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<td>30 - 32</td>
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The UMaine Athletic Training Program is accredited by the Commission on Accreditation of Athletic Training Education for the period 2010 - 2020. Undergraduate students who successfully complete this program graduate with a Bachelor of Science in Athletic Training. These students are eligible to apply to take the Board of Certification (BOC, Inc.) Athletic Training certification exam.

Competencies and Proficiencies Matrix
UMaine's Athletic Training curriculum is based on the 2011 Athletic Training Educational Competencies 5th edition created by the National Athletic Trainers' Association Professional Education Council (PEC). A Competency and Proficiency Matrix is available for anyone interested in viewing them. Contact the Athletic Training Program Director if you are interested.

Competitive Admissions
Admission into the Athletic Training Education Program is competitive. All incoming students (new and transfers) apply for formal acceptance after successfully completing coursework and skills in two courses: Introduction to Athletic Training and Prevention and Care of Athletic Injuries. The Athletic Training Student is notified by the Program Director that he/she is eligible to apply and how to proceed with the application. The application guidelines are found on the Athletic Training web site.

Classrooms, Labs, and Clinical Experiences
UMaine's Athletic Training Program is comprised of two parts: class room learning and practical hands-on application. The Wes Jordan Athletic Training Education Complex allows students to learn concepts and theories in the classroom and immediately put them to practice in a lab setting. This progression prepares the Athletic Training Student to perform learned skills with patients under the direct supervision of trained preceptors. Clinical experiences are actual athletic training and allied health care experiences supervised by trained preceptors. The strength of UMaine's program lies in the diversity of preceptors and Clinical Experience settings including but not limited to Division 1 and Division 3 athletics, high school athletics, hospital and private practice clinics, physical therapy clinics, orthopedic rotations, and chiropractic clinics.
Mission Statement

The University of Maine Athletic Training Program prepares students to become athletic trainers by following a curriculum in line with National Athletic Trainers' Association Athletic Training Education Competencies, the Board of Certifications most current Role Delineation information, and the Commission for Accreditation of Athletic Training Education Standards. Students learn through clinical experiences in the community with a variety of healthcare providers and their patients enabling the student a diversity of experiences.

Goals and Objectives Student

Goal
The student will experience didactic and clinical instructional methods of teaching to attain and maintain mastery of competencies and proficiencies necessary for one to function as an entry-level athletic trainer.

Objective 1
The student will demonstrate knowledge of the five domains of athletic training as provided by the Board of Certification Role Delineation Study, 7th Edition in the classroom and in clinical settings.

- Written and practical testing
- Tracking sheet progression (B- or better in ATR courses)
- Timely supervisor reviews of the student's abilities
- Mini BOC mock exams

Objective 2
The student will demonstrate mastery of competencies and proficiencies as outlined by the NATA Education Committee's Athletic Training Educational Competencies 5th Edition (2011).

- Competencies and proficiencies matrix
- Clinical experience progression
- Written and practical testing
- Scenario applications
- Reflective writing practices
- Timely supervisor reviews of the student's abilities
- Use of Mock BOC exam
Mission Statement

Objective 3
The student will be placed in various healthcare settings in order to learn the medical needs of diverse populations as well as the roles of other health/medical professions.

- AT Student Bio list of clinical experiences in sequence of attendance

Program Goal 1
To communicate in a consistent and timely manner with each person involved in the athletic training program (student, faculty, preceptors)

Objectives
The program director and clinical education coordinator is responsible for the following:

- Making campus and community outlets available to all ATP participants (i.e. Blackboard, Writing Center, etc.)
- Coordinating Mid and end of semester athletic training student evaluations
- Coordinating Mid semester course grading update and discussing results with appropriate participants
- Coordinating clinical site and preceptor evaluations
- Organizing bi-semester student meeting with AT advisor to discuss course progression and clinical experiences.
- Providing timely and effective preceptor workshops
- Contacting preceptors weekly

Program Goal 2
Consistently upgrade athletic training program as standards evolve and as necessary.

Objectives

- Collect and Review Graduating Senior Exit Interviews
- Systemic Course and Curriculum reviews
- Instructor peer review through the College of Education and Human Development
- Attend seminars and conferences for new ideas and up-to-date information
- Maintain and improve equipment and facilities
- Alumni questionnaires
- Employer questionnaires
Mission Statement

Program Goal 3
To educate and recruit appropriate students to the athletic training program.

Objectives
This will be achieved through the help of the University of Maine Admissions personnel, the Associate Dean, COEHD staff, preceptors, program director, and clinical education coordinator.

- Attend high school and college career functions
- Internet web page
- Fact Sheet for Admissions personnel
- Admissions personnel workshops
- Meet with potential students and parents
- Student acceptance through University of Maine admissions
### 4 Year Academic Schedule 1st Year & Transfer Students
#### Athletic Training

**Effective Fall 2017**

<table>
<thead>
<tr>
<th>1st Semester 1st Year</th>
<th>2nd Semester 1st Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>EHD 100 New Student Seminar in Education &amp; Human Development (Seminar) 1cr</td>
<td><strong>BIO 208 Anatomy and Physiology 4 cr</strong></td>
</tr>
<tr>
<td>*BIO 100 Basic Biology 4 cr</td>
<td>*Math (MAT 122 or higher) 4 cr</td>
</tr>
<tr>
<td>*ENG 101 English Comp 3 cr</td>
<td>*Gen Ed 3 cr</td>
</tr>
<tr>
<td>KPE 100 Intro to AT 1 cr</td>
<td>KPE 250 Prevention &amp; Care of Injuries 3 cr</td>
</tr>
<tr>
<td>*Gen Ed (PSY 100) 3 cr</td>
<td>KPE 253 Lifetime Fitness for Health 3 cr</td>
</tr>
<tr>
<td>*Gen Ed 3 cr</td>
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<td><strong>Total 15 cr</strong></td>
<td><strong>Total 17 cr</strong></td>
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<tr>
<td>PHY 111 Gen Physics 4 cr</td>
<td>*Gen Ed 3 cr</td>
</tr>
<tr>
<td>FSN 101 Intro to Food &amp; Nutrition 3 cr</td>
<td>KPE 202 AT Clinical Skills 2 3 cr</td>
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<tr>
<td>KPE 201 AT Clinical Skills 1 3 cr</td>
<td>KPE 276 MMT and Goniometry 3 cr</td>
</tr>
<tr>
<td>KPE 270 Motor Development 3 cr</td>
<td>KPE 386 Eval of LE Injur &amp; Conditions 3 cr</td>
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<td>KPE 273 Anat &amp; Pathologies of Inj. 3 cr</td>
<td>KPE 388 Therapeutic Modalities 4 cr</td>
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<td><strong>Total 16 cr</strong></td>
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#### Summer Course
KPE 262 Methods of Teaching Physical Activity 3 cr

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<tr>
<th>1st Semester 3rd Year</th>
<th>2nd Semester 3rd Year</th>
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<tr>
<td>CHY 121/123 or BMB 207/209 Chemistry 4 cr</td>
<td>KPE 300 Professionalism in AT 1 cr</td>
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<tr>
<td>KPE 301 AT Clinical Skills 3 3 cr</td>
<td>KPE 302 AT Clinical Skills 4 3 cr</td>
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<tr>
<td>KPE 385 Eval of UE Injur &amp; Conditions 3 cr</td>
<td>KPE 303 Pharmacology in AT 1 cr</td>
</tr>
<tr>
<td>KPE 387 Ther Ex of Muscl Injuries 4 cr</td>
<td>KPE 376 Kinesiology 3 cr</td>
</tr>
<tr>
<td>KPE 400 Gen Med Inj &amp; Conditions 3 cr</td>
<td>KPE 378 Physiology of Exercise 3 cr</td>
</tr>
<tr>
<td><strong>Total 17 cr</strong></td>
<td>KPE 383 Org &amp; Admin in AT 3 cr</td>
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<table>
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<tr>
<th>1st Semester 4th Year</th>
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<tbody>
<tr>
<td>Eng 317 Bus &amp; Tech Writing 3 cr</td>
<td>*Gen Ed 3 cr</td>
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<tr>
<td>* Gen Ed 3 cr</td>
<td>KPE 367 Adapted PE 3 cr</td>
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<tr>
<td>KPE 401 AT Senior Seminar 3 cr</td>
<td>KPE 427 Capstone – AT 3 cr</td>
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<tr>
<td>*Math Gen Ed 3 cr</td>
<td>KPE 490 Nutrition for Sports 3 cr</td>
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<td>KPE 426 Exercise Rx &amp; Leadership 3 cr</td>
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*Updated Fall 2017*
# Athletic Training Major - 125 Credit Hours

*Transfer and New Students*

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<tr>
<th>General Education</th>
<th>Course Title</th>
<th>Course</th>
<th>Offered</th>
<th>Semester</th>
<th>Grade</th>
<th>Recommended Courses/Prerequisite</th>
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<tr>
<td></td>
<td>◆Basic Biology (4cr)</td>
<td>BIO 100</td>
<td>Fall/Spring</td>
<td>Fall</td>
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<td>◆ BIO 100, or BMB 280 and PHY 122 and CHY 122 and CHY 124.</td>
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<td>Anat &amp; Physiology (4cr)</td>
<td>BIO 208</td>
<td>Spring</td>
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<td>Gen. Chemistry-CHY 121/123 (4cr) Or Fund. of Chem.-BMB 207/209 (4cr)</td>
<td></td>
<td>Fall</td>
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<td></td>
<td>Gen. Physics (4cr)</td>
<td>PHY 111</td>
<td>Fall</td>
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<tr>
<td></td>
<td><strong>B. Mathematics (6cr)</strong></td>
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<tr>
<td></td>
<td>Math (3cr)</td>
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<tr>
<td></td>
<td>Math 122 or higher (4cr)</td>
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<td></td>
<td><strong>C. Human Values and Social Context (18cr)</strong></td>
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<td></td>
<td>Western Cultural Tradition (3cr)</td>
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<tr>
<td></td>
<td>Social Context &amp; Institutions (3cr)</td>
<td>PSY 100</td>
<td>Fall/Spring</td>
<td>Fall</td>
<td></td>
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<tr>
<td></td>
<td>Cultural Diversity (3cr)</td>
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<td>Population &amp; Environment (3cr)</td>
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<td>Artistic/Creative Expression (3cr)</td>
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<td></td>
<td>Electives (3cr)</td>
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<td></td>
<td><strong>D. Demonstrated Writing Competency (6cr)</strong></td>
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<td></td>
<td>◆College Composition (3cr)</td>
<td>ENG 101</td>
<td>Fall/Spring</td>
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<td>Junior Standing</td>
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<td>Writing Intensive Course (3cr) - Outside KPE</td>
<td>ENG 317</td>
<td>Fall/Spring</td>
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<td></td>
<td>◆Organization &amp; Admin of AT (3cr)</td>
<td>KPE 383</td>
<td>Spring</td>
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<td><strong>E. Capstone Experience (3-6cr)</strong></td>
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<td>Internship (3-6cr)</td>
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<td>Alternative (3-6cr)</td>
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◆Min. grade C or >
◆Min. grade C- or >
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<tr>
<th>Course Title</th>
<th>Course</th>
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<th>Semester</th>
<th>Grade</th>
<th>Recommended Courses/Prerequisite</th>
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<tr>
<td>New Student Seminar in Education and Human Development (Seminar) (1cr)</td>
<td>EHD 100</td>
<td>Fall/Spring</td>
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<tr>
<td>Intro to Athletic Training (1cr)</td>
<td>KPE 100</td>
<td>Fall/Spring</td>
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<tr>
<td>*Prevention &amp; Care of Injuries (3cr)</td>
<td>KPE 250</td>
<td>Fall/Spring</td>
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<td>Lifetime Fitness for Health (3cr)</td>
<td>KPE 253</td>
<td>Fall/Spring</td>
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<td>Methods of Teaching Phy Act (3cr)</td>
<td>KPE 262</td>
<td>Fall/Spring</td>
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<tr>
<td>Motor Development (3cr)</td>
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<td>Fall/Spring</td>
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<td>*Anatomy &amp; Path Athl Injur. (3cr)</td>
<td>KPE 273</td>
<td>Fall/Spring</td>
<td></td>
<td>BIO 208 or KPE 250</td>
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<td>Adapted Phy Ed (3cr)</td>
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<td>Fall/Spring</td>
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<td>Kinesiology (3cr)</td>
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<td>KPE 273</td>
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<td>Physiology of Exercise (3cr)</td>
<td>KPE 378</td>
<td>Fall/Spring</td>
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<td>BIO 208 and KPE 253</td>
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<td>Fall/Spring</td>
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<td>★AT Clinical Skills 1 (3cr)</td>
<td>KPE 201</td>
<td>Fall</td>
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<td>Acceptance into ATR</td>
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<td>★AT Clinical Skills 2 (3cr)</td>
<td>KPE 202</td>
<td>Spring</td>
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<tr>
<td>★MMT and Gonliometry (3cr)</td>
<td>KPE 276</td>
<td>Spring</td>
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<td>KPE 273</td>
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<td>★Professionalism in AT (1cr)</td>
<td>KPE 300</td>
<td>Spring</td>
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<td>ATR or permission</td>
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<td>★AT Clinical Skills 3 (3cr)</td>
<td>KPE 301</td>
<td>Fall</td>
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<td>KPE 202</td>
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<td>★AT Clinical Skills 4 (3cr)</td>
<td>KPE 302</td>
<td>Spring</td>
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<td>KPE 301</td>
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<tr>
<td>★Pharmacology In AT (1cr)</td>
<td>KPE 303</td>
<td>Spring</td>
<td></td>
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<tr>
<td>★Eval UE Injuries &amp; Conditions (3cr)</td>
<td>KPE 385</td>
<td>Fall</td>
<td></td>
<td>KPE 273</td>
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<tr>
<td>★Eval LE Injuries &amp; Conditions (3cr)</td>
<td>KPE 386</td>
<td>Spring</td>
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<td>KPE 273</td>
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<tr>
<td>★Ther Ex Musculoskeletal Injur (4cr)</td>
<td>KPE 387</td>
<td>Fall</td>
<td></td>
<td>KPE 273</td>
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<tr>
<td>★Therapeutic Modalities (4cr)</td>
<td>KPE 388</td>
<td>Spring</td>
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<tr>
<td>★Gen Med In AT (3cr)</td>
<td>KPE 400</td>
<td>Fall</td>
<td></td>
<td>KPE 400 &amp; Last Year In ATR</td>
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<tr>
<td>★Senior Seminar (3cr)</td>
<td>KPE 401</td>
<td>Fall</td>
<td></td>
<td>KPE 378</td>
<td></td>
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<tr>
<td>Exer Presc &amp; Leadership (3cr)</td>
<td>KPE 426</td>
<td>Fall/Spring</td>
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<tr>
<td>Nutrition for Sports &amp; Exercise (3cr)</td>
<td>KPE 490</td>
<td>Fall/Spring</td>
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<td>FSN 101 and KPE 378</td>
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★AT Majors - Min. grade of B-
Retention Policy

Athletic Training Students (ATS) formally accepted into the Athletic Training Program are responsible for maintaining an academic standard consistent with the University of Maine College of Education and Human Development and the School of Kinesiology and Physical Education and Athletic Training. Students progress according to the following:

- Earn a minimum grade of B- for all Athletic Training courses
- Maintain an overall GPA of 2.5 or higher
- Successfully complete proficiencies and hours for each clinical education course
- Successfully complete annual Bloodborne Pathogen Training
- Maintain health updates if change in health status
- Maintain current CPR certification

If a student is unable to meet these requirements, that student will retake courses to achieve the required GPA and/or meet the minimum grade requirement for AT courses. This will result in the student’s inability to enroll in the next sequential course until the ATS meets requirements and is approved by the Program Director. All outstanding work must be completed before the Program Director will endorse the ATS's BOC candidacy application.

This information is submitted to the Program Director and is maintained in the student's ATS Academic Portfolio.

The ATS will be unable to register for Athletic Training Courses if he/she fails to submit any of the following:

- Health update if change in health status
- Annual proof of attendance for Bloodborne Pathogen Training
- Current CPR certification

ATS progress is monitored by the Athletic Training Program Director at least two times per academic semester. This includes the following:

- a Mid-semester verbal report during advising meeting regarding current coursework
- a Mid-semester ATS Clinical Experience Evaluation and a mid-semester review of supervised hours.
Retention Policy continued

Students on probation are encouraged to meet more frequently (weekly or biweekly) with the program director or clinical education coordinator to maintain communication of course progress. This is typically part of the contractual agreement for those on conditional acceptance. It is up to the student to initiate these meetings.

The student's academic and clinical education records are reviewed at the end of each academic semester. The ATS is then advised of the sequence of ATR courses or repeat courses as appropriate.
Course Offerings and Progressions

Following the 4 Year Course Sequence, please note that some courses are offered only in the fall semester or only in the spring semester. A few one credit courses are offered in the spring of even years.

Didactic Courses:

- KPE 250 Prevention and Care of Sports Injuries
  Prerequisite for KPE 201
- KPE 273 Anatomy and Pathologies of Injuries and Conditions
- KPE 276 MMT and Goniometry (Spring)
- KPE 300 Professionalism in Athletic Training (Spring Even Years)
- KPE 303 Pharmacology in Athletic Training (Spring Even Years)
- KPE 383 Organization and Administration in AT (Spring)
- KPE 385 Evaluations of Upper Extremity Injuries and Conditions (Fall); Prerequisite for KPE 302
- KPE 386 Evaluations of Lower Extremity Injuries and Conditions (Spring); Prerequisite for KPE 301
- KPE 387 Rehabilitation of Musculoskeletal Injuries (Fall)
  Prerequisite for KPE 302
- KPE 388 Therapeutic Modalities (Spring)
  Prerequisite for KPE 301
- KPE 389 Aquatics Therapy (Spring Even Years)
- KPE 400 Gen Med Condition and Illnesses in Sport (Fall)
  Prerequisite for KPE 401

Clinical Courses:

- KPE 201 AT Clinical Skills 1 (Fall)
- KPE 202 AT Clinical Skills 2 (Spring)
- KPE 301 AT Clinical Skills 3 (Fall)
- KPE 302 AT Clinical Skills 4 (Spring)
- KPE 401 Athletic Training Seminar (Fall)
Athletic Training Student Levels

The following are the requirements for each Athletic Training Student Level. It combines coursework with clinical experiences and supervised hours:

Pre-AT
Enrolled in or completed BIO 100, BIO 208, KPE 100, and KPE 250

Level 1
Enrolled in or completed KPE 201, KPE 202, KPE 273, KPE 276, KPE 386, and KPE 388
Maintains an overall GPA of 2.5 Receives at least a B- in ATP courses
Documentation of 200 - 250 hours of supervised experience
Documentation of completed Clinical skills
Documentation of Mid-semester and End of Semester ATS Evaluations
Formal Admission to Athletic Training Education Program
- Completed Health Forms
- Bloodborne Pathogens Training

Level 2
Enrolled in or completed KPE 301, KPE 302, KPE 385, KPE 387 with a minimum of a B-in each course
Maintain a minimum GPA of 2.5
Submits Medical Update and proof of Blood Borne Pathogen Training Current CPR certification
Completed and documented 300 - 350 hours of supervised experience

Level 3
Enrolled in or completed KPE 383, KPE 400, and KPE 401 with a minimum of a B- in each course
Eligible for KPE 427
Maintains a minimum GPA of 2.5
Submits Medical Update and proof of Blood Borne Pathogen Training Current CPR certification
Completed and documented 25 - 50 hours of supervised experience

It is the responsibility of you, the ATS, to schedule a meeting with the Program Director prior to registration for courses to discuss current ATS Level and future progression.
Clinical Education

The Athletic Training Student (ATS) must complete Clinical Education courses over the course of a minimum of two and one half academic years (five semesters). Each Clinical Experience is associated with a Clinical Education course. Clinical Education courses have syllabi that include measurable and educational objectives and specific proficiencies that document learning over time.

The ATS will need to provide proof of background check. This will come at his/her own expense and costs between $50 and $100. The ATS will also need to maintain CPR/AED certification at his/her own expense. The average rate for this is between $35 - $50 with most recertifications costing between $5 and $20. Overall ancillary costs to the ATS will be $100 - $170 for both services.

Clinical Experiences

Purpose
The athletic training clinical experience is designed to provide the ATS with hands on experiences in real life situations that healthcare providers experience on a daily basis. The ATS will observe or/and participate a variety of healthcare settings. The clinical experience is designed for the ATS to apply classroom knowledge to patient care.

Clinical Education Courses

KPE 100 Introduction to Athletic Training
Designed to encourage students to observe athletic trainers and other healthcare providers. Areas of study include bloodborne pathogen training, rules of patient confidentiality, information about the National Athletic Trainer's Association and other governing bodies for athletic trainers and other material as it relates to working in an athletic training setting.

Offered fall and spring semesters.
Students are required to complete a minimum of ten (10) observation hours of UMaine Athletic Training Program preceptors.
Prerequisites: AT major or Instructor permission
Credit Hours: 1

KPE 201 Athletic Training Clinical Skills 1
Lab based class with first clinical experience. Focuses on the critical thinking and application of injury prevention and immediate care of injuries and illnesses. Direct supervision by trained personnel during clinical experience.

Offered in the fall semester.
Students accumulate 100 - 150 hours under the direct supervision of Athletic Training Program preceptors.
Prerequisites: KPE 100, KPE 250, and must be formally accepted as an Athletic Training Major.
Credit Hours: 3
Clinical Education

KPE 202 Athletic Training Clinical Skills 2
Lab class that builds on KPE 201. Students continue to become proficient in emergency illness/injury assessment and management. Students also add to their injury prevention taping, bracing, and padding skills.

Offered in the spring semester.
Students accumulate 100 – 150 hours under the direct supervision of Athletic Training Program preceptors.
Prerequisites: KPE 201
Credit Hours: 3

KPE 301 Athletic Training Clinical Skills 3
Through hands-on experience under the direct supervision of a trained preceptor, the student will focus on evaluating and treating injuries/illnesses/conditions using assessment skills and therapeutic modalities skills. Focus is on lower extremity evaluations using theories and problem solving skills while in a clinical setting.

Offered in the fall semester.
Students accumulate 150 – 200 hours under the direct supervision of Athletic Training Program preceptors.
Prerequisites: KPE 202, KPE 386, and KPE 388
Credit Hours: 3

KPE 302 Athletic Training Clinical Skills 4
Focus is on evaluation and treatment using assessment skills, therapeutic modalities and rehabilitation exercises for head, cervical/thoracic spine and upper extremity injuries. The student will develop competency and proficiency in these skills while working in a healthcare setting and will be under the direct supervision of a trained preceptor.

Offered in the fall semester.
Students accumulate 150 – 200 hours under the direct supervision of Athletic Training Program preceptors.
Prerequisites: KPE 301, KPE 385, and KPE 387
Credit Hours: 3

KPE 401 Athletic Training Seminar
The highest level athletic training course. Students will prepare for the National Athletic Trainers' Association Board of Certification athletic training certification exam. The student is required to complete 25 hours or as many as his/her preceptor allows in a general medical setting under the supervision of Athletic Training Program Preceptors.

Students accumulate 25 – 50 hours under the direct supervision of Athletic Training Program preceptors.
Prerequisites: KPE 302 and KPE-400
Credit Hours: 3
Clinical Education

Clinical Experience Rotations

Each ATS is required to complete a minimum of 525 supervised clinical experience hours through clinical education courses.

KPE 201 AT Clinical Skills 1  100-150 hours
KPE 202 AT Clinical Skills 2  100-150 hours
KPE 301 AT Clinical Skills 3  150-200 hours

All students enrolled in KPE 301 must report for fall pre-season.

KPE 302 AT Clinical Skills4  150-200 hours
KPE 401 AT Seminar  25-50 hours

Experience Requirements

Each ATS must experience patient care in sports populations and in general medical settings. Students will not be discriminated against based on sex, ethnicity, religious affiliation, or sexual orientation.

ATS students are responsible for keeping accurate and honest records of attendance on a biweekly basis. The preceptor responsible for each student will sign off on documented hours. ATSs must be allowed one day off per seven day week. Students cannot receive any monetary remuneration during clinical experiences, excluding scholarships.

All ATSs must complete bloodborne pathogen training. Proof of successful completion must be provided (e.g. certification card, scored bloodborne pathogen exam, etc.) Failure to successfully complete this training will lead to postponed initiation of the ATSs clinical experience and potential failure of affiliated coursework. ATSs are strongly encouraged to purchase professional liability insurance for protection against the unexpected.

Clinical experience assignments will be given to ATS as soon as prerequisites are verified. This is completed by the program director and/or clinical education coordinator. The mode of notification is typically by e-mail.
ATS 1st Rotation Evaluation

ATS

Clinical Experience

Evaluator

Instructions:
Please evaluate this ATS by circling the number that best identifies the student at this time. If you feel that comments would be beneficial, please include those as well.

Professionalism
The student’s ability to take initiative.
1 never takes initiative
2 at times takes initiative, but still needs to be told what to do
3 takes initiative most of time
4 sees needs and completes tasks without being told

The student’s personal habits, clothing and general appearance.
1 frequently offensive
2 occasionally sloppy appearance or display of offensive habits
3 usually properly dressed and groomed; few poor personal habits
4 rarely exhibits poor appearance or offensive habits

The student’s organization abilities.
1 usually disorderly and chaotic
2 frequently unorganized
3 works sufficiently and is organized to perform job
4 highly organized and efficient worker

The student’s respect for patients, peers and supervisors.
1 frequently rude; causes discomfort to others
2 occasionally impolite to others
3 observes common courtesies
4 very conscientious of others; always polite

The student’s reliability and dependability.
1 not reliable; often fails to complete job; often absent
2 occasionally leaves routine tasks incomplete; occasionally absent
3 can be relied on to complete tasks; rarely absent
4 will complete special project; rarely absent

The student’s temperament and level of stability.
1 consistent personality; disrupts work environment
2 occasional display of temper or emotion hindering performance
3 even tempered; absorbs routine pressures of job
4 tolerate unusual pressure without hindering performance
ATS 1st Rotation Evaluation

First Aid and Emergency Care Knowledge (please refer to Skills Testing for this)
The student’s base knowledge of first aid and emergency care.

1. severely lacking in knowledge
2. noticeable deficiencies in knowledge base; needs intensive review
3. understands first aid and emergency situations; still some knowledge to be acquired
4. completely understands first aid and emergency situation content

The student’s willingness to show this knowledge in clinical setting.

1. Does not participate in any way to show level of skill
2. Shows minimal offerings for assessment and/or management of first aid care
3. Freely participates in assessment and/or management; still some areas of deficiency
4. Performs above level of 1st year ATR in knowledge and skills of first aid and emergency care

Taping/Bracing/Wrapping Knowledge
The student’s base knowledge in the area of taping/bracing/and wrapping patients.

1. severely lacking in knowledge
2. noticeable deficiencies in knowledge base; needs intensive review
3. understands techniques of taping/bracing/wrapping and when to use them
4. completely understands and accurately explains use of taping/bracing/wrapping techniques

Taping/Bracing/Wrapping Bracing Skills
The student’s ability to combine job related education, skills and experience.

1. does not participate in any way to show level of skill
2. shows minimal offerings for assessment and/or management of taping/bracing/wrapping
3. freely participates in basic taping/bracing skills; still some areas of deficiency
4. freely participates in basic taping/wrapping/bracing and is effective and proficient

Please identify areas where this student is strong and where s/he needs to improve.

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

I have read this evaluation and have been given the chance to discuss the content with my supervisor.

_________________________________________________________________________
Student Signature                        Date

_________________________________________________________________________
Supervisor’s Signature                   Date

_________________________________________________________________________
Program Director’s Signature             Date

Acceptable / Unacceptable 16

Revised Fall 2016
Clinical Site and Preceptor Evaluation

Clinical Site ____________________________________________

Preceptor ____________________________________________

Purpose: To receive input from you, the student, regarding the effectiveness of this clinical site and preceptor. Your comments and scoring will remain completely anonymous, but will be shared with the preceptor as a method of making this site and his/her teaching skills optimal for this Athletic Training Program.

Preceptor Evaluation

Your preceptor was helpful and responsive to your learning objectives.

1. was not responsive or helpful regarding my learning objectives
2. at times was responsive, but did not show much interest in helping me learn
3. was very responsive and helpful to my learning objectives
4. went above and above his/her responsibilities of helping me achieve my learning objectives

Your preceptor was professional in appearance and attitude.

1. frequently dressed and/or acted unprofessionally
2. sometimes dressed and/or acted unprofessionally
3. rarely dressed and/or acted unprofessionally
4. never dressed and/or acted unprofessionally

Your preceptor was respectful of you and those around him/her.

1. did not respect me as an ATS nor those around him/her
2. occasionally showed disrespect to me and/or to those we worked with
3. was respectful of me and those we worked with
4. put the needs of me and those we worked with above him/herself

Your preceptor is well respected by his/her peers, his/her physicians, his/her administration, his/her patients and his/her students.

1. not respected at all
2. is not respected by some of those in contact with the preceptor
3. respected by all
4. respected and seen as a leader by those in contact with the preceptor

Your preceptor is using current skills, techniques and protocols.

1. not consistent with my current coursework
2. sometimes is inconsistent with my current coursework
3. uses current skills, techniques and protocols consistent with my coursework
4. uses current and cutting edge skills, techniques and protocols

Updated September 2014
Clinical Site and Preceptor Evaluation

Your preceptor is personally and professionally motivated and carries that over to those around him/her.

1 disagree
2 is sometimes motivated personally and professionally
3 is frequently motivated to improve professionally and/or personally
4 is always looking for ways to improve personally and professionally and shares it with those around

Your preceptor cares about making this clinical experience a true learning environment for you.

1 does not take much interest in making this a learning environment
2 takes some time to make this experience educational, but it is not a high priority
3 takes a great deal of time to make this an educational experience
4 has made me a part of his/her priority in daily patient care

Your preceptor gives timely, appropriate feedback.

1 never gives feedback
2 rarely gives feedback
3 gives feedback through evaluation forms
4 gives timely feedback on a situation to situation basis

Your preceptor takes the time to know you, your learning methods, your strengths, and your weaknesses.

1 my preceptor has made no effort to get to know me or my AT abilities
2 my preceptor has helped me as an ATS, but does not know me other than that
3 my preceptor has taken the time and made efforts to know me personally and to know my AT abilities
4 my preceptor has taken the time to work with me enough to help me to strengthen my weaknesses

Your preceptor encourages you to think critically, to work to your abilities and listens to suggestions and new opportunities.

1 never
2 rarely ever
3 frequently
4 always takes the time to listen and encourage me

Updated September 2014
Clinical Site and Preceptor Evaluation

Clinical Site Evaluation

Please make a mark on each scale to represent your thoughts and feelings for this clinical site. Also, take the time to write in the comments section. This will strengthen the current site for patients and for your peers.

This site is an appropriate learning environment.

Strongly Disagree  Strongly Agree

Comments:

You were given appropriate orientation to the facility and to the athletes/patients.

Strongly Disagree  Strongly Agree

Comments:

Policies, procedures, and protocols were clearly explained and readily accessible if you had questions.

Strongly Disagree  Strongly Agree

Comments:

Supplies and equipment were appropriate and enhanced your learning experience.

Updated September 2014
Clinical Site and Preceptor Evaluation

Strongly Disagree

Strongly Agree

Comments:

The patients you worked with were appropriate for an athletic training clinical experience.

Strongly Disagree

Strongly Agree

Comments:

The University of Maine Athletic Training Education Program should continue to utilize this site for ATS clinical experience.

Strongly Disagree

Strongly Agree

Comments:

(Optional) Athletic Training Student Signature

Date

Program Director Signature

Date

PD/CEC Comments:

Updated September 2014
Athletic Training Clinical Site Policies

The athletic training rooms are medical facilities. One of the attractions of working in this environment is the sometimes-relaxed and casual atmosphere. Be very aware of this and do not allow the atmosphere to compromise your professional standards and work ethic.

Athletic Training Student Responsibilities
The athletic training students' responsibilities consist of the following:
1. Assist the preceptor with medical support
2. Assist with daily record keeping; treatment logs, injury evaluations, etc.
3. Evaluation and treatment patients (appropriate to skill and knowledge level) while under preceptor supervision. Obtain approval for all treatments from your preceptor.
4. Practice universal precautions and maintain excellent sanitary conditions in all procedures.
5. Assist the medical team in maintaining confidentiality. Respect the right of confidentiality of the patients and their medical conditions. This includes any form of social media. Follow HIPAA guidelines.
6. Perform daily athletic training room duties to include but not limited to cleaning, equipment upkeep, etc.
7. Schedule time and perform skills with preceptor

Athletic Training Room Rules
The rules for athletic training students vary with differing clinical sites. All rules at a particular site should be observed at all times. In addition, the following general rules should be followed regardless of clinical site...

1. You should have no food or drink in the athletic training room. It is a health care facility.
2. No profanity in the athletic training room.
3. Adhere to your site’s policies and procedures manual and clinical site dress codes.
4. Attendance is required and exceptions for valid obligations should be addressed with your preceptor and the Clinical Education Coordinator (Kaz Yanagi) in advance.
5. All supplies and equipment are the property of your clinical site. Do not use materials without permission and never waste materials.
6. A professional and courteous demeanor is required while in the clinic.
7. Computers in the athletic training room at each site are for athletic training purposes only and students are not to be surfing the internet, checking email, Facebook, etc.
8. **Do not use your cell phones while on duty.** In case of an emergency, leave the facility to take care of the call.
**Daily Athletic Training Room Duties**
The daily athletic training room duties vary with each clinical site. All duties at a particular site should be maintained daily. Clerical and water duties are never fun but are a standard part of athletic training in most settings. The following general duties are recommended for athletic training students at each site.

1. Keep the athletic training room clean at all times
2. Keep athletic training kits stocked and ready for field use at any time
3. Maintain complete injury reports and daily treatment forms
4. Administer necessary first aid
5. Restock supplies
6. Clean all machines, counters, and areas that receive general use
7. Stock Ice Cups, Ice Bags, etc. as per each site
8. Clean all coolers and store properly after each use
9. Clean tables and rehab equipment
10. Conduct adequate rehab programs to help prevent re-injury

**Relationships with Medical Staff**
The athletic training student is to maintain a respectful and professional relationship with the medical staff at all times. This includes staff athletic trainers, graduate athletic training students, students, physicians, EMT’s, nurses, and any other support staff they should encounter. For the medical team to operate efficiently it is important that in the clinical setting the chain of command be followed.

Relationships beyond professional with any athletic training student, medical staff, coaching staff, athlete, patient, etc. is not allowed. Students who are involved in such relationships will be dismissed from the UMaine Athletic Training program.

1. There is no place in the athletic training room for personal relationships.
3. Do not extend special privileges to individual patients. All patients should be treated equally, regardless of race, gender, sport, or team status.
4. Do not discuss injuries with patients regarding other patients.
5. Be careful of what you discuss with a patient regarding their injury without proper instruction from the clinical supervisor.
6. All patients should be treated in a professional manner, even if they do not act in a respectful manner. Treat them and then discuss this with your preceptor.
7. Do not do things for patients against staff policy. NEVER COVER FOR A PATIENT.
Clinical Experience Standards and Guidelines

While it is sometimes difficult to balance clinical experiences with the rest of college life, it is important to learn how. The following standards will assist you with this challenge:

- You are required to complete 10 – 20 clinical experience hours per week. Work with your Preceptor to create a schedule that will enable you stay within these boundaries.

- This is a course! Missed clinical experience time is considered an absence. Greater than 2 unexcused absences will result in course failure.

- Being late to a clinical experience is an unexcused absence.

- It is perfectly appropriate to request “time off” when it is in your best academic interests. Professionally, you should have an alternate plan for your supervisor (i.e. a replacement, or taking time during slow times).

- It is also appropriate to take time for family obligations. Plan accordingly with your preceptor at the beginning of the semester so you can schedule these (i.e. family weddings, etc.).

- Activities including, but not limited to outside jobs, fraternity and sorority functions are not to come in the way of your clinical experience. Plan accordingly with your preceptor. If you cannot fulfill a scheduled clinical experience session due to a conflict such as those listed above, it will count as an unexcused absence.

Bottom line – Clinical Education courses are top priority!

- Communicate with your preceptor. Let them know your needs both in the clinical experience and outside the clinical experience.

- If you are ill, please consult your preceptor to determine if you should work with patients that day. Refer to the “Active Communicable Disease Policy” for more information.

- If classes are cancelled due to inclement weather, you are not to attend your clinical experience. It is a safety issue. UMaine closes classes so that the campus is safe.

Non University of Maine Clinical Experience Site

You will be completing at least one aspect of your Clinical Experiences off campus. In order to ensure continuity of educational practices, your preceptor at each off campus site has been trained and is familiar with the UMaine Athletic Training Program. They are committed to providing a positive learning environment for you. If you have any questions regarding this please contact the Athletic Training Program Director or Clinical Education Coordinator.
General Policies and Procedures

Active Communicable Disease and Clinical Experiences
Athletic Training Students (ATS) with active communicable diseases are assessed on an individual basis. Consideration for allowing the ATS to proceed with patient contact is based on the safety of the Athletic Training Student and the patient. The student will be removed from such contacts until the student is no longer contagious.

Blood borne Pathogen Training and Clinical Experiences
Each athletic training student is required to attend a minimum of one blood borne pathogen control education session each academic year. The program is organized by the Athletic Training Program Director and Clinical Education Coordinator. University of Maine blood borne pathogen guidelines will be taught for this education session. These include guidelines mandated by OSHA. Students assigned to Clinical Experiences off campus will be introduced to that site’s Exposure Control plan.

No student will begin a clinical experience until successfully completing a Blood borne pathogen training session approved by the Program Director. Each student must submit proof of successful completion from the instructor or by a signed certification card.

Competitive Admissions
As the ATS completes the Candidacy requirements, he/she submits the Candidacy Application to the Program Director. All application materials will be evaluated by the Program Director and Clinical Education Coordinator. The Associate Dean of Students for the College of Education and Human Development will also assist with admissions into the formal aspect of the program. Applicants will be ranked in order based upon the Candidacy criteria. The highest ranking athletic training student candidacy applicants will be offered admission to the professional aspect of the program based on available positions. Even though Candidacy applicants may meet all the criteria, they may be denied admission due to their rank order and limited number of seats (30 per cohort). Students may re-apply for the next cohort if they are unsuccessful on their initial attempt.

Confidentiality
All athletic training students must adhere to the following Confidentiality Statement and to HIPAA Privacy rules. Students will undergo HIPAA and FERPA training through the College of Education and Human Development.

As a healthcare professional, it is the law that you withhold any information which you acquire either professionally or socially that is considered “professionally confidential”. This includes any information you hear in athletic training rooms, physicians’ offices, locker rooms, or other. Information regarding an athlete’s medical condition, treatment of this medical condition, or any other patient information that is not considered public information is not to be discussed with anyone other than your immediate supervisor. Please adhere to this policy as a breach of confidentiality will lead to dismissal from any further clinical education opportunities.
Dress Code
Students not meeting the Dress Code (found in Clinical Education of ATS Handbook) will be asked to leave the Clinical Site for the day and a formal written complaint will be sent to the Program Director. It will part of the student’s academic file. Two infractions will lead to probation. Three infractions will lead to dismissal from the Athletic Training Program.

Inclement Weather
If classes are cancelled due to inclement weather, athletic training students are not to attend clinical experiences. Remember, clinical experience is a class and classes are cancelled to keep you safe by staying off the roads and sidewalks.

Incomplete Admissions Packet Policy
All admittance requirements as stated in the Admissions Guidelines must be completed prior to formal admittance into the University of Maine Athletic Training Program. No student can begin clinical experience rotations until accepted into the program. Students with an incomplete admissions packet will not be allowed into Clinical Skills courses until the packet is complete and approved by the Program Director and Clinical Education Coordinator.

Liability Insurance
The Athletic Training Students and Sports Medicine Staff of the University of Maine are covered with malpractice liability insurance through General Star Indemnity under the Excess Policy. A copy of this information is available upon request. Students are covered only when enrolled in Clinical Skills classes and those classes are in session.

Observation Only
All students enrolled in KPE 100 Introduction to Athletic Training are available for “observation only”. The perspective Athletic Training Student is unable to perform any athletic training skills to any patients during these observations.

Probation
Probation is a time for the Athletic Training Student to improve grades and/or behavior in order to stay in the Athletic Training Program. Probation is typically a one semester period when the student works toward a goal(s) established by the ATS and the Program Director. If the student does not meet such goals, s/he will be dismissed from the program.

If the student successfully meets the goals, s/he will be accepted into the ATP with the understanding that the next infraction will lead to dismissal.
Professionalism
A preceptor may feel an ATS is not presenting himself/herself within the scope of ATS Professionalism. This could include language, personal presentation, or emotional intellect, but is not limited to those. The preceptor must document the activity and meet with both the ATS and Program Director or Clinical Education Coordinator. If all parties feel the ATS acted/spoke inappropriately, s/he will be put on probation and a formal written complaint will be filed in the student’s academic file. Two infractions will lead to dismissal from the Athletic Training Program.

Supervised Clinical Experience and Observations
Direct supervision means the preceptor is available to immediately intervene if needed. An athletic training student in noncompliance of the Direct Supervision Standard will be warned one time and a written complaint will be filed in his/her academic file. If found in noncompliance again, the athletic training will be dismissed from the Athletic Training Program.

Student and Faculty Grievance Policy and Procedures
University of Maine faculty can access procedures for processing a grievance via the University of Maine's Human Resources web page (http://umaine.edu/hr/files/2012/07/afumcba1.pdf).

Students can access procedures for processing grievance via the University of Maine’s Student Handbook web page (http://umaine.edu/handbook/policies-regulations/student-administrative-appeal-policy/).

Therapeutic Modality Use
Athletic Training Students shall not use Electrotherapeutic Modalities during Clinical Experiences prior to completing KPE 388 Therapeutic Modalities. Therapeutic modalities include but are not limited to electrotherapy stimulation, ultrasound, LASER, manual therapies, and mechanical traction.

Students found using therapeutic modalities without completing the course will be given a verbal warning and formal written complaint will go in his or her academic file. If found using therapeutic modalities after that warning the student will be dismissed from the Athletic Training Program.

Transfer Student (Admissions Policy)
Students transferring into the University of Maine Athletic Training Program must meet all Candidacy requirements. This includes completing KPE 100 Introduction to Athletic Training and KPE 250 Prevention and Care of Athletic Injuries skills packet from the University of Maine. After successfully entering the Professional Athletic Training Education Program, this student must complete a minimum of 2.5 years (5 semesters) within the University of Maine Program.
Work-Study Policy and Procedures

Athletic Training Students who qualify for federal work-study are encouraged to utilize this funding. They cannot receive work study funds while in a clinical experience associated with a clinical education course. Athletic training students are reminded that neither work-study nor outside employment are to interfere with educational commitments. The Office of Student Employment is responsible for disseminating the University of Maine’s Work Study Policy.
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.

September 2005, Revised 2016
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

1.7.1 Does not make unsupported claims about the safety or efficacy of treatment
BOC STANDARDS OF PROFESSIONAL PRACTICE

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 healthcare 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