. The Center for Students with Disabilities (CSD) can be contacted at (860) 486-2020, csd@uconn.edu, or Wilbur Cross Room 204. For complete information regarding the University's Policies and Procedures Regarding Students with Disabilities, please refer to www.csd.uconn.edu.

Attendance

Attendance in academic classes and clinical education experiences are mandatory for all students in the Professional Athletic Training Program. Students must notify the course instructor as soon as it is known that a class or mandatory activity will be missed, or no later than 24 hours after the absence. Acceptable means of notification are telephone, telephone message, or email. In the situation of absences from a clinical education experience, the preceptor at the site must be notified as soon as possible, but no less than 30 minutes from the start of the scheduled work day. The student is responsible for arranging with the instructor and/or preceptor for possible make-up of the missed class or clinical education experience.
Tardiness

“If you are 5 minutes early, you are never late” (unknown)
Tardiness is unacceptable and often demonstrates a lack of respect for others. Please plan appropriately to be on time to all courses, meetings, and clinical education experiences. While emergencies happen, it is the student’s responsibility to communicate appropriately with the course instructor or preceptor to notify a late arrival.

Academic Integrity

The UCONN Professional Athletic Training Program treats academic integrity seriously and complies with the university policy.

“Academic misconduct is dishonest or unethical academic behavior that includes, but is not limited to, misrepresenting mastery in an academic area (e.g., cheating), failing to properly credit information, research, or ideas to their rightful originators or representing such information, research, or ideas as your own (e.g., plagiarism).”
More information is located at: http://community.uconn.edu/the-student-code-appendix-a/

Professional memberships

Students are strongly encouraged to become student members of the National Athletic Trainers’ Association (NATA). Students are encouraged to be active in the University of Connecticut Athletic Training Student Organization; to attend state, regional, and national NATA and American College of Sports Medicine (ACSM) meetings as part of their professional development.

Grand Rounds

A Grand Rounds session is presented approximately three times each semester on Friday mornings at 7 am (location and exact dates TBA). The primary target audiences are faculty and students in the Department of Kinesiology and the UCONN Sports Medicine staff. Sessions are focused on the dissemination of information between physical therapy, athletic training, and other sports medicine professionals. Topics are nominated by the target audience and aim to translate the latest evidence in sports medicine. Attendance at these sessions is strongly encouraged for all athletic training students as they present a wonderful opportunity for networking with other students, faculty and staff, as well as promoting their knowledge base as a health care professional.
Sports Medicine Experience

In fulfilling Athletic Training Program requirements, all athletic training students must complete three semesters of KINS 3115 – Sports Medicine Experience (SME). The SME provides students with additional clinical education experiences (e.g., rehabilitation clinic, community large-scale event, physician extender opportunities), as well as exposure to teaching and research roles. Specific assignments during each semester will be made by the SME instructor of record.

Exit Interviews

All students in their final semester of the Professional Athletic Training Program will complete an anonymous program review questionnaire online and an in-person exit interview with the Program Director and Clinical Education Coordinator. An independent department administrative staff member will administer the online questionnaire. This information will be used to evaluate the program and provide constructive feedback to guide future improvements.
Program Costs & Fees

Current anticipated costs and fees associated with the Athletic Training Program 2017-2018

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-State tuition</td>
<td>$11,998</td>
</tr>
<tr>
<td>Out-of-State tuition</td>
<td>$34,066</td>
</tr>
<tr>
<td>Student fees</td>
<td>$2,842</td>
</tr>
<tr>
<td>On-campus housing</td>
<td>$6,838</td>
</tr>
<tr>
<td>On-campus meal plan</td>
<td>$5,676</td>
</tr>
<tr>
<td>Clothing</td>
<td>*as needed/desired</td>
</tr>
<tr>
<td>Transportation</td>
<td>At least one off-campus clinical experience is required with access to a car</td>
</tr>
<tr>
<td>Criminal background check</td>
<td>*as required by clinical site (approximately $30-100)</td>
</tr>
<tr>
<td>Health immunizations</td>
<td>*depends on health insurance</td>
</tr>
<tr>
<td>Professional liability insurance</td>
<td>$0 (covered by university for all affiliate sites)</td>
</tr>
<tr>
<td>NATA student membership</td>
<td>$60 (new students), $85 (renewing students)</td>
</tr>
<tr>
<td>ATrack fee</td>
<td>*if student does not belong to NATA – cost varies $100-120</td>
</tr>
<tr>
<td>CPR/First Aid Certification</td>
<td>$85-122 (*depending on location) – valid for two years</td>
</tr>
</tbody>
</table>

Discipline Policy

The following penalties were created to foster a level of quality control within the Professional Athletic Training Program. Issues that could be dealt with under the umbrella of this “Program Discipline Policy” include issues pertaining to clinical rotations, cheating, tardiness, course attendance, professional misconduct, overall behavior, in addition to other infractions/offenses. The Director of the Professional Athletic Training Program and the Clinical Education Coordinator will determine the penalties as related to the infraction. Please note that any offense may be deemed as any level of penalty depending on the nature and severity of the infraction, as determined by the Director of the Professional Athletic Training Program and/or the Clinical Education Coordinator.

1st Level Penalty:
- a) Meeting with the Director of the Professional Athletic Training Program and/or the Clinical Education Coordinator to discuss infraction
- b) Verbal Warning to student
- c) Notation will be made in student’s file

2nd Level Penalty:
- a) Meeting with the Director of the Professional Athletic Training Program and/or the Clinical Education Coordinator to discuss the infraction
- b) A single grade reduction for the corresponding clinical rotation course
c) A one-week suspension from the clinical experience assignment (hours to be made up before a final grade is registered)
d) Official notation made in the student’s file

3rd Level Penalty:
a) Meeting with the Director of the Professional Athletic Training Program and the Clinical Education Coordinator to discuss the infraction
b) Removal from the clinical site and failure of the corresponding clinical experience (needs to be made up before completing program)
c) One semester suspension from Professional Athletic Training Program
d) Official notation made in student’s file

4th Level Penalty:
a) Meeting with the Director of the Professional Athletic Training Program and the Clinical Education Coordinator to discuss the penalty
b) Permanent dismissal from the Professional Athletic Training Program
c) Official notation made in student’s file

Appeals Process: A student has the right to appeal any decision made by the ATP. The appeals process must be initiated within 10-days of the notification of punishment. The intent to appeal must be written in a formal letter addressed to the Program Director, which should include:
1. The reason the student is appealing the decision
2. Rationale for why the decision should be over turned

Following receipt of the students appeal, the Program Director will schedule a conference with the following individuals:
1. The student
2. The Program Director
3. Clinical Education Coordinator
4. Department Chair
5. In the event that the disciplinary action was a result of a violation occurring in the clinical education setting: One individual representing the Athletic Training Staff and/or Preceptor

Within 2 days of the conference a final decision will be made and the student will be notified immediately. Students may file a compliant and appeal with the office of Student Affairs. More information can be found at: http://scholasticstanding.uconn.edu/appeal-process-timeline/.
Clinical Education
Policies and Procedures
Clinical Education

Students in the Professional Athletic Training Program must complete formal clinical education experiences during every semester. Progression within the program coincides with continued opportunities for skill implementation and critical thinking through supervision by a preceptor. Clinical education experiences are structured to reflect the development of advancing knowledge, skills, and responsibilities. All clinical education experiences must be educational in nature. Students will not receive any monetary remuneration during this education experience, excluding scholarships.

The program prepares students for success in a variety of athletic training opportunities and/or by providing clinical education experiences in public and private high schools, NCAA Division I, II, and III universities, hospitals, urgent cares, and rehabilitation clinics. This variety of clinical education experiences allows for a diverse exposure to clinical sites and patient populations with varying demographics and socioeconomic statuses.

Students complete 5 clinical education experience assignments, which occur as part of the Clinical Rotation courses (KINS 3110-3114). Clinical assignments are made carefully, seeking input from students (on Interview Day and subsequently every semester), and are anchored in the CAATE Standards regarding clinical diversity and patient populations. The Program Director and Clinical Education Coordinator, and other program faculty, assess the student’s needs, personality, and transportation barriers prior to making assignments to the preceptor. We attempt to match students and preceptors based upon instructional style, personality attributes, and experiences of the preceptor. Our decisions regarding placement are based upon our professional experiences, as well as feedback gained from our evaluations and site visits. The CEC ensures diversity in clinical education experiences occurs for each student by completing a table each semester, which allows us to track students’ experiences formally.

In addition to the 5 formal clinical education experiences, all students also complete a non-orthopedic medical experience in conjunction with KINS 3170 (Health and Medicine) as a means to provide students with non-orthopedic condition exposures. Students also complete a 1-credit experience at a rehabilitation clinic (KINS 3115) to engage in patient-care learning in an outpatient clinic setting. Both of these additional clinical education experiences provide opportunities for students to work with other health care professionals (e.g., physicians, physician extenders, physician assistants, physical therapists) and diverse patient populations (sport and non-sport populations; varying socioeconomic statuses; diverse demographics).

Communication with Assigned Clinical Education Preceptor

Students will be notified of their upcoming semester clinical education preceptor and site assignment in approximately early April and early November. With this assignment, students will be supplied contact information for the preceptor and the Emergency Action Plans for that clinical site. Students are required to initiate communication with the assigned clinical preceptor to introduce themselves and arrange an initial meeting prior to the clinical education experience by the end of the current semester.
Clinical Education Evaluation

The assigned preceptor evaluates student’s clinical education performance formally twice each semester using a standardized tool on ATrack (deadlines TBD). This evaluation assesses student’s overall knowledge, skill development, and foundational professional behaviors. Preceptors also provide feedback on the student’s clinical integration proficiencies (CIPs), which are associated with the clinical rotation course that the student is currently enrolled in. (see Appendix F. Clinical Experience Contract for more information)

Clinical Education Oversight

Students are assigned a Faculty Site Supervisor for each of their clinical education experiences. The Faculty Site Supervisor is the Program Director, Clinical Education Coordinator, or another member of the program’s faculty. The Site Supervisor’s role is to assist the Clinical Education Coordinator with oversight of the clinical education experience. At least two in-person site visits will occur each semester to promote communication between the program, preceptor and student, ensure the clinical site and preceptor are in compliance with program requirements, share program updates with the preceptor, and witness the student’s performance directly during the clinical education experience. The site supervisor will schedule these site visits directly with the preceptor.

Professional Liability Insurance

Students are required to carry professional liability coverage under the blanket University policy. The university covers this cost for current students involved in formal clinical education experiences. Individual student policies are available and strongly recommended if students choose to pursue other opportunities outside of the athletic training program.

Transportation

All students are required to have access to a car for at least one semester in the Professional Athletic Training Program. During the program interview, students will express which semester they will have access to a car. Students are required to notify the Clinical Education Coordinator if this access changes during their time in the program.

Record Management – ATrack

The Professional Athletic Training Program uses ATrack to assist with record management and communication. In order to access ATrack, students must be members of the National Athletic Trainers’ Association or pay an access fee. All preceptor, clinical site and student evaluations are completed and recorded in ATrack.

Each week, students are required to log their clinical education hours in ATrack. Preceptors are encouraged to review these hours and approve them on a regular basis. Travel time should not be included in the recorded hours.
Appropriate Professional Attire

Professionalism not only includes student conduct at the clinical site but also professional attire. As a health care professional, personal hygiene and professional appearance are important factors that reflect the level of respect you have for yourself, for the university, and for your clinical site.

The Athletic Training Program defers decisions on specific day-to-day professional attire to each individual clinical site and preceptor. Students are required to follow the policies and procedures of their clinical site. If the dress code is not clearly explained in introductory materials, the student should clarify the expectations with their Preceptor on the first day of their clinical rotation. Students have the responsibility to clarify any questions they may have about pertinent the dress code.

Examples of Professional Attire at the Clinical Site:

• All clothing should be clean, without stains or holes and should not be torn or excessively worn.
• Personal hygiene must be maintained with an acceptable standard of cleanliness
• Form fitting and/or revealing shirts will not be tolerated at any clinical site.
• Hair should be kept neat and out of the face, facial hair must be kept trimmed and well groomed.
• Students are expected to use discretion and to avoid being socially offensive or over-dramatic with hair-style, make-up, perfume, cologne, and jewelry.
• Jewelry, piercings, or any other non-traditional form of body wear or image (i.e. tattoos) may be deemed distracting by the clinical setting and therefore students may be asked to cover tattoos or remove piercings while in the clinical settings.
• Closed-toe shoes with socks should be worn; sandals, flip flops and bare feet should be avoided.
• Hats should not be worn inside the clinical site but may be acceptable at outdoor events.
• Students should endeavor to dress appropriate for the daily weather conditions in the event they are covering outdoor activities.

Criminal Background Checks:
Currently, several of our clinical education sites require these checks and will communicate with the student regarding the specific requirements. The costs of meeting these requirements are the responsibility of the student and range from approximately $30-100. Evidence of felony or criminal misdeed in a student’s criminal record may preclude placement in required clinical experiences and therefore completion of the Athletic Training degree requirements.

Health Policies Regarding Immunizations:
State of Connecticut General Statutes as well as University of Connecticut regulations require each full-time or matriculating* student born after December 31, 1956, to provide proof of adequate immunization or screening against measles, mumps, rubella, varicella, meningitis and
tuberculosis before permitting such student to enroll at the university. However, the standards for students in clinical training programs are more stringent and require additional levels of immunization verification above and beyond university standards (IE: titer tests to verify the presence of immunity against measles, mumps, rubella, varicella and hep B, yearly influenza shots and tuberculosis testing, and tetanus / diphtheria / pertussis updates), as clinical students are subject to directly interacting with patients that may carry diseases. In accordance with these requirements, UConn Student Health Services will collect immunization information, assess compliance, and enforce the regulations as a condition of attendance.

UCONN Student Health Services maintains a web portal through which you may view the immunization information they have on file for you. Go to myhealth.uconn.edu and log in with your NetID. (Note: the portal only works with IE9 or higher, Firefox, Chrome and Safari browsers. Earlier versions of Internet Explorer will not display the portal correctly)

**OSHA Bloodborne Pathogens (BBP) Training**

All students enrolled in KINS 2100 will receive initial classroom training in OSHA Bloodborne Pathogens at the beginning of the semester. Thereafter, students will be required to attend a classroom or complete on-line recertification through the Environmental Health & Safety website each of the remaining two years of their training. Students are required to provide evidence of their recertification before they can begin their clinical education experiences. If students attend the program’s in-person training, which is held during the first two weeks of every fall semester, their name will be recorded on the session roster as evidence of completion. Students that choose to renew using the online training must print proof of completion and hand in to the Program Director or Clinical Education Coordinator before September 5 of every fall semester.

**CPR / AED / First Aid Certification**

Current CPR for the Professional Rescuer with AED and First Aid certification are required by the beginning of the first semester and must be maintained throughout the time the student is in the Professional Athletic Training Program. Any student whose CPR/AED and/or First Aid certification expires before the end of a clinical practicum course will not be allowed to start that course.

**HIPAA / FERPA training**

All students will receive classroom training in HIPPA (Health Information Privacy & Protection Act) and FERPA (Family Educational Rights and Privacy Act) during KINS 1100 and the program orientation session in January. During clinical education experiences, students will have access to confidential personal and medical records. Students shall only access patient information as necessary for the purposes of direct patient care and/or when specifically directed to do so by their preceptor for the purposes of the clinical experience.
Patient Rights and Confidentiality of Information:

Any patient has the right to refuse treatment by a student for any reason.

During all practicum, students must identify themselves as an athletic training student to patients and other health care professionals. All documentation performed by the student must be authenticated by a certified athletic trainer and the student’s signature must be followed by the title: ATS. Students participating in clinical experiences will be exposed to/work with confidential patient information. They have a moral, ethical and legal responsibility to maintain the confidential nature of this information as defined by the Health Insurance Portability and Accountability Act (HIPAA) of 19967. Under HIPAA, patient information can be shared with only those persons who have legal access to the patient’s medical record. Therefore, students are NOT allowed to:

- discuss patient information in public places (e.g., the cafeteria, elevators, lobby, etc.)
- make photocopies of any patient records
- use patient information for any purpose other than patient management
- take pictures of patients without written permission from the patient and from the clinical site.
- review records of patients they are not treating

Any unauthorized review or release of confidential information by any student to unauthorized persons will be grounds for immediate course failure and potential dismissal from the program.

All clinical site regulations governing this must be followed.

Protection of Private Clinical Site Information:

Students must understand that they are not allowed to remove or disclose any business related information related to a clinical site without permission from that site. This information may relate, for example, to any financial aspect of the business, intervention protocols, or staff information.

Interpersonal problem resolution

If interpersonal conflict between the student and the preceptor occurs, it is the student’s responsibility to make the first attempts at resolution. This usually involves a private conversation between the parties involved. If the problem is not resolved through this conversation, both the student and the preceptor should contact the CEC or Site Supervisor as soon as possible. The CEC and/or Site Supervisor (in conjunction with the CEC) are responsible for clearly defining the problem and developing a plan for resolution. This may include counseling the student regarding appropriate interpersonal behaviors in the athletic training setting and working with the preceptor to improve the educational process. The CEC will keep notes of every conversation dealing with problems. Where interpersonal conflict at the clinical site cannot be resolved, the CEC may choose to withdraw the student.
Infectious/Communicable Disease Policy

The purpose of the Infectious/Communicable Disease Policy is to protect the health and safety of the Athletic Training Students, Preceptors, Athletic Training Program Faculty, and patients. The plan was developed to provide the Athletic Training Student, Preceptor, and Athletic Training faculty with a plan to assist in the management of students with infectious disease as outlined and defined by the Centers for Disease Control and Prevention (CDC). The CDC and UCONN Department of Environmental Health and Safety recommendations were used to develop this policy.

Defining Infectious/Communicable Disease

Communicable diseases (also known as transmissible OR communicable) are those diseases, which are spread due to the close association with student-athletes and other patient populations. There are 4 main types of transmission including direct physical contact, air (cough, sneeze, or inhaled particles), a vehicle (ingested/injected), and a vector (via animal/insect). Communicable diseases include: Diarrheal Diseases, Measles, Scabies Varicella, Conjunctivitis, Diphtheria, Herpes Simplex, Meningococcal infections, Streptococcal infections, Zoster, Enteroviral infections, Mumps, Rubella, Tuberculosis, Viral Respiratory Infections.

Bloodborne pathogens are capable of causing death or disease to an immune competent adult. The most significant bloodborne pathogens include: the Human Immunodeficiency Virus (HIV), Hepatitis B Virus, Hepatitis C Virus, and Hepatitis D Virus. Bloodborne pathogens can be transmitted through direct physical contact (person to person), indirect contact (object to person), mucous membrane, parenteral inoculation (needlestick, broken skin).

Guidelines for Prevention of Exposure and Infection

1. Athletic training students, preceptors and faculty must successfully complete annual bloodborne pathogens training.

2. Athletic training students, preceptors and faculty are required to use proper hand washing techniques and practice good hygiene at all times.

3. Athletic training students, prospective athletic training students, clinical preceptors and faculty are required to use standard precautions at all times. This applies to all clinical and affiliated clinical sites.

4. Athletic training students, preceptors and faculty are not to provide patient care if they have active signs or symptoms of an infectious disease.

5. All athletic training students are responsible for maintaining up-to-date vaccinations, including the Hepatitis B vaccination, prior to their clinical education experience, and any other vaccinations required by the university. The student must verify these records as part of the admissions process.
Guidelines for Managing a Possible Exposure to a Bloodborne Pathogen

1. An athletic training student who has been exposed to a potential bloodborne pathogen before, during or after a clinical experience should report that exposure to his/her preceptor immediately and to the Clinical Education Coordinator or Program Director.
2. Acute management of the wound, if applicable, should occur.
3. The athletic training student should receive follow-up care as soon as possible on the day of exposure at one of the following locations:
   a. UCONN Student Health Services (when classes are in session)
      i. MTRF 8 am-5 pm; W 10:30-5 pm
      ii. Advice nurse: M-F 7 pm-8am, weekends (860-486-4700)
   b. UCONN Health Storrs Urgent Care (860-487-9300)
      i. Mon-Fri 9 am – 9 pm
      ii. Weekends and holidays 9 am – 5 pm
   c. Local emergency department (Windham Hospital, 112 Mansfield Ave., Willimantic)
4. The athletic training student MUST report the incident to Student Health Services for documentation purposes as soon as it is open.

Guidelines for Managing Potential Infection

1. An athletic training student who has been exposed to a potential infection before, during or after a clinical experience should report that exposure to his/her preceptor immediately and to the Program Director or Clinical Education Coordinator.

2. Any athletic training student who demonstrates signs or symptoms of an infectious disease that may place him/her and/or his/her patients at risk should report that potential infectious disease to appropriate health care providers, as well as to his/her preceptor.

3. The student is responsible for keeping the Preceptor and Clinical Education Coordinator OR Program Director 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 (Student Health Services) to return to class and/or clinical site.

Clinical Site Requirements

1. Clinical Preceptor on-site has completed Initial Preceptor Training and has current BOC certification, state licensure, Professional Rescuer CPR/AED.
2. Written venue-specific Emergency Action Plans are posted and/or accessible.
3. Written and approved standing orders in compliance with the state Scope of Practice Act
4. System and proper storage for medical record documentation, which comply with all HIPAA Policy regulations.
5. Site complies with the Therapeutic Equipment Safety Policy
6. Established and maintained Universal Precautions, appropriate removal of
contaminated biohazard waste, and compliance with OSHA & Infectious Disease Policy

7. Availability of running water for proper hand washing and cleaning to aid in preventing the transmission of Communicable Disease

8. Signed clinical affiliation agreement and non-discrimination form

Therapeutic Equipment Safety Policy

All therapeutic equipment at University of Connecticut Professional Athletic Training Program clinical education sites must comply with safety standards based on manufacturer’s recommendation or federal, state, or local ordinance regarding equipment-specific calibrations and maintenance. Clinical education sites accredited by the Joint Commission, AAAHC or other recognized external accrediting agencies are exempt. Examples of therapeutic equipment include therapeutic ultrasound, transcutaneous electrical stimulation modalities, whirlpool, hydrocollator, low-level laser, and electrical cardiovascular equipment. Each clinical education site will provide record of the annual inspection report of all therapeutic equipment provided by an outside agency or school/organization personnel. All reports will be sent to the Clinical Education Coordinator by the end of the fall semester each academic year. Clinical education sites that are non-compliant with this policy will not be used during the subsequent University of Connecticut academic semester.

Direct Supervision Policy

The following policy was developed by the Professional Athletic Training Program to meet the Clinical Education requirements set forth by the Commission on Accreditation of Athletic Training Education regarding clinical supervision:

1. Athletic training students (ATS) must have consistent visual and auditory contact with their designated clinical preceptors. The preceptor must provide on-going communication regarding performance, athletic training skills, and day-to-day issues pertaining to the care of patients and education of the student.

2. The preceptor must be physically present and have the ability to intervene on behalf of the ATS and/or patient when necessary.

3. The ATS can only travel under the direct supervision of a preceptor.

4. The Site Supervisor, as assigned by the Clinical Education Coordinator, will conduct 2 in-person clinical site visits (approximately between weeks 3-4 and 8-9) during each of 14-week clinical rotation to discuss student progress, clinical education, and to address and resolve any issues.

5. The student to preceptor ratio will not exceed the following values for each clinical site:
   a. Large university setting (e.g., UCONN): 3:1
   b. High school setting: 2:1
   c. Clinic/rehabilitation clinic: 2:1
d. Small college setting (Trinity/ECSU): 2:1

**Travel Policy**

Athletic training students are encouraged to travel with teams associated with their clinical experience to away events as part of their clinical experience under the following conditions:

1. The athletic training student must be accompanied on the trip by their Preceptor
2. The athletic training student requests, and gains approval to travel from each instructor PRIOR to leaving. Athletic training students are not excused from classes to travel with teams without PRIOR approval from faculty/instructors.

Any questions regarding this policy should be directed to the Athletic Training Program Director prior to traveling. Athletic training students are never permitted to transport athletes in their private vehicles.
Appendices
## Professional Athletic Training Program

### Appendix A: Faculty & Staff Contact Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
<th>Email</th>
<th>Office Location</th>
<th>Office Phone</th>
</tr>
</thead>
<tbody>
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<td>Gampel</td>
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</tbody>
</table>
Professional Athletic Training Program

Appendix B: Admissions Policies

**Students wishing to enroll in the last Professional Bachelor’s cohort will apply to the program in the fall of 2017 with an expected graduation in May 2020. Please note: Students applying to the 2020 cohort will not have the ability to reapply in Fall 2018. The Professional Athletic Training Program is currently planning its transition to become a Master’s degree program, with the first Professional Master’s cohort beginning in May 2019. This change is mandated by the Commission on Accreditation of Athletic Training Education (CAATE).**

**Admission Requirements**
The athletic training major is a competitive and selective academic program that prepares students for a professional career in the field of Athletic Training. Acceptance into the Professional Athletic Training Program requires a secondary application process beyond that required for admission into the University of Connecticut. Applications are accepted once a year during the fall semester (Applications due November 1). Due to the competitive nature, students are encouraged to have all application materials completed and complied at least two weeks prior to the submission date. Most students apply during their sophomore year, however juniors are eligible to apply but will require a 5th year of study as an undergraduate student. Students intending on making an application during the Fall Semester must be a full-time Storrs campus student and enrolled in, or have previously completed, KINS 2100, 2110, 3100 and PNB 2264 Human Anatomy and Physiology I. The Dean, in consultation with program administrators, determines the maximum enrollment in each program. Prospective students are encouraged to contact Dr. Lindsay DiStefano, Program Director, at lindsay.distefano@uconn.edu for any additional information.

**Transfer students** must be accepted, and on the Storrs campus during the FALL semester they plan to apply to the program. This will require transfer students to apply separately to UConn and the College of Agriculture, Health and Natural Resources.

**Application Due November 1, 2017 by 4 pm:**
No LATE applications will be accepted. Items #1-2 should be delivered to Dr. DiStefano’s mailbox in Gampel 223. Items #3 & #4 can be included with Items #1-2 (cover sheet and personal statement) or mailed/ emailed separately (addresses provided below)

1. **Application Cover Sheet**
2. **Personal Statement**
   - Essay explaining why you have chosen a career in athletic training; indicate your goals and professional expectations.
   - This statement should be typed and professional.
   - Limit to 1-2 pages
3. **Official Transcript(s)** – Please submit official transcripts for ALL academic work completed at all post-secondary institutions
   - Transcripts can be mailed directly to:
Dr. Lindsay DiStefano, Program Director  
Department of Kinesiology U-1110  
2095 Hillside Road  
Storrs CT 06269-1110

- Hand-delivered transcripts should be in sealed and signed envelopes from each institution’s registrar

4. **Three (3) Letters of Recommendation**
   - Examples include: former coach, HS teacher, current UConn instructor *(not currently affiliated with UCONN Athletic Training Program)*
   - Letters should be addressed to:
     Dr. Lindsay DiStefano, Program Director  
     Department of Kinesiology U-1110  
     2095 Hillside Road  
     Storrs CT 06269-1110
   - *Letters can be hand-delivered, mailed or emailed directly from the recommender (lindsay.distefano@uconn.edu)*
   - Each hand-delivered letter should be in a sealed envelope

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**Admission Process**

1. **Submit Application by November 1 (components listed above)**
2. **In-Person Interview** *(will be scheduled during KINS 2100 for specific date in late November/early December)*
3. **Clinical Performance Rubric form**: Recommendation Form from Supervising AT *(student’s choice)* on-campus must be submitted to the Program Director PRIOR to the interview
4. **Transcript Review AFTER grades are posted for Fall 2017 Semester**
   - Applicant must receive a grade of “C” or higher in the following courses in order to be considered for admission to the program: KINS 3100, 2100, 2110, and 2264
5. **Admissions Committee Review**
   - The Admissions Committee will review only completed applications and support materials received by the deadlines

*Notification of acceptance into the Professional Athletic Training Program will be made via a phone call after grades have been posted (approximately December 17-19, 2017).*

Upon acceptance to the Professional Athletic Training Program, students will be required to provide verification of the following at the **MANDATORY ORIENTATION session on January 16 (time TBD):**

1. Proof of Professional Rescuer CPR/AED and First Aid certification
2. Completed Technical Standards form *(see Appendix D)*
3. Completed Clinical Health Review form *(see Appendix E)*
Professional Athletic Training Program

Appendix C: Program Guidelines
These guidelines summarize the requirements for a Bachelor of Science for students following the 2017-2018 requirements who are admitted for the spring semester of 2016. The aim of this academic concentration is to prepare students to become certified as athletic trainers by the NATA** and work with interscholastic, intercollegiate and professional sport teams, and sport medicine centers that specialize in sport injuries and rehabilitation.

A. General Education Requirements: The General Education Requirements listed in the Academic Regulations of the University of Connecticut Undergraduate Catalog 2012-2013 include:

- Content Area 1 – Arts and Humanities. Six credits.
- Content Area 2 – Social Sciences. Six credits.
- Content Area 3 – Science and Technology. Six to seven credits.
- Content Area 4 – Diversity and Multiculturalism. Six credits.

B. Kinesiology Requirements

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<td>KINS 3125</td>
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<td>Evaluation of the Extremities</td>
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<td>KINS 3177</td>
<td>Pathophysiology and Pharmacology for Athletic Trainers</td>
<td>3</td>
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<tr>
<td>KINS 3522</td>
<td>Biomechanics of Injury and Sport</td>
<td>3</td>
</tr>
<tr>
<td>KINS 3545</td>
<td>Resistance Training Exercise Techniques and Evaluation</td>
<td>3</td>
</tr>
<tr>
<td>KINS 4510</td>
<td>Mechanisms and Adaptations in Sport and Exercise</td>
<td>3</td>
</tr>
</tbody>
</table>

C. Related Requirements: BIOL 1107-Principles of Biology; CHEM 1122-Chemical Principles and Applications or CHEM 1127Q; COMM 1100-Principles of Public Speaking; NUSC 1165-Fundamentals of Nutrition; NUSC 4250-Nutrition for Exercise and Sport; PHYS 1010Q-Elements of Physics or PHYS 1201Q; PNB 2264, PNB 2265-Human Physiology & Anatomy; PSYC 1100; STAT 1000Q or STAT 1100Q.

Earn at least 120 credits with a minimum total grade point average of 2.2.

* 100 hours of observations/experience under the supervision of a certified athletic trainer will be completed in KINS 2100 and 2110.
**ATHLETIC TRAINING (ATHLTRN BS - ATBS)**

**SAMPLE SEMESTER SEQUENCE**

<table>
<thead>
<tr>
<th>SEMESTER 1 (15 credits)</th>
<th>SEMESTER 2 (18 credits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIOL 1107 (Also fulfills CA 3)</td>
<td>CHEM 1122 or CHEM 1127Q</td>
</tr>
<tr>
<td>ENGL 1010 or ENGL 1011/111</td>
<td>Content Area 1</td>
</tr>
<tr>
<td>PHYS 1010Q or PHYS 1201Q</td>
<td>Content Area 2</td>
</tr>
<tr>
<td>PSYC 1100 (Also fulfills CA 3)</td>
<td>KINS 1160 First Aid and CPR</td>
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<tr>
<td></td>
<td>NUSC 1165</td>
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<td></td>
<td>STAT 1000Q or STAT 1100Q</td>
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</table>

**SUMMER SESSION**

| Foreign Language* | 8 |

<table>
<thead>
<tr>
<th>SEMESTER 3 (15 credits)</th>
<th>SEMESTER 4 (16 credits)</th>
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<tbody>
<tr>
<td>Content Area 1</td>
<td>KINS 3101 Doc. Outcomes in Athletic. Training</td>
</tr>
<tr>
<td>Content Area 2/4</td>
<td>KINS 3110 Clinical Rotation I</td>
</tr>
<tr>
<td>KINS 2100 Introduction to Athletic Training I</td>
<td>KINS 3120 Funct. Anatomy for Athletic Trainers</td>
</tr>
<tr>
<td>KINS 2110 Introduction Athletic Training II</td>
<td>KINS 3122 Gross Anatomy Lab for Athletic Trainers</td>
</tr>
<tr>
<td>KINS 3100 Prevent. &amp; Care of Athletic Injuries</td>
<td>KINS 3125 Taping and Bracing Laboratory</td>
</tr>
<tr>
<td>PNB 2264 Human Physiology &amp; Anatomy**</td>
<td>KINS 3130 Orthopedic Assessment of Extremities</td>
</tr>
<tr>
<td></td>
<td>PNB 2265 Human Physiology &amp; Anatomy**</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SEMESTER 5 (16 credits)</th>
<th>SEMESTER 6 (16 credits)</th>
</tr>
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<tbody>
<tr>
<td>KINS 3102 Therapeutic Interventions I</td>
<td>Content Area 4</td>
</tr>
<tr>
<td>KINS 3111 Clinical Rotation II</td>
<td>KINS 3103 Therapeutic Interventions II</td>
</tr>
<tr>
<td>KINS 3115 Sports Medicine Experience</td>
<td>KINS 3104 Orthopedic Assessment of the Spine</td>
</tr>
<tr>
<td>KINS 3140 Emergency Proc. Athletic Training</td>
<td>KINS 3112 Clinical Rotation III</td>
</tr>
<tr>
<td>KINS 3522 Biomechanics of Injury and Sport</td>
<td>KINS 3115 Sports Medicine Experience</td>
</tr>
<tr>
<td>NUSC 4250 Nutrition for Exercise and Sport</td>
<td>KINS 3160 Counseling in Sport Medicine</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SEMESTER 7 (15 credits)</th>
<th>SEMESTER 8 (16 credits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINS 3113 Clinical Rotation IV</td>
<td>COMM 1100</td>
</tr>
<tr>
<td>KINS 3150 Practical Applic. of Assess./Treatment</td>
<td>KINS 3114 Clinical Rotation V</td>
</tr>
<tr>
<td>KINS 3155W Athletic Training Admin and Org.</td>
<td>KINS 3115 Sports Medicine Experience</td>
</tr>
<tr>
<td>KINS 3156 Professional Development</td>
<td>KINS 3165W Current Research</td>
</tr>
<tr>
<td>KINS 3177 Path. &amp; Pharm. for Athletic Trainers</td>
<td>KINS 4510 Mech. &amp; Adapt. Sport &amp; Exercise</td>
</tr>
</tbody>
</table>

**Required of all students not meeting the University requirements of three years of a single foreign language in high school.**

**It is suggested that students take anatomy & physiology I and II in the summer prior to the sophomore year. Taking the courses in the summer instead of the fall and spring in no way advantages a student in the admissions process, it simply provides students with the option to lighten their credit load during the school year.**

Lower division requirements have been selected to assist students with completing the general education requirements, including two W courses (one must be 2000-level or above and associated with the student’s major) and two Q courses (one Q course must be from Mathematics or Statistics). Courses in Content Areas 1-3 must be in different departments. Students must earn at least 120 credits with a minimum total grade point average of 2.2.

**BOC certification requires that students (a) receive a Bachelor of Science degree from an accredited athletic training program, and (b) take a national certification examination.**
Professional Athletic Training Program

Appendix D: Technical Standards
Technical Standards

The University of Connecticut Professional Athletic Training Program (ATP) is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The technical standards set forth by the Athletic Training Program establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program's accrediting agency (Commission on Accreditation of Athletic Training Education [CAATE]). The following abilities and expectations must be met by all students admitted into the UCONN ATP. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not be admitted into the program. On occasion, reasonable accommodations may be required by otherwise qualified individual candidates to meet the technical standards specified below. Requests for accommodations will be granted if the requests are reasonable, do not cause a fundamental alteration of the Athletic Training Program, do not cause an undue hardship on the University, are consistent with the standards of the Athletic Training Program, as facilitated by the University of Connecticut Center for Students with Disabilities. For more information regarding the University’s policy and procedures for accommodating students with disabilities contact the Center for Students with Disabilities, Wilbur Cross Building, Room 204, or via phone at 860-486-2020 or email csd@uconn.edu [website: http://csd.uconn.edu/].

Compliance with the program’s technical standards does not guarantee a student’s eligibility for the BOC certification exam.

Candidates for selection to the Athletic Training Program must demonstrate:

1. The mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm.

   **Criteria:** a) One year (2 semesters) of full-time college coursework with a minimum GPA 2.5, b) a C or better in KINS 2100/2110, KINS 3100, and PNB 2264.

2. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients. In any case where a candidate’s ability to complete and interpret physical examinations because of motor skills is compromised, the candidate must demonstrate alternative means and/or abilities to assess and treat patients.
Criteria: a) Completion of a standard physical and signature page by health care provider, b) ability to perform CPR and First Aid [Professional Rescuer] – documented with certification completion

3. The ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively. Students must be able to demonstrate proficiency in the English language such that they can communicate effectively in oral and written form with all members of the health care team.

Criteria: a) Satisfactory performance in the application interview (assessed by program faculty and staff), b) satisfactory performance in the application essay (assessed by program faculty), and satisfactory performance in the observation hours (assessed by ATP preceptors and supervisors of observation experience)

4. The ability to record the physical examination results and a treatment plan clearly and accurately.

Criteria: a) Satisfactory performance in the application essay, b) earning a C or better in KINS 2100/2110

5. The capacity to maintain composure and continue to function well during periods of high stress.

Criteria: a) Satisfactory performance in the observation hours as evaluated by ATP preceptors, b) satisfactory performance in application interview as assessed by program faculty and preceptors in attendance.

6. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.

Criteria: a) Satisfactory performance in the observation hours as evaluated by preceptors, b) satisfactory performance in application interview as assessed by program faculty and preceptors in attendance

7. Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

Criteria: a) Satisfactory performance in the observation hours as evaluated by preceptors, b) satisfactory performance in application interview as assessed by program faculty and preceptors in attendance, c) satisfactory letters of recommendation as evaluated by program faculty

**Note: The student must inform and provide documentation to the program director (Dr. DiStefano) of any changes in health status, which can impact the ability to meet the technical standards as described above. Failure to do so can result in disciplinary action. If a student
experiences a change in health status, which may affect the ability to meet the technical standards as described above, they may follow the registration and accommodation request process with the Center for Students with Disabilities to determine whether they can continue to meet the technical standards as listed above.
Professional Athletic Training Program

Appendix E: Clinical Health Review Form
## 2017 Clinical Rotation Health Review

### Part 1: To be completed by Student

<table>
<thead>
<tr>
<th>LAST NAME</th>
<th>FIRST NAME</th>
<th>MI</th>
<th>Date of Birth</th>
<th>PeopleSoft ID #</th>
<th>Email</th>
<th>Cell or Local Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Program

- Athletic Training
- Allied Health Sciences
- Nursing
- Physical Therapy
- Pharmacy
- Psychology
- Social Work
- Speech & Hearing

### CAMPUS

- Avery Point
- Hartford
- Stamford
- Storrs
- Waterbury

### Permanent Home Information:

<table>
<thead>
<tr>
<th>Home Phone</th>
<th>Notify in Case of Emergency:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Home Phone Cell/Work Phone</td>
</tr>
<tr>
<td></td>
<td>Street Address</td>
</tr>
<tr>
<td></td>
<td>City State Zip</td>
</tr>
</tbody>
</table>

### Any questions concerning your requirements and submission deadlines should be directed to your Program Contact listed here:

**Allied Health Sciences (including Dietetics, Medical Technology & Diagnostic Genetic Sciences)**

- **Bambi Mroz**
  - Business Services Supervisor
  - 358 Mansfield Rd, Unit 1101
  - Storrs, CT 06269-1101
  - Phone: 860-486-0013
  - Fax: 860-486-5375
  - bambi.mroz@uconn.edu

**Nursing**

- **Amelia Hinchliffe**
  - Office of Admission & Enrollment Services
  - 231 Glenbrook Road, Unit 4026
  - Storrs, CT 06269-4026
  - Phone: 860-486-4104
  - Fax: 860-486-7975
  - amelia.hinchliffe@uconn.edu

**Physical Therapy and Athletic Training**

- **Rachel C. Chassé-Terebo**
  - Immunization & Clinical Compliance Coordinator
  - 3107 Horsebarn Hill Road, Unit 1101
  - Storrs, CT 06269-1101
  - Phone: 860-486-1854
  - Cell: 860-748-2498
  - Fax: 860-486-1588
  - rachel.chasse@uconn.edu

**Pharmacy**

- **Mary Ann Phaneuf**
  - Assistant Director, Experiential Education
  - 69 North Eagleville Road Unit 3092
  - Storrs, CT 06268
  - Phone: 860-486-2999
  - Fax: 860-486-9095
  - maryann.phaneuf@uconn.edu

**Psychology**

- **Debbie Vardon**
  - Administrative Manager, Clinical Training Program
  - 406 Babbridge Road Unit 1020
  - Storrs, CT 06269-1020
  - Phone: 860-486-2057
  - Fax: 860-486-2760
  - debra.vardon@uconn.edu

**Social Work**

- **Cheryl Jackson-Morris, MSW**
  - Associate Director for Field Education
  - 38 Prospect Street
  - Hartford, CT 06103
  - Phone: 860-570-9161, ext. 3
  - Fax: 860-570-9311
  - cheryl.jackson-morris@uconn.edu

**Speech, Language, and Hearing Sciences**

- **Sirrah Galligan**
  - Academic Program Coordinator
  - 850 Bolton Road, Unit 1085
  - Storrs, CT 06269
  - Phone: 860-486-2817
  - Fax: 860-486-4948
  - slhs@uconn.edu
Clinical Rotation Health Review Form

Part 2: Immunizations and Lab work to be completed by Healthcare Provider

- Dates of both immunizations and titers must be provided for acceptance to clinical rotation.
- Titers are preferred over immunizations (check one)
- Evidence of disease is not an acceptable method of immunity
- Only students registered at the Storrs Campus are eligible for services at Student Health Services

In addition to the basic requirements listed on the UConn Student Health Services Mandatory Health History Form, the following lab work is needed depending on the student’s program and clinical site.

→ Titers for Measles, Mumps, Rubella, Varicella, Hepatitis B
A copy of the lab results must accompany this form.

<table>
<thead>
<tr>
<th>DISEASE</th>
<th>TITER DATE</th>
<th>TITER RESULTS (Immune = Positive)</th>
<th>VACCINATION 1 DATE</th>
<th>VACCINATION 2 DATE</th>
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</thead>
<tbody>
<tr>
<td>MEASLES</td>
<td>/ /</td>
<td>☐ IMMUNE ☐ NON-IMMUNE*</td>
<td>/ /</td>
<td>/ /</td>
</tr>
<tr>
<td>MUMPS</td>
<td>/ /</td>
<td>☐ IMMUNE ☐ NON-IMMUNE*</td>
<td>/ /</td>
<td>/ /</td>
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<tr>
<td>RUBELLA</td>
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<td>/ /</td>
<td>/ /</td>
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<tr>
<td>VARICELLA</td>
<td>/ /</td>
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<td>/ /</td>
<td>/ /</td>
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<td>/ /</td>
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<td>/ /</td>
<td>/ /</td>
</tr>
<tr>
<td>HEPATITIS B**</td>
<td>/ /</td>
<td>☐ IMMUNE ☐ NON-IMMUNE*</td>
<td>/ /</td>
<td>/ /</td>
</tr>
</tbody>
</table>

**A Hepatitis B Titer is required only if the Hepatitis B series has been completed within the past 2 years, unless checked above.

*NOTE: Negative immunity response to the disease states listed above may require boosters, immunization and/or blood tests. YOU are responsible for scheduling follow-ups to complete the series.

TETANUS BOOSTER (Must have been given within the past 10 years)
Tetanus, diphtheria & pertussis is the current preferred vaccination for all entering clinical sites

☐ Tdap ☐ Td DATE: / /

INFLUENZA VACCINATION (between October & March of every calendar year):

DATE: / / Brand Name:
Lot #: Exp. Date: / /

TUBERCULOSIS: Either IGRA/BAMT blood test or tuberculosis skin test (TST)/PPD (below)

☐ IGRA/BAMT Blood test, either Quantiferon ☐ T-Spot

IGRA/BAMT Date: / / Result: ☐ Negative ☐ Positive ☐ Indeterminate

TST/PPD DATE PLANTED: / / DATE READ: mm ___
RESULTS ☐ Negative ☐ Positive

If Positive, Chest x-ray is needed

X-RAY DATE: / / RESULTS:

If Positive, Chest x-ray is needed

If Positive, Chest x-ray is needed

Use this section to note immunization concerns (i.e. non converter, BCG vaccinated):

Provider must sign to attest to immunization information

SIGNATURE OF HEALTH CARE PRACTITIONER (MD / DO / APRN / PA) (Please circle one)

CLINICIAN SIGNATURE: ___________________________ DATE: ______/_____/_______ PHONE: (_______) _______-__________

CLINICIAN NAME (PLEASE PRINT) ___________________________ ADDRESS: ___________________________

CONTINUE TO PART 3 FOR THE MANDATORY PHYSICAL EXAM ►►►►
### Part 3: Physical Examination to be completed by Healthcare Provider

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>PeopleSoft ID #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**Vital Signs**

- **BP:**
- **Pulse:**
- **Height:**
- **Weight:**
- **Date of Birth**

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<thead>
<tr>
<th><strong>WNL</strong></th>
<th>Check Box for within normal limits</th>
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<tbody>
<tr>
<td></td>
<td>Head/ears/nose/throat</td>
</tr>
<tr>
<td></td>
<td>Mouth/teeth</td>
</tr>
<tr>
<td></td>
<td>Eyes/opthalmoscopic/color vision deficiency screening</td>
</tr>
<tr>
<td></td>
<td>Spine/neck</td>
</tr>
<tr>
<td></td>
<td>Nodes</td>
</tr>
<tr>
<td></td>
<td>Chest/lungs</td>
</tr>
<tr>
<td></td>
<td>Heart</td>
</tr>
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<td></td>
<td>Abdomen</td>
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<td>Breast/Testicles</td>
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<td>Extremities</td>
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<td>Skin</td>
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<tr>
<td></td>
<td>Neurologic</td>
</tr>
<tr>
<td></td>
<td>Psychological</td>
</tr>
</tbody>
</table>

**Impression**

**Additional information**

---

I have examined this person and find no medical condition that would prohibit him/her/from fully participating in their Clinical Rotation. **SIGNATURE OF HEALTH CARE PRACTITIONER** (MD / DO / APRN / PA) (Please circle one)

**CLINICIAN SIGNATURE:** __________________________________________
**DATE:** _____/_____/_________  **PHONE:** (______) _______-__________

**CLINICIAN NAME (PLEASE PRINT)** __________________________________
**ADDRESS:** ______________________________________________________
Professional Athletic Training Program

Appendix F: Clinical Experience Contract
University of Connecticut Professional Athletic Training Program
Clinical Experience Contract

The Professional Athletic Training Program degree requires all professional athletic training students to participate in clinical education experiences. These clinical education experiences are part of the students’ Clinical Rotation courses (KINS 3110-3114) every semester. Experiences are designed to offer the professional athletic training student a constructive learning environment in which they can practice and learn the skills necessary to become a Certified Athletic Trainer. Throughout the clinical education experiences, there are certain responsibilities that the Athletic Training Student, Preceptor, Program Director, and Clinical Education Coordinator must complete. These responsibilities are outlined below.

Athletic Training Student Responsibilities:
1. The Athletic Training Student is expected to be an engaged learner during their clinical education experiences. The student should be proactive with seeking opportunities to advance their knowledge of Athletic Training while engaging in real-time learning. These opportunities may include: active discussions about recent injuries/illnesses observed and latest updates in evidence-based practice, clinical skill practice and implementation, patient simulation scenarios, and other learning opportunities created by the student and/or preceptor.

2. The Athletic Training Student is responsible for working with the Preceptor to arrange clinical education hours that demonstrate a balance between his/her academic schedule and are consistent with the expectations of the Preceptor. The Athletic Training Student should communicate regularly with the Preceptor to develop a weekly schedule that meets the clinical education experience requirements. The Athletic Training Student is strongly encouraged to be active in pre-season and during winter and spring breaks, as applicable to their clinical experience, but this is not a requirement.

3. The Athletic Training Student must successfully complete the hour requirements of the clinical rotation courses (KINS 3110, 3111, 3112, 3113, 3114) in which they are enrolled while classes are in session. Many clinical experiences also provide the opportunity to obtain additional opportunities when clinical rotation courses are not in session (such as pre-season, post-season, etc.). We strongly encourage students to participate in these experiences, as they are invaluable to their professional development, while providing unique opportunities for clinical immersion and can assist in acclimatization with the clinical site before classes begin. Ultimately, students may exceed their hour requirements when classes are not in session; however, there is no requirement to do so. Hours completed when classes are not in session do NOT count toward the hour requirements described below, as they are voluntary and present an opportunity for a student to gain clinical immersion. Hours completed when classes are not in session can, but are not required to be, recorded in ATrack for documentation purposes of the clinical experience and to validate professional development experiences. If hours are recorded during this time, Preceptors will approve all hours when this out of class experience ends (i.e. at the end of preseason, end of post-season, etc.) The target ranges for clinical education hours and days per week are provided below for each clinical rotation course. These are suggested weekly guidelines to ensure students meet the minimum, but do not exceed the maximum limits for each semester.

Exceptions to the minimum and maximum limits for a semester may be made on a case-by-case basis through an in-person meeting between the Athletic Training Student and the Program
Director and/or the Clinical Education Coordinator. Students must request this meeting as soon as possible when it is realized the clinical experience may require modifications to the semester hourly minimum or maximum, but at least 7 days prior to the student exceeding the hour maximum for the semester. If the Program Director/Clinical Education Coordinator approves this request via ATrack, the student, Program Director/Clinical Education Coordinator, and the Preceptor will reach an agreement about the student’s future schedule.

Athletic Training Students missing greater than 20% of the minimum clinical education time, per semester (without prior approval) regardless of reason for absence, will receive an Incomplete “I” for the associated clinical rotation course. The Incomplete grade will be resolved when the minimum hours are completed. Students will be removed from the clinical education experience and their clinical rotation grade reduced by 10% if they exceed the maximum hour requirement by greater than 10% without prior approval from the Program Director/Clinical Education Coordinator.

<table>
<thead>
<tr>
<th>Clinical Rotation Course</th>
<th>Targeted Weekly Hour Range</th>
<th>Course Range (min-max)</th>
<th>On-Campus Days per week</th>
<th>Off-Campus Days per week</th>
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</thead>
<tbody>
<tr>
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<td>10-20</td>
<td>130-260</td>
<td>3-4</td>
<td>3-4</td>
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<tr>
<td>KINS 3111</td>
<td>10-20</td>
<td>130-260</td>
<td>4-5</td>
<td>3-4</td>
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<tr>
<td>KINS 3112</td>
<td>10-20</td>
<td>130-260</td>
<td>4-5</td>
<td>3-4</td>
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<tr>
<td>KINS 3113</td>
<td>15-25</td>
<td>195-325</td>
<td>5-6</td>
<td>4-5</td>
</tr>
<tr>
<td>KINS 3114</td>
<td>15-25</td>
<td>195-325</td>
<td>5-6</td>
<td>4-5</td>
</tr>
</tbody>
</table>

Table 1. Clinical Hour Target Ranges

4. The Athletic Training Student is required to have one day off every seven days under all circumstances during every clinical rotation. Violations of this policy are subject to the grade deductions as outlined in the Clinical Rotation course (KINS 3110-3114) syllabus for the associated experience. The athletic training student is encouraged to request their schedule of days off from their Preceptor ahead of time.

5. The Athletic Training Student’s timely attendance is required at all scheduled clinical education hours. If the student is unable to attend the scheduled clinical education hours, he/she is responsible for informing and making arrangements with their Preceptor at least 24 hours, in advance, or within 24 hours if an unexpected illness or circumstance arises. Failure to meet such requirements may result in program penalties described below (see Discipline policy).

6. The Athletic Training Student must adhere to all current rules, laws, and guidelines of the Professional Athletic Training Program and clinical site including, but not limited to, the standards of the institution and the Code of Ethics established by the NATA. Failure to meet these standards will result in discipline action, as outlined below and in the Athletic Training Discipline policy. No action will be taken until dialog between the Preceptor, Athletic Training Student, and the Program Director and/or the Clinical Education Coordinator has occurred. The Program Director and the Clinical Education Coordinator will determine the penalties as related to the infraction. Please note that any offense may be deemed as any level of penalty depending on the nature and severity of the infraction, as determined by the Program Director and/or the
Clinical Education Coordinator.

**1st Level Penalty:**
- a) Meeting with the Program Director and/or the Clinical Education Coordinator (Dr. DiStefano and/or Dr. Lepley) to discuss infraction
- b) Verbal Warning to student
- c) Notation will be made in student’s file

**2nd Level Penalty:**
- a) Meeting with the Program Director and/or the Clinical Education Coordinator (Dr. DiStefano and/or Dr. Lepley) to discuss the infraction
- b) A single grade reduction for the corresponding clinical rotation course
- c) A one-week suspension from the clinical experience assignment (hours to be made up before a final grade is registered)
- d) Official notation made in the student’s file

**3rd Level Penalty:**
- a) Meeting with the Program Director and the Clinical Education Coordinator (Dr. DiStefano and/or Dr. Lepley) to discuss the infraction
- b) Removal from the clinical site and failure of the corresponding clinical experience (needs to be made up before completing program)
- c) One semester suspension from Professional Athletic Training Program
- d) Official notation made in student’s file

**4th Level Penalty:**
- a) Meeting with the Program Director and the Clinical Education Coordinator (Dr. DiStefano and Dr. Lepley) to discuss the penalty
- b) Permanent dismissal from the Professional Athletic Training Program
- c) Official notation made in student’s file

7. The Athletic Training Student will document and submit a record of clinical experience hours and activities every week on ATrack before leaving their clinical site every Friday.

8. The Athletic Training Student will complete an evaluation of their Preceptor on ATrack twice during every semester (mid-point and end)(see ATrack and Clinical Rotation course syllabi for due dates each semester). Grade deductions may be imposed for late submissions of required evaluations.

9. The Athletic Training Student is encouraged to keep an open line of communication with their clinical site supervisor, the Program Director and/or the Clinical Education Coordinator regarding the strengths and weaknesses of their clinical experience.

**Preceptor Responsibilities:**
1. The Preceptor is responsible for advancing the knowledge of the Athletic Training Student. The preceptor must provide a positive learning environment in which the student can expand their aptitude of the Athletic Training profession. This environment should not be threatening or intimidating in any way, but should challenge the student regularly.

2. The Preceptor must have knowledge of the hour requirements of the academic program (described in Table 1 above), which are developed to meet the standards regarding clinical
education experiences by the CAATE (Standard 57), and ensure the student’s schedule adheres to these requirements.

3. The Preceptor will review all hours submitted by the Student on a weekly basis and approve the hours if they are accurate. The Preceptor will notify the Professional Athletic Training Program (either the Site Supervisor, Program Director, or Clinical Education Coordinator) if there are any concerns or discrepancies with the student’s submitted hours.

4. The Preceptor understands that all students must have at least one day off every 7 days.

5. The Preceptor will have consistent contact and informal educational sessions with the Athletic Training Student. During that contact, the Preceptor is expected to discuss conditions, issues, injuries, and/or illnesses that may affect the patients and environment of that clinical site. The Preceptor will ensure that there is immediate and on-going feedback as well as communication with the Athletic Training Student.

6. The Preceptor will provide direct supervision (see Direct Supervision Policy) of the Athletic Training Student at all times. The Preceptor understands that the student is completing an educational requirement and is not a substitute/additional employee.

7. The Preceptor will ensure that the Athletic Training Student has appropriate access to therapeutic equipment, protection against infectious diseases, and clinical site facilities during his/her clinical experience.

8. The Preceptor will evaluate the student’s performance at least twice every semester using the evaluation on ATrack (see ATrack for specific deadlines each semester) and discuss this evaluation with the student. The Preceptor will also assess the student at the end of each semester during the clinical experience based on the assigned Clinical Integration Proficiencies (CIP). The specific CIP(s) will be listed on ATrack for the preceptor to complete and will be associated with the final evaluation completed by the preceptor of the student for the semester.

9. Preceptors are encouraged and invited to attend the annual preceptor workshop every year. The Preceptor must attend a preceptor workshop every other year at minimum in order to supervise Athletic Training Students during clinical experiences. Workshops are held annually in December by the Athletic Training program.

10. The Preceptor agrees to practice evidence-based medicine to the best of their knowledge and experience. The Preceptor is willing to engage in professional discourse with the student regarding any knowledge or experiences related to the latest evidence the student inquires about during the clinical experience.

11. The Preceptor will review clinical site policies related to Blood Borne Pathogens with each student at the beginning of the clinical experience, with emphasis on the specific policies and procedures for that clinical education site. The Preceptor will ensure students know, and have access to, appropriate sanitation, prevention, and management procedures related to Blood Borne Pathogens and other infectious diseases.

12. The Preceptor will maintain venue-specific written Emergency Action Plans that are accessible during an emergency for their clinical site and review these at the beginning of each clinical experience with the student, and again as necessary.

Professional Athletic Training Program Responsibilities:
1. The Professional Athletic Training Program at the University of Connecticut will contact each
clinical education site where an Athletic Training Student is placed at least 3 times during the semester long clinical experience (with at least 2 on-site visits) to discuss progress, concerns, and/or questions. This contact is not meant to interfere with the Preceptor/Athletic Training Student relationship. It will take place solely to maintain a strong connection between the clinical and education components of the curriculum.

2. The Professional Athletic Training Program at the University of Connecticut is responsible for informing clinical affiliation sites of any change of policy, schedules, and/or curriculum, which may affect the student or preceptor responsibilities.

3. The Professional Athletic Training Program at the University of Connecticut will evaluate each clinical site on a yearly basis for the minimum standards set by the Commission on Accreditation of Athletic Training Education. Sites that do not meet these minimum standards (see Minimum Standards for Clinical Education Sites policy) will have one semester to correct the deficiencies in order to maintain the site as an approved clinical rotation location.

4. The Professional Athletic Training Program at the University of Connecticut will offer a continuing education and preceptor training workshop once a year.

5. The Professional Athletic Training Program will serve to the best of their abilities to be an advocate of the Athletic Training Student in his/her quest to optimize his/her educational experience.

6. The Professional Athletic Training Program will serve to the best of their abilities to be an advocate of the Preceptor in his/her quest to optimize the level of service they provide for the patients they serve and the quality of the environment in which they undertake this mission.
Professional Athletic Training Program

Appendix G: NATA Code of Ethics
Preamble

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

1. MEMBERS SHALL PRACTICE WITH COMPASSION, RESPECTING THE RIGHTS, WELFARE, AND DIGNITY OF OTHERS

1.1 Members shall render quality patient care regardless of the patient’s race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity.

1.2. Member’s duty to the patient is the first concern, and therefore members are obligated to place the welfare and long-term well-being of their patient above other groups and their own self-interest, to provide competent care in all decisions, and advocate for the best medical interest and safety of their patient at all times as delineated by professional statements and best practices.

1.3. Members shall preserve the confidentiality of privileged information and shall not release or otherwise publish in any form, including social media, such information to a third party not involved in the patient’s care without a release unless required by law.

2. MEMBERS SHALL COMPLY WITH THE LAWS AND REGULATIONS GOVERNING THE PRACTICE OF ATHLETIC TRAINING, NATIONAL ATHLETIC TRAINERS’ ASSOCIATION (NATA) MEMBERSHIP STANDARDS, AND THE NATA CODE OF ETHICS

2.1. Members shall comply with applicable local, state, federal laws, and any state athletic training practice acts.

2.2. Members shall understand and uphold all NATA Standards and the Code of Ethics.

2.3. Members shall refrain from, and report illegal or unethical practices related to athletic training.

2.4. Members shall cooperate in ethics investigations by the NATA, state professional licensing/regulatory boards, or other professional agencies governing the athletic training profession. Failure to fully cooperate in an ethics investigation is an ethical violation.
2.5. Members must not file, or encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.

2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.

3. MEMBERS SHALL MAINTAIN AND PROMOTE HIGH STANDARDS IN THEIR PROVISION OF SERVICES

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

3.2. Members shall provide only those services for which they are qualified through education or experience and which are allowed by the applicable state athletic training practice acts and other applicable regulations for athletic trainers.

3.3. Members shall provide services, make referrals, and seek compensation only for those services that are necessary and are in the best interest of the patient as delineated by professional statements and best practices.

3.4. Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge and shall complete such educational requirements necessary to continue to qualify as athletic trainers under the applicable state athletic training practice acts.

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

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

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.

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

4.2. All NATA members, whether current or past, shall not use the NATA logo in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.

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

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

4.5. Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.
Professional Athletic Training Program

Appendix H: BOC Standards of Professional Practice
INTRODUCTION
The BOC Standards of Professional Practice is reviewed by the Board of Certification, Inc. (BOC) Standards Committee and recommendations are provided to the BOC Board of Directors. The BOC Standards Committee is comprised of five Athletic Trainer members and one Public member. The BOC Board of Directors approves the final document. The BOC Board of Directors includes six Athletic Trainer Directors, one Physician Director, one Public Director and one Corporate/Educational Director.

The BOC certifies Athletic Trainers (ATs) and provides exceptional credentialing programs that support the protection of the public. An AT is a healthcare professional who renders service or treatment, under the direction of or in collaboration with a physician, in accordance with their education and training and the states’ statutes, rules and regulations. As a part of the healthcare team, services provided by ATs comprise, but are not limited to, prevention and education, emergent care, clinical diagnosis, therapeutic intervention and rehabilitation of injuries and medical conditions.

The BOC is the only accredited certification program for ATs in the United States. Every five years, the BOC must undergo review and re-accreditation by the National Commission for Certifying Agencies (NCCA). The NCCA is the accreditation body of the Institute of Credentialing Excellence.

The BOC Standards of Professional Practice consists of two sections:
I. Practice Standards
II. Code of Professional Responsibility
I. PRACTICE STANDARDS

Preamble
The primary purpose of the Practice Standards is to establish essential duties and obligations imposed by virtue of holding the ATC® credential. Compliance with the Practice Standards is mandatory.

The BOC does not express an opinion on the competence or warrant job performance of credential holders; however, every Athletic Trainer and applicant must agree to comply with the Practice Standards at all times.

Standard 1: Direction
The Athletic Trainer renders service or treatment under the direction of, or in collaboration with a physician, in accordance with their training and the state's statutes, rules and regulations.

Standard 2: Prevention
The Athletic Trainer implements measures to prevent and/or mitigate injury, illness and long term disability.

Standard 3: Immediate Care
The Athletic Trainer provides care procedures used in acute and/or emergency situations, independent of setting.

Standard 4: Examination, Assessment and Diagnosis
The Athletic Trainer utilizes patient history and appropriate physical examination procedures to determine the patient's impairments, diagnosis, level of function and disposition.

Standard 5: Therapeutic Intervention
The Athletic Trainer determines appropriate treatment, rehabilitation and/or reconditioning strategies. Intervention program objectives include long and short-term goals and an appraisal of those which the patient can realistically be expected to achieve from the program. Appropriate patient-centered outcomes assessments are utilized to document efficacy of interventions.

Standard 6: Program Discontinuation
The Athletic Trainer may recommend discontinuation of the intervention program at such time the patient has received optimal benefit of the program. A final assessment of the patients' status is included in the discharge note.

Standard 7: Organization and Administration
The Athletic Trainer documents all procedures and services in accordance with local, state and federal laws, rules and guidelines.

II. CODE OF PROFESSIONAL RESPONSIBILITY

Preamble
The Code of Professional Responsibility (Code) mandates that BOC credential holders and applicants act in a professionally responsible manner in all athletic training services and activities. The BOC requires all Athletic Trainers and applicants to comply with the Code. The BOC may discipline, revoke or take other action with regard to the application or certification of an individual that does not adhere to the Code. The Professional Practice and Discipline Guidelines and Procedures may be accessed via the BOC website, www.bocatc.org.

Code 1: Patient Care Responsibilities
The Athletic Trainer or applicant:

1.1 Renders quality patient care regardless of the patient's age, gender, race, religion, disability, sexual orientation, or any other characteristic protected by law

1.2 Protects the patient from undue harm and acts always in the patient's best interests and is an advocate for the patient's welfare, including taking appropriate action to protect patients from healthcare providers or athletic training students who are impaired or engaged in illegal or unethical practice

1.3 Demonstrates sound clinical judgment that is based upon current knowledge, evidence-based guidelines, and the thoughtful and safe application of resources, treatments and therapies

1.4 Communicates effectively and truthfully with patients and other persons involved in the patient's program, while maintaining privacy and confidentiality of patient information in accordance with applicable law

1.4.1 Demonstrates respect for cultural diversity and understanding of the impact of cultural and religious values

1.5 Develops and maintains a relationship of trust and confidence with the patient and/or the parent/guardian of a minor patient and does not exploit the relationship for personal or financial gain

1.6 Does not engage in intimate or sexual activity with a patient and/or the parent/guardian of a minor patient

1.7 Informs the patient and/or the parent/guardian of a minor patient of any risks involved in the treatment plan

1.7.1 Does not make unsupported claims about the safety or efficacy of treatment
**Code 2: Competency**
The Athletic Trainer or applicant:

2.1 Engages in lifelong, professional and continuing educational activities to promote continued competence

2.2 Complies with the most current BOC recertification policies and requirements

**Code 3: Professional Responsibility**
The Athletic Trainer or applicant:

3.1 Practices in accordance with the most current BOC Practice Standards

3.2 Practices in accordance with applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training

3.3 Practices in collaboration and cooperation with others involved in a patient's care when warranted; respecting the expertise and medico-legal responsibility of all parties

3.4 Provides athletic training services only when there is a reasonable expectation that an individual will benefit from such services

3.5 Does not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, identity, or services or the skills, training, credentials, identity, or services of athletic training

3.5.1 Provides only those services for which they are prepared and permitted to perform by applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training

3.6 Does not guarantee the results of any athletic training service

3.7 Complies with all BOC exam eligibility requirements and ensures that any information provided to the BOC in connection with any certification application is accurate and truthful

3.8 Does not possess, use, copy, access, distribute or discuss certification exams, score reports, answer sheets, certificates, certificant or applicant files, documents or other materials without proper authorization

3.9 Takes no action that leads, or may lead, to the conviction, plea of guilty or plea of nolo contendere (no contest) to any felony or to a misdemeanor related to public health, patient care, athletics or education; this includes, but is not limited to: rape; sexual abuse or misconduct; actual or threatened use of violence; the prohibited sale or distribution of controlled substances, or the possession with intent to distribute controlled substances; or improper influence of the outcome or score of an athletic contest or event

3.10 Reports any suspected or known violation of applicable local, state and/or federal rules, requirements, regulations and/or laws by him/herself and/or by another Athletic Trainer that is related to the practice of athletic training

3.11 Reports any criminal convictions (with the exception of misdemeanor traffic offenses or traffic ordinance violations that do not involve the use of alcohol or drugs) and/or professional suspension, discipline, or sanction received by him/herself or by another Athletic Trainer that is related to athletic training

3.12 Cooperates with BOC investigations into alleged illegal or unethical activities. Cooperation includes, but is not limited to, providing candid, honest, and timely responses to requests for information

3.13 Complies with all confidentiality and disclosure requirements of the BOC and existing law

3.14 Does not endorse or advertise products or services with the use of, or by reference to, the BOC name without proper authorization

**Code 4: Research**
The Athletic Trainer or applicant who engages in research:

4.1 Conducts research according to accepted ethical research and reporting standards established by public law, institutional procedures and/or the health professions

4.2 Protects the human rights and well-being of research participants

4.3 Conducts research activities intended to improve knowledge, practice, education, outcomes, and/or public policy relative to the organization and administration of health systems and/or healthcare delivery

**Code 5: Social Responsibility**
The Athletic Trainer or applicant:

5.1 Strives to serve the profession and the community in a manner that benefits society at large

5.2 Advocates for appropriate health care to address societal health needs and goals

**Code 6: Business Practices**
The Athletic Trainer or applicant:

6.1 Does not participate in deceptive or fraudulent business practices

6.2 Maintains adequate and customary professional liability insurance

6.3 Acknowledges and mitigates conflicts of interest