



**Athletic Training Program**

**COLLEGE OF NURSING AND HEALTH INNOVATION**

# **STUDENT HANDBOOK**

**2024-2025 (Revised April 15, 2024)**

The University of Texas at Arlington  
Master of Science in Athletic Training Program  
Student Handbook

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## INTRODUCTION

This document contains the policies and procedures for The University of Texas at Arlington (UTA) Master of Science in Athletic Training (MSAT) program. It is intended to be a reference for applicants, current athletic training students (ATS), athletic training faculty and staff, preceptors, and administrators. All persons involved in any aspect of the UTA MSAT should read and be familiar with all parts of this handbook.

The UTA MSAT program is designed to prepare students to be successful entry-level athletic trainers. The student who envisions a career in athletic training must accept certain responsibilities beyond those associated with successful academic performance and clinical competence. Students within the UTA MSAT are expected to possess and demonstrate appropriate professional behaviors throughout all phases of the program, and to uphold the ethical standards outlined in this manual, affiliated sites, the [National Athletic Trainers' Association Code of Ethics](#), and the Board of Certification's (BOC) [Standards of Professional Practice](#). Failure to uphold these standards can result in probation, suspension, or dismissal from the UTA MSAT.

# **MASTER OF SCIENCE IN ATHLETIC TRAINING (MSAT)**

## **PROGRAM OVERVIEW**

## PROGRAM SUMMARY

The curricular sequence of the MSAT program is divided into two years. Students enter a cohort as a “Year 1” Athletic Training Student (ATS) and progress to a Year 2 ATS. The program incorporates didactic (classroom), laboratory, and clinical education components structured around the Curricular Content found in the [2020 Standards for Accreditation of Professional Athletic Training Programs](#). Completion of the MSAT program prepares students to sit for the BOC credentialing examination for Athletic Trainers and to be eligible for licensure by the Texas Department of Licensing and Regulation.

## PERSONNEL

<b>College of Nursing and Health Innovation</b>	Dean: Elizabeth Merwin, PhD, RN, FAAN
<b>Department of Kinesiology</b>	Associate Dean and Chair: David Keller, PhD Administrative Assistants: <ul style="list-style-type: none"><li>• Cindy Stringer</li><li>• Cynthia Ontiveros (MSAT)</li><li>• Mayra Martinez</li><li>• Ruth Griffin</li><li>• Stacey Corley</li></ul>
<b>Master of Science in Athletic Training</b>	Program Director (PD): Laura Kunkel, EdD, LAT, ATC, PES, FNAP Coordinator of Clinical Education (CCE): Meredith Decker, PhD, LAT, ATC, PES Director of Simulation: Adam Annaccone, EdD, LAT, ATC, PES, CES

## **MISSION STATEMENTS**

### **University of Texas at Arlington**

The University of Texas at Arlington is a comprehensive research, teaching, and public service institution dedicated to the advancement of knowledge through scholarship and creative work. The University is committed to providing access and ensuring student success, and to a culture of innovation, entrepreneurship, and commercialization of discoveries by our community of scholars. The University promotes lifelong learning through its academic, continuing education, and experiential learning programs. The faculty, staff, and student community share diverse cultural values that foster inclusivity and cultivate mutual respect.

### **UTA College of Nursing and Health Innovation**

Our mission is to advance global health and the human condition through transdisciplinary collaboration by engaging in high-quality teaching, research, scholarship, practice, and service to prepare a diverse population of health professionals and to reduce health disparities.

### **UTA Department of Kinesiology**

The Department of Kinesiology at The University of Texas at Arlington is committed to providing quality educational programs that emphasize scientific theory, hands-on learning in the laboratory setting, and real-world application through clinical internships and other field-based experiences. The faculty in the Department of Kinesiology conduct cutting-edge research related to health and disease across the lifespan.

### **UTA Master of Science in Athletic Training Program**

The Master of Science in Athletic Training Program at the University of Texas at Arlington is committed to developing proficient and competent graduates through high-quality classroom and clinical instruction that emphasizes patient-centered holistic healthcare. Graduates will be prepared to pass the Board of Certification exam for Athletic Training, to advance health and the human condition, and will excel in areas of performance healthcare, manual therapy and integrative modalities, emergency preparedness and response, and administration and leadership.

**The UTA MSAT Program is guided by the following core principles (RESPECT):**

- **Responsibility/Recognition:** we are all responsible for ourselves and each other; we recognize and celebrate successes.
- **Excellence:** we strive for excellence in everything we do.
- **Service:** we serve the athletic training profession and the community.
- **Professionalism/Positivity:** we hold ourselves to a high level of professionalism and we maintain positive attitudes.
- **Ethics:** we do the right thing and maintain integrity.
- **Connections/Collaboration:** the UTA Athletic Training family is connected, and we collaborate with others.
- **Transparency and clear communication** build trust among us.

<b>GOALS AND EXPECTED OUTCOMES</b>	
<b>Goal #1</b>	<p>Prepare students to pass the BOC exam and enter the profession of athletic training as proficient clinicians with the knowledge, skills, and abilities to deliver patient-centered healthcare.</p> <p>Outcome 1.1: Students who enter the program will graduate with an MSAT. Outcome 1.2: Graduates will obtain BOC certification. Outcome 1.3: Graduates will practice as athletic trainers. Outcome 1.4: Students will demonstrate the knowledge, skills, and abilities to deliver patient-centered healthcare.</p>
<b>Goal #2</b>	<p>Provide high-quality didactic and clinical experiences emphasizing contemporary best practice health care.</p> <p>Outcome 2.1: Faculty will demonstrate high-quality instruction in didactic courses. Outcome 2.2: Preceptors will demonstrate high-quality clinical instruction.</p>
<b>Goal #3</b>	<p>Prepare students to be confident in the areas of performance healthcare, manual therapy and integrative modalities, emergency preparedness and response, and administration and leadership.</p> <p>Outcome 3.1: Students will indicate confidence in performance healthcare, manual therapy and integrative modalities, emergency preparedness and response, and administration and leadership.</p>

## **RETENTION POLICY**

### **Retention Criteria**

MSAT students' academic and clinical progress will be closely monitored each semester by the MSAT Program Director and Coordinator of Clinical Education. To remain in the MSAT program, students must:

1. Complete each course with a grade of "C" or better
  - Students who earn below a "C" in a course will be dismissed from the program.
2. Maintain a 3.0 cumulative GPA in the MSAT program
  - Students who earn below a 3.0 cumulative GPA will be placed on academic probation for one semester. If the student does not earn a cumulative GPA of 3.0 or higher by the end of the probationary semester, the student will be dismissed from the MSAT program.
  - Students on academic probation will be required to create an academic success plan, submitting to the faculty 2 weeks after the start of a summer term or 3 weeks after the start of a long semester.
  - Students who do not gain good academic standing with the program after one semester of probation will be dismissed from the program.
3. Adhere to documents which outline professional behaviors, including but not limited to the MSAT Student Handbook, the BOC Standards of Professional Practice, the NATA Code of Ethics, and course syllabi.
  - For professionalism offenses, a Student Conduct Digression Report will be completed. If a student obtains 3 of these, they will be dismissed from the program (3 strikes and you're out rule). If a professional offense is especially egregious, a student may be dismissed from the program with only 1 digression report.

## **GRADUATION REQUIREMENTS**

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

1. Grade of "C" or better in all MSAT courses.
2. Adhere to all Athletic Training Policies and Procedures and standards/ethical codes identified in this document.
3. Gain clinical experiences working with all CAATE-required patient populations and health conditions.



4. Meet all minimum clinical hour requirements per semester.
5. Complete all Year 1 and Year 2 required clinical skills and simulations.

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

## **EQUAL OPPORTUNITY/NON-DISCRIMINATION POLICY**

The UTA MSAT does not discriminate based on race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity when providing educational opportunities or placements. Any student who believes he or she has been discriminated against based on the reasons listed in these policies should inform the Program Director and file a complaint with [Office of Equal Opportunity Services](#) (phone: 817-272-4585; email: [eoaa@uta.edu](mailto:eoaa@uta.edu)).

Students must report any cases of discrimination to the MSAT Program Director. Discrimination of any sort is unacceptable and will not be tolerated in the MSAT, including at clinical sites. If a student discriminates against anyone associated with the MSAT, they will be reported to the Office of Equal Opportunity Services and the Office of Community Standards.

## **ACADEMIC ADVISING**

All MSAT students will receive academic advising from the MSAT program director and graduate advisor. Advising information will be conducted once each semester electronically or in person. All students will have an “Academic Advising” hold placed on their MyMav account before registration. Students eligible to register will have the service indicator removed by the MSAT program director. ATS can register on the first day of open registration each semester.

## **ATS CONDUCT POLICIES**

### **PROFESSIONAL CONDUCT & CONFIDENTIALITY POLICY**

UTA Athletic Training Students are always expected to conduct themselves professionally. This includes appearance, timeliness, and overall actions and behaviors. In addition, at your clinical sites you are expected to conduct yourselves professionally and politely by addressing everyone, including patients, parents, athletic trainers, physicians, administrators, other healthcare providers, and others with respect. By being a member of the UTA MSAT program, students assume the responsibility of behaving as a health care professional. This includes but is not limited to:

1. All policies listed in this policy/procedure document
2. Applicable policies for students enforced by the University of Texas at Arlington, including the UTA Honor Code
3. The NATA Code of Ethics and BOC Standards of Professional Practice
4. Applicable policies of the Texas Athletic Trainers Occupations Code
5. Policies listed on course syllabi
6. Policies identified by each clinical site and preceptor

UTA Athletic Training Students are expected to:

1. Document clinical hours and patient encounters regularly by using Typhon. The preceptor and Coordinator of Clinical Education (CCE) must approve both clinical hours and case logs.
2. Realize that the preceptor will complete a performance evaluation at midterm and at the conclusion of the rotation; problematic areas related to professionalism identified by the preceptor are subject to remediation, probation, and/or permanent suspension.
3. Commit to a schedule of attendance at the clinical site and be accountable (i.e., “I will be there when I say I will be there”).
4. Be on time. If an emergency causes one to be late, it is the student’s responsibility to contact the faculty member or preceptor and make him/her aware of the situation. Find out how your preceptor wants you to contact them (phone call, text, email, etc.).
5. Be proactive in class and at the clinical site (i.e. learn what can be done without being told or reminded).
6. Engage in respectful, professional communication with physicians, coaches, staff athletic trainers, or others who have more training. Students are expected to participate in meaningful conversations with

sports medicine staff pertinent to athletic training (e.g. discuss diagnosis, management, rehab, etc. of injuries that occur).

7. Avoid posting anything unprofessional about your patients, clinical site, or other areas in which you represent the UTA MSAT on social media.
8. Refrain from using vulgar or obscene language or offensive social colloquialisms (e.g. cussing, inappropriate slang).
9. Follow the UTA MSAT dress code, be groomed, and dress professionally (clean and appropriate garments) at clinical sites, when attending continuing education programs, or representing the UTA MSAT.
10. Avoid gossip and refrain from sharing one's personal life with any high school students (including on social media); do not "friend" or "follow" high school students on social media.
- 11. Always practice ethical behavior including confidentiality. Federal law (FERPA/HIPAA) prohibits students from discussing medical issues with anyone other than appropriate medical personnel. If in doubt, ask the preceptor or a UTA MSAT Faculty member. ATS must sign the [MSAT Confidentiality Statement](#).**
12. Recognize that the MSAT educational facilities and other associated labs are professional health care and teaching venues. ATS are responsible for keeping it clean and are to avoid bringing food or lid-less drinks into the facility. Food may not be eaten in PEB 101A.
13. ATS have the privilege of a student lounge in PEB 308 for food. Likewise, the lounge should be kept clean. If the room is not kept clean, access to the lounge will be terminated. If you open the door using your swipe card, then close the door and ensure that it is locked before exiting the building. Students also have swipe card access to PEB 303 and likewise are responsible for ensuring security by closing the door after vacating the room.
14. Athletic Training Students represent the UTA MSAT. Any violation of the:
  - UTA MSAT Student Handbook;
  - applicable policies for students enforced by the University of Texas at Arlington, including the UTA Honor Code;
  - NATA Code of Ethics, and BOC Standards of Professional Practice;
  - applicable policies of the Texas Athletic Trainers Occupations Code;

- policies listed on course syllabi;
- policies identified by each specific clinical site and preceptor;
- professional conduct and confidentiality policy;

may result in a **student conduct digression form, suspension, or dismissal from the program.**

## **ACADEMIC INTEGRITY AND SCHOLASTIC DISHONESTY**

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

### **What is Academic Integrity?**

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

1. Honesty
2. Truth
3. Fairness
4. Respect
5. Responsibility

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

## **What Constitutes Scholastic Dishonesty?**

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

### ***Cheating***

1. Copying another's test or assignment
2. Providing of discussion of content and/or answers to another student during and/or after an exam (written, oral, practical, etc), OSCE, graded simulation experience, or assignment
3. Giving or seeking aid from another when not permitted by the instructor
4. Possessing or using unauthorized materials during a test
5. Buying, using, stealing, transporting, or soliciting a test, draft of a test, or answer key

### ***Plagiarism***

1. Using someone else's work in your assignment without appropriate acknowledgment
2. Making slight variations in the language and then failing to give credit to the source

### ***Collusion***

1. Without authorization, collaborating with another when preparing an assignment

## **Artificial Intelligence (AI)**

While generative AI tools such as ChatGPT, Grammarly, or others can be useful resources, the MSAT program permits its use only for specific assignments and not at all on exams or quizzes. Assignments in which the use of AI is permitted will explicitly state this. If an assignment does not explicitly state that the use of AI is permitted, its use will violate the University Code of Conduct and students who violate this will be reported to the Office of Community Standards.

To maintain academic integrity, students must disclose any use of AI-generated material. As always, students must properly use attributions, including in-text citations, quotations, and references.

Students should include the following statement in assignments to indicate use of a Generative AI Tool: “The author(s) would like to acknowledge the use of [Generative AI Tool Name], a language model developed by [Generative AI Tool Provider], in the preparation of this assignment. The [Generative AI Tool Name] was used in the following way(s) in this assignment [e.g., brainstorming, grammatical correction, citation, which portion of the assignment].”

### **The University of Texas at Arlington Honor Code**

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

I promise that I will submit only work that I personally create or that I contribute to group collaborations, and I will appropriately reference any work from other sources. I will follow the highest standards of integrity and uphold the spirit of the Honor Code.” (Source: [UTA Office of Community Standards](#))

The MSAT faculty hold students to the highest expectations of academic integrity. Students are expected to report academic integrity violations to the appropriate MSAT faculty member if they are aware of them. Any student who is suspected of participating in scholastic dishonesty as defined above will be reported to UTA Office of Community Standards. Students found to be responsible by the Office of Community Standards will receive an automatic zero on the assignment, written exam, practical exam, quiz, OSCE, or simulation, and will receive a student conduct digression form through the MSAT program. In addition, no make-ups of the work will be allowed.

### **DRESS CODE**

When students are representing the MSAT program (i.e., clinical experiences, professional conferences, sports medicine lectures, working with students from other programs, etc.) they are expected to display the type of personal appearance and attire reflective of a professional. ATS are also expected to dress professionally when engaging in simulation. Attire must reflect consideration of image, safety, and infection control. The following definitions/descriptions of types of dress will be used:

Casual: denim, moderate length shorts or skirts, capri pants, shorts, leggings, t-shirts without profane or obscene images and words

Business Casual: polo/collared shirts, khaki pants, slacks, blouses or collared shirts

Business: suits, dresses/skirts with a blazer

- When in class, casual dress is acceptable
- When a guest speaker is present, business casual dress is expected unless lab clothes are required for the speaker topic
- When students attend professional conferences, work with students from other programs, serve on admissions committees or engage in simulation, business or business casual dress is expected
- In all cases in which students are representing the MSAT program, students should dress in a manner that is representative of a health care professional.
- During clinical experiences:
  - Students should dress in a manner befitting professionals. We strongly encourage students to dress in business casual while engaging in clinical experiences.
  - Clothing with UTA logos or colors are required at on-campus sites. Students may wear neutral colors (black, gray, white, etc.) if they do not have UTA clothes.
  - Students should not wear clothing representing other schools, sites, or programs unless assigned to those sites (i.e., SMU clothes are acceptable at SMU).
  - Students are expected to always wear their name tags. This is how patients and others will distinguish students from a licensed health care professional. If a nametag is lost, it is the student's responsibility to replace it (Accent Awards).
  - Closed-toed shoes must be always worn.
  - Selection of jewelry for clinical experiences should reflect a concern for professionalism, safety and infection control precautions.
  - Body Art: each clinical site will determine whether display of body art is appropriate. If a clinical site deems the display of body art is inappropriate, students with body art that cannot be covered will not be assigned to that site.
  - Fingernails should be short and clean (no longer than about ¼" beyond the fingertip) (in hospital settings OSHA policies do not allow for acrylic nails – for the purpose of infection control).

## CLASS ATTENDANCE

Each ATS is expected to perform to the best of their ability in the classroom. The theoretical concepts and clinical skills learned in class provide the foundation for growth and development as an athletic trainer. All ATS are expected to attend class regularly, turn in assignments, and take exams on schedule. While in class, students are expected to remain attentive. Refer to the policy regarding travel with teams on page 31 for information about missing class for travel.

## STUDENT HEALTHCARE/COMMUNICABLE DISEASE POLICY

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

1. Athletic training students with contagious or potentially contagious illness should avoid direct patient contact, regardless of the clinical setting, and should refrain from attending class in person.
  - a. Students suffering from a cold, sore throat, respiratory illness, intestinal illness, or other condition with an oral temperature of 100° or greater should report to the student health center or their primary care provider (PCP).
  - b. If a student must miss a class or clinical assignment due to illness, they should contact their instructor and/or preceptor prior to their absence. If unable to contact their instructor/preceptor prior to the absence, students should contact him/her as soon as possible.
2. Athletic training students should always practice sound prevention techniques when working in the healthcare environment (i.e. regular hand washing, secretion and cough management, wearing of gloves when appropriate, etc.).
3. Athletic training students should always cover all open wounds or cuts before treating a patient.
4. If an athletic training student suspects that he/she has a medical condition that may impact the safety of the student or patient, the student must inform the preceptor and the CCE as soon as possible.
5. Blood-Borne Pathogen Training and Exposure Control Policy: MSAT students will undergo Blood-Borne Pathogen (BBP) training annually and review the exposure control plan (*Appendix A*).

The UTA MSAT follows those safety policies developed by the UTA Office of Environmental Safety. Specifically, the [UTA BBP Exposure Control Plan and Biological Safety Procedure](#).



## **COMPREHENSIVE OSCE SPRING YEAR 1**

In spring of the first year, students are required to complete a comprehensive objective structured clinical exam (OSCE), which will incorporate all knowledge learned thus far. Students must pass this OSCE to continue in the MSAT program. The OSCE will be given as part of KINE 5222 Clinical Athletic Training III.

## **CAPSTONE EXAM REQUIREMENT**

The Capstone exam is a program and graduation requirement, as well as a course requirement in KINE 5224. A passing score is required for a grade towards this requirement in KINE 5224. At the conclusion of the course, if a student has not passed the capstone, a course grade of an incomplete will be applied to 5224 until a passing score is achieved. The exam contains questions across the 5 domains of practice for the athletic trainer, as designated by the most recent BOC Practice Analysis. The Capstone Exam will be given on a designated day in-person over the course of a 4-hour window. A passing score is 75%. If a student does not pass on the first attempt, they will reattempt the exam at the end of the semester to achieve a passing score.

## **BOC EXAM AND TDLR LICENSING INFORMATION**

Students should familiarize themselves with [BOC certification requirements](#) and [Texas Department of Licensing and Regulation \(TDLR\) licensing requirements for athletic trainers](#). Students are responsible for understanding this information and are encouraged to ask MSAT faculty if they have questions.

## **SIMULATION**

Throughout the program, the ATS will be required to participate in simulation sessions, including written simulations, mini-encounters, and standardized patient (SP) encounters. The SP is an extended performance assessment where students interact with patients. The SP encounter more closely resembles the clinical environment and provides information about a student's abilities to interact with a patient, initiate a session, and incorporate skills of history-taking, physical examination, and patient education. Students will be provided

specific instructions and details related to dates and times of SP encounters at the beginning of each semester either by the simulation director or course faculty.

## **COURSE SEQUENCE**

### **Master of Science in Athletic Training (MSAT) 57 Semester Credit Hours (SCH)**

The MSAT at the University of Texas at Arlington is a challenging, two-year, six-semester 57 semester credit hour program. A list of courses and sequencing can be found [here](#).

## **ACADEMIC GRIEVANCES**

The [UTA academic grievance policies](#) are utilized for any grievances involving grades, academic eligibility/suspension, or graduation requirements:

### **Process**

Students must first discuss the grade or academic grievance with the instructor and present evidence of differential treatment and/or procedural irregularities. If unsuccessful at reaching an agreement, the student should then discuss the grievance with the program director. If still unsuccessful at reaching an agreement:

- The student must submit a written appeal on an Academic Grievance Form available in the Department of Kinesiology Office to the department chair.
- The department chair will refer the issue to a departmental committee of faculty. The committee will make a recommendation to the departmental chair.
- If the student is dissatisfied with the chair's decision, they may appeal the case to the academic dean. The dean's decision is final.
- Students have one year from the day grades are posted to initiate a grievance concerning a grade including presenting evidence of differential treatment and/or procedural irregularities.

**MASTER OF SCIENCE  
IN  
ATHLETIC TRAINING:  
  
CLINICAL  
EDUCATION  
POLICIES**

## CLINICAL EDUCATION EXPERIENCES

Throughout the course of the program, students will get exposure to a variety of patient populations and health conditions as required by the CAATE 2020 Standards for Accreditation of Professional Programs. The following patient populations will be experienced by students within the various clinical education experiences:

1. Throughout the lifespan (for example, pediatric, adult, elderly),
2. of different sexes,
3. with different socioeconomic statuses,
4. of varying levels of activity and athletic ability (for example, competitive and recreational, individual and team activities, high and low intensity activities),
5. who participate in non-sport activities (for example, participants in military, industrial, occupational, leisure activities, performing arts).

Additionally, students will need to engage with patients through athletic training clinical experiences related to the following health conditions:

- emergent, behavioral (mental health), musculoskeletal, neurological, endocrine, dermatological, cardiovascular, respiratory, gastrointestinal, genitourinary, otolaryngological, ophthalmological, dental, and environmental

Clinical course requirements are detailed in each course syllabus. There are multiple clinical requirements to complete throughout the course of the semester for students to complete in each sequential clinical course. Students will record patient encounters through case logs on Typhon. These logs will track the requirements needed for patient populations, health conditions, and procedures and skills, as well as serve as information used to make informed and specific clinical placements.

The priority for gaining exposure to these patient populations and health conditions is through direct, real-life patient care. Simulation, via in-person and telemedicine may be used to supplement experiences not encountered at clinical sites.

**Other Scheduled Clinical Education Experiences:** Athletic Training Students will be given the opportunity to participate in additional clinical assignments (important dates or special events) within the UTA athletic training facilities or other clinical settings. These experiences are designed to give you additional opportunities for

experiential learning and will provide a great opportunity to gain additional experiences toward the clinical hour requirement.

**Other Involvement Outside of your Assigned Site:** A student's assigned clinical site will always take precedence over other clinical education experiences. A student is not limited from attending another clinical education site and gaining experience; however, this needs to be approved by both the current preceptor and CCE via email. **Once the preceptor confirms that attendance at the other clinical site does not interfere with the student's current clinical experience, the student will then need to reach out to the CCE and obtain permission to attend the other clinical site.** When reaching out to the CCE, the student should provide a rough weekly schedule of how often they are going to attend the additional site (include days and estimated hours). If the CCE is unaware of the attendance or did not approve the involvement at the other site(s) and finds out through the hour log on Typhon, the CCE reserves the right to delete those clinical hours.

## CLINICAL PLACEMENT PREREQUISITES

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

Submitted upon admission into the program:

1. Proof of immunization against measles, rubella, diphtheria, tetanus, and hepatitis B
2. Criminal Background Check
3. Signed confidentiality form and media release form
4. Current Certification in Basic Life Support by the American Heart Association

Prior to starting clinical experiences:

1. Current Certification in Basic Life Support by the American Heart Association
2. Completion of BBP, HIPAA and FERPA trainings
3. Signed Policies and Procedures Acknowledgment Form

**Other Clinical Site Requirements:** Some sites will require students to submit other documentation prior to beginning a clinical experience. These requirements are dependent on the clinical site, but may include drug screens, TB tests, immunizations, criminal background checks, etc. Inability to complete these requirements

prior to your start date will result in a delay in your start date and possible point penalties with clinical attendance in your respective clinical course.

Clinical sites have the autonomy to develop their own policies, in addition to the MSAT policies, for students to adhere to, which is reviewed during the Clinical Orientation process. At a minimum, students will follow the following MSAT program policies according to Standard 26 from the CAATE 2020 Professional Standards:

- **A mechanism by which clients/patients can differentiate students from credentialed providers:** Students are provided name tags at the beginning of the program. These should be worn at all times during the clinical experience to be able to differentiate from healthcare providers at the site.
- **A requirement for all students to have emergency cardiac care training before engaging in athletic training and supplemental clinical experiences:** Students are required to have emergency cardiac care (ECC) training prior to admission to the MSAT program and are responsible for renewing their ECC certification when applicable.
- **Blood-borne pathogen protection and exposure plan:** Students receive annual BBP training through the university. The same policy is reviewed by preceptors each year during annual preceptor training. MSAT policy documents are available on Typhon for the students and preceptors to access at any time. Each site is assessed by the CCE for appropriate BBP barriers and students review the locations of these during the clinical orientation.
- **Calibration and maintenance of equipment according to manufacturer guidelines:** The MSAT requires that all clinical sites must maintain therapeutic equipment according to manufacturer guidelines. This includes, but is not limited to, equipment calibration and safety checks. All clinical sites must provide annual proof of calibrations each year after their modalities have been calibrated, unless the site is third party accredited (e.g. hospital, sports medicine clinic, physician office). Proof of calibrations ideally comes in the form of a report from the modality calibration company. If a report is not available, a picture of the stickers on each modality is acceptable. Due to safety concerns, students will be removed from the clinical site if therapeutic equipment is not calibrated before the expiration date. Students may return to the site once the equipment is calibrated.
- **Sanitation precautions, including ability to clean hands before and after patient encounters:** During the annual site visit, the CCE verifies that sites have hand-washing stations and disinfectant available for the student to use during their clinical experiences. The location of these is reviewed with the student during the clinical orientation.

- **Venue-specific training expectations and venue-specific critical incident response procedures (for example, emergency action plans) that are immediately accessible to students in an emergency:**  
Each site must have an EAP for all venues and locations at the site that the ATS may be exposed to. The program will have a copy of these on file and each ATS must have these EAPs easily accessible in paper or electronic formats in the event of an emergency. The EAPs must be reviewed and discussed before the start of the rotation and recorded in the Clinical Orientation Checklist.

## CLINICAL HOUR REQUIREMENTS

Level	Semester	Clinical Course	Clinical Hours: Min/Max
1	Fall	KINE 5221	275/500
	Spring	KINE 5222	275/500
2	Summer	KINE 5306	360/600
	Fall	KINE 5224	275/500
	Spring	KINE 5520	550/850

## CLINICAL EDUCATION EXPERIENCE, ATTENDANCE, & TIME LOGS

### Clinical Hours:

Clinical Rotation Durations: Clinical rotations begin on the first day of class or on a day assigned by the CCE and end on the official last day of classes for the semester or an assigned date determined by the CCE; students are required to start within the first two days of the semester for long semesters (will vary based on immersion

days for each cohort). Students are not required to attend clinical during scheduled university breaks and holidays.

A minimum of 15 hours per week must be accrued by each student each week throughout the duration of the rotation. During semesters with full-time immersions, weekly hours are modified to mimic a “full-time” schedule (40 hours/week); these hours updates will be listed in each course’s syllabi. Further details of the student’s clinical schedule is agreed to by the student, Preceptor, and Coordinator of Clinical Education (CCE) in the Clinical Schedule Agreement document. If a student does not think they’ll get 15/40 hours in a week, they need to contact the CCE via email to make arrangements for other clinical experiences or gain approval from the CCE to log less than the minimum requirement for that week. Failure to complete 15/40 hours in a given week will result in a 1% deduction in the grade for this requirement. Multiple point deductions may occur in conjunction with multiple violations.

The maximum number of clinical hours per semester varies based on semester, length of clinical rotation, and amount of immersion included. A student may request permission from the CCE to exceed the maximum number of clinical hours. These requests will be handled on a case-by-case basis and current course grades will be highly considered when making this decision.

Students can attend other clinical sites to gain clinical experience, but it should not interfere with the schedule of the student’s current assigned clinical site. **Experiences that are obtained at another clinical affiliated site, other than the one a student is directly assigned to, need to be approved by the CCE with written or email verification.** Clinical hours not approved by the CCE are subject to being removed from the student’s log and not counted towards that week or semester total.

All clinical hours counted towards a semester’s total must be completed and submitted on Typhon by the last day of classes by 11:59PM. Failure to meet the semester minimum of hours by the last day of classes will result in the grade of an “incomplete” in the course, a deduction in 5% of the overall course grade, and will prohibit the student from progressing in the program until clinical hours are completed.

**Clinical Attendance:** Attendance at a clinical rotation is mandatory on required clinical days during all semesters and throughout the entirety of the full-time immersion period. Each student’s schedule will vary depending on their clinical assignment.

“Excused” absences are at the discretion of the preceptor and the CCE, and include, but are not limited to jury duty, an illness (accompanied by a doctor’s note), military service, and family emergencies. Any other absence,



or those that are not deemed “excused” by the preceptor, will be considered personal absences. Each student is limited to (2) personal absences per semester. If a personal absence or approved excused absence causes a student to be below the 15/40-hour minimum for that week, no deductions in the grade will occur if the CCE was informed of the absence.

**ALL absences on required clinical days that are both excused and personal, must be logged (1) as a day off time log on Typhon (see logging off days policy below), as well as (2) using the ‘MSAT Student Clinical Absence’ form.** The form should be submitted no less than 48 hours prior to the absence (unless an unexpected medical or family emergency arise). If a medical injury or illness occurs, the form should still be submitted when possible and an appropriate doctor’s note must be provided to the preceptor and CCE. The note must be signed by the healthcare provider treating the student and must include the student’s name, date of treatment, condition being treated/reason for absence, and all necessary contact information for the clinic and healthcare provider.

Loss of points will be due to: a student exceeds (2) personal absences; a student does not communicate with the preceptor and CCE about an absence prior to 48 hours; and other violations of this policy. For each violation to the clinical attendance policy, a student will lose 1% of this section of the clinical grade, up to a maximum of 5%. Multiple offenses may result in a Digression Report.

If a student or an instructor identifies that a student is experiencing academic struggles in a course, the student’s clinical schedule may be altered. The CCE and PD will help to determine the adjusted schedule. An agreement will be drafted by the CCE to determine the minimum hours, weekly schedule, etc. to ensure student success in the course(s).

**Time Logs:** Each student is to record his or her daily clinical hours using the Typhon software. Clinical hours must be recorded within 7 days of completion. Students who fail to log their time on required clinical days will receive a deduction in ½% for this requirement for each day that is not logged up to a maximum of 5%.

Falsifying clinical hour entries will result in disciplinary action.

*“Off Days”:*

It is recommended that students have one day off from clinical experiences per 7-day period. The student and preceptor should work together to determine an appropriate schedule for time off.

As indicated in the Clinical Attendance Policy above, students must submit the Typhon form when absent from the clinical site on a required clinical day. In addition, students must log “off” days in their time logs on Typhon when missing a required day (immersion days and Fridays). For each day off that is not approved by the CCE and/or not logged in Typhon, students will receive 1% deduction from the course grade, up to a maximum of 5%.

### **Logging Clinical Time:**

Time that **can** be logged:

- Anything involving your assigned site for that semester (patient care, administrative duties, etc.)
- Events at other affiliated sites – identified and approved by the CCE via email
- Events at UT-Arlington
- Standardized patient encounters
- Surgical observations
- Injury clinics (i.e. Fall Saturday AM clinics)

-Hours that **cannot** be logged:

*(It is highly recommended that ATS keep a personal log for their records and/or resume)*

- Travel time for an away trip
- Non-clinical activities with clinical site (i.e. field trip)
- Events at non-affiliated sites, with the absence of your preceptor
- Volunteer events (i.e. 3-day breast cancer walk, kid’s triathlon, etc)
- SEU’s
- Research time
- Internships arranged outside of affiliated sites

**\*\*If uncertain about an event, contact the CCE for clarification.**

## OUTSIDE EMPLOYMENT POLICY

The UTA MSAT program understands that some students must obtain a part-time job to fulfill financial responsibilities, but students must also meet the requirements of the MSAT program. Therefore, the athletic training student's didactic and clinical education experiences take precedence over any outside employment. Students can hold part-time jobs provided they do not interfere with didactic or clinical aspects of the program. A maximum of ten (10) hours per week is recommended. Clinical experiences may take place at any point during a given day, weekends included. Students are required to be at their clinical sites on designated clinical immersion days and on Fridays. Exceptions to this must be approved by both the preceptor and CCE. A student should not schedule outside work on clinical immersion days unless it does not interfere with any clinical responsibilities. Any issues with work interfering with clinical experiences will result in disciplinary action.

## CLINICAL EDUCATION PAPERWORK & REQUIREMENTS

### Overall Submission Guidelines

All documentation is to be submitted on Typhon or to the CCE in a timely manner. Documentation that is submitted late will result in a ½% deduction in the course grade for this requirement. Multiple late submissions may result in further disciplinary actions.

*All paperwork is submitted in 'My Evaluations & Surveys' through the Typhon Clinical Management System.*

<b>Students submit:</b>	<b>Preceptors submit:</b>
Start of Rotation Paperwork Midterm Evaluation of Clinical Preceptor Final Evaluation of Clinical Preceptor Clinical Assignment Evaluation	Midterm Evaluation of MSAT Student Final Evaluation of MSAT Student • Both forms have a Year 1 and Year 2 option; please complete accordingly

**\*\*Preceptors will have the same due dates as their assigned student(s)**

All forms must be submitted by 11:59PM on the designated date, unless otherwise specified.

**Start of Rotation Paperwork:** Per CAATE standards, orientations must occur before students can encounter patients at the site. This form must be submitted on Typhon no later than one week before the first day of a student's clinical rotation. Failure to do so may result in a delayed start and deduction in that portion of the course grade for this requirement.

Within the form is the Clinical Orientation Checklist, which contains the following information and is to be reviewed by the student and signed off by the preceptor prior to starting the rotation:

- Critical incident response procedures (for example, emergency action plans)
- Blood-borne pathogen exposure plan
- Communicable and infectious disease policies
- Documentation policies and procedures
- Patient privacy and confidentiality protections
- Plan for clients/patients to be able to differentiate practitioners from students (students must wear their name tag)

**Midterm and Final Evaluation:** The grades associated with these evaluations will be determined by the preceptor, based off the ATS' performance at the clinical site.

**CPR Renewal, BBP Training, etc.:** These requirements are the responsibility of the ATS. The ATS will not be able to attend the clinical site if these requirements are not completed or if these expire and this will result in a 2% deduction in the course grade for this requirement.

**Incomplete Paperwork:** Students are expected to turn-in fully completed paperwork (Typhon paperwork, clinical skills/proficiencies, etc). If paperwork is not complete upon submission, the instructor will return to the student for completion and a ½% grade deduction will occur.

## LOGGING OF REQUIRED CLINICAL SKILLS/CASE LOGS

### Case Logs

All patient encounters should be logged as a case log. To receive a grade of complete, the average number of case logs should correlate to an audit conducted by the CCE throughout the semester by speaking with individual preceptors about the number of patients seen each day/week. Students should ideally be logging a minimum of 10 case logs per week. Students will meet with the CCE at midterm to discuss case log progress. All case logs must be approved by the Preceptor(s) by the last day of the rotation. Students are encouraged to provide regular reminders of approval to their Preceptors. The CCE will send regular reminders as well, but it is ultimately the responsibility of the student throughout the rotation to remind their Preceptors to approve case logs.

## Clinical Proficiencies

The purpose of these clinical proficiencies is to give students intentional opportunities for patient encounters with live patients, while receiving in-depth feedback from their Preceptor to assess students' ability to grow in their evaluation and management skills. Students are required to complete a certain number (determine each semester) of clinical proficiencies in live, autonomous, direct patient care opportunities throughout their clinical rotation. These should be done in patient encounters where students have more time with the patient to gather information, complete a physical exam, and implement initial management and/or therapeutic rehab/interventions. Encounters with each patient may be over the course of several visits or days, so the excel form can be completed as the patient encounter progresses. Information about each evaluation should be documented in the spreadsheet that is shared with students and their Preceptors. Case logs must be logged for each encounter and case log ID # provided in the spreadsheet. Preceptors will provide a score for each skill completed during the comprehensive evaluation. If a skill is not completed, leave the score for that skill blank.

## CLINICAL SUPERVISION POLICY

While engaging in clinical education experiences, athletic training students are directedly supervised by a preceptor. During training for preceptors, the CCE emphasizes the importance of direct supervision and explains that this policy must be implemented at each clinical site for UTA to remain in compliance with the CAATE Standards and Guidelines. Specifically, the CCE reviews the policies, which state:

1. The preceptor will be on-site and can intervene on behalf of the athletic training student and the patient to provide an on-going and consistent clinical education
2. The preceptor will consistently interact with the athletic training student at the site of the clinical experience
3. There will be regular planned communication between the MSAT Program and the preceptor
4. The number of students assigned to a preceptor in the clinical experience component will be maintained at a ratio conducive to student learning. In addition,

**It is the student's responsibility to report occurrences of lack of supervision to the CCE ASAP!!!!**

**Unreported occurrences may result in disciplinary action.**

**Supervision within a Progression of Student Development:** Preceptors are instructed that clinical supervision provides a safe environment for students to apply their clinical skills and develop the necessary clinical decision-making and confidence required for success in the athletic training profession. As AT students progress in their level of knowledge and clinical skills, the level of clinical supervision provided by the preceptor adjusts accordingly. The level of supervision is based on each student's developmental level and each student's performance in their clinical education rotations. Following this model of clinical supervision, student's progress from a position of close supervision to one of "guided autonomy". This progression of clinical supervision requires that students actively engage in their clinical experience, and this is emphasized to each student each semester. Students are expected and instructed to be proactive in integrating their knowledge and skills learned in class/lab into day-to-day athletic training operations.

**Student Employment as a "First Aider" or "First Responder":** Rarely, students may be asked to provide first aid at an athletic event in the role of a "first aider" or "first responder", unsupervised by a licensed healthcare provider. Participating in these types of roles is forbidden by the MSAT program. Students risk being found guilty of practicing without a license and these roles violate CAATE Accreditation Standards regarding supervision.

## **CLINICAL EXPERIENCE DRESS CODE**

Please refer to the dress code policy on pages 14-15.

## **MISCELLANEOUS CLINICAL EXPERIENCE POLICIES**

**Transportation to Clinical Sites:** Students are responsible for all transportation to and from clinical sites. If an issue with transportation arises, keep the Preceptor(s) and CCE informed.

**Romantic Relationships:** Romantic relationships with high school students are prohibited and will result in termination from the program. Romantic relationships between ATS and athletes/patients are highly discouraged in any setting due to the potential conflict of interest. However, if an athletic training student does begin a relationship with a patient, coach, administrator or athlete (college age or older), the MSAT student shall notify the CCE **immediately**. Clinical reassignment may be possible to prevent a situation of a conflict of interest.

**Student Travel During Clinical Experiences:** All faculty within the MSAT program encourage the opportunity to travel as part of clinical experiences. In some instances, this may mean missing classes. Communication about travel must be made with each pertinent faculty member as early as possible and students must **request permission** to miss class for clinical experience travel. Faculty members reserve the right to not allow travel, especially if the student is missing a guest speaker, test, quiz, or other class assignment. Making up missed quizzes, assignments, etc. and staying up on materials missed due to travel are the student's responsibility and should be done **prior to the course absence**.

**Transportation of Patients:** Accompanying student-athletes to doctor's appointments, PT appointments, etc. can all be very valuable experiences. The MSAT encourages the ATS to take part in these experiences, however the ATS should never transport an athlete in their own personal vehicle. For personal liability purposes, the ATS should only transport athletes in the site/institution vehicle, which may require some additional driving requirements to be met. If the CCE becomes aware of transportation in personal vehicles, a warning will be given to the preceptor and ATS. If repeated occurrences happen, then the ATS may be removed from that clinical site and disciplinary actions may follow.

## **SUBSTANCE ABUSE POLICY**

The University of Texas at Arlington MSAT Program is committed to maintaining a safe, healthy, and productive learning environment for students, faculty, staff, preceptors, and our patients. Students must be able to perform with reasonable skill in a safe, secure, productive, and effective manner, and remain able to do so through the entire time they are a student at UTA.

In the clinical setting, students must be fit for duty and are expected to perform in a safe manner without signs of impairment. Impaired students are not fit for participating in clinical experiences and may pose significant health and safety risks to themselves and others. Any MSAT student who exhibits impaired behavior, based on the Impaired Observation Checklist (IOC) (appendix C), in the clinical setting, will be required to submit a drug screen. The required test is based on the suspected substance and may include blood or urine sample(s).

- A student who refuses or does not show up for the screening test for cause/impaired behavior will not be allowed to return to ANY clinical setting and will earn a failing grade in the clinical course.
- The student must complete the testing on the day of referral.

- The student tested for cause cannot return to clinical until results are returned.

If positive results are due to alcohol or substance abuse, the student must be evaluated by a qualified healthcare professional, follow the recommendation for treatment if applicable, receive the recommendation from the healthcare provider to return to clinical experiences, and provide documentation they are able to safely return to the program.

### Procedure

When a faculty member or preceptor personally observes or receives reliable information that a student may be impaired, the faculty member or preceptor will assess the student using the IOC (provided below). If IOC results confirm impairment, the student will be removed immediately from the clinical setting and will be required to submit the appropriate screening test (blood alcohol level when alcohol is suspected and 13 panel urine screen for other substances).

The student may **not** drive to the testing/screening center. They may call someone to transport to the testing/screening center or use a transportation system, such as a taxi or ride share service. The student is responsible for this transportation. Depending on the level of impairment, the student may be referred to the facility emergency department for evaluation and care.

The screening lab must adhere to the following:

- Maintain chain of custody,
- Confirm gas chromatography and mass spectrometry (GCMS). This is where they break down your sample and analyze it chemically to determine what is in it (confirmation of presumptive positive urine specimens),
- Initial screen must include split sampling method,
- Blood alcohol level must be drawn if alcohol involvement is suspected.

If a student exhibits behavior of impairment based on the IOC and refuses to complete the drug screen, the student will be ineligible to return to the clinical setting and will fail the clinical course. The student may not return to the clinical setting until results are received.

A student with a negative screening result may return to the clinical setting.



A student with a positive screening result must be evaluated by a qualified healthcare professional (psychiatric mental health provider or substance abuse provider), follow the recommendation for treatment if applicable, receive the recommendation from the healthcare provider to return to clinical experiences, and provide documentation they are able to safely return to clinical experiences. Upon return to clinical experiences, random drug screens will be conducted each semester.

Students must sign the [attestation verifying they will adhere to the substance abuse policy](#) before participating in clinical experiences.

### **Drug Screening**

Some affiliated sites (such as sports medicine clinics and hospitals) may require drug screening before the student can begin their rotation. The student is responsible for this cost. More details will be provided by the Coordinator of Clinical Education when applicable.

# **MASTER OF SCIENCE IN ATHLETIC TRAINING: APPENDICES**

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

**Purpose**

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

1. Comply with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard, 29 Code of Federal Regulations (CFR) 1910.1030.
2. Eliminate or minimize occupational exposure to blood or certain other body fluids.

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

**Definitions**

Reference: [OSHA](#)

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

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

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

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

**Personal Protection**

**A. Universal Precaution Procedures**

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

1. Treat all situations involving potential contact with blood, body fluids or medical waste with caution. Use Personal Protective Equipment (PPE) including gloves and micro-shields for CPR.
  - a. Gloves should be carried at all practice and game situations and are readily available in the Stadium Athletic Training Facility, College Park Center Athletic Training Facility, and the Athletic Training Classrooms.

- i. The gloves must be replaced if torn, punctured, contaminated, or if their ability to function as a barrier is compromised.
  - b. Pocket masks or micro-shields are in each athletic training kit and in the Stadium Athletic Training Facility and College Park Center. They are also located along with portable AED units.
2. Wash hands after contact with any bodily substance or articles contaminated with a bodily substance. Use liquid soap from a dispenser, not bar soap. Athletic trainers and athletic training students must have immediate access to cleaning supplies and must not be required to wait for appropriate washing.
3. When unanticipated exposure occurs, remove contaminated substances by avoiding contact with the outer surface and washing hands and other skin surfaces immediately and thoroughly. If splashed in eyes, nose or mouth, flush with water immediately.

## B. Disposal

1. A sharps box will be located in each athletic training facility for disposal of all blades, needles and glass products used for treatment of injuries of laboratory experiments. Following use, all needles will be placed in a sharps container without recapping or removing from the syringe. Scalpel blades will be removed with tweezers and discarded in a sharps box. The tweezers and scalpel handle will then be disinfected by procedure. Following injections by physicians, glass ampules will be discarded in a sharps box.
2. Blood contaminated soft goods (i.e., bandages, band aids, cotton tip applicators, gauze, towels, etc.) will be placed in biohazard bags/bins located in each athletic training facility. Bags are red and will be in an enclosed container marked with a Biohazard sticker. All used gloves should be placed in these containers
3. When sharps boxes or biohazard bags are full, it will be the responsibility of the athletic trainer in charge of the facility to contact the UTA Environmental Safety Office (PH: (817) 272-2185 Fax: (817) 272-2144, Email: [ehsafety@uta.edu](mailto:ehsafety@uta.edu)) for removal and disposal.

## C. Disinfection

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

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

#### D. Vaccination

1. All athletic training students need to obtain or provide proof of previous vaccination for the hepatitis B virus (HBV). Staff athletic trainers will be offered a vaccination for the hepatitis B virus (HBV) as per OSHA rules.
2. However, if an athletic training student declines vaccination, the student must sign a waiver form (Appendix B).

#### E. Training

1. Training will be conducted at the beginning of each academic year in August at the Athletic Training Program In-service. The program will be conducted by the PD, CCE, and/or Staff Athletic Trainers and will consist of demonstration of the above procedures and review of UTA policies.

#### F. Post Exposure Evaluation and Follow-Up

1. Should an exposure incident occur follow the UTA Exposure Control Policy. Also, contact your Preceptor and CCE to make them aware of the incident.

**EXPOSURE INCIDENT REPORT – Athletic Training Program**  
**Please Print**

Employee's Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Job Title: \_\_\_\_\_

Date of Exposure: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time of Exposure: \_\_\_\_AM\_\_PM\_\_

Hepatitis B Vaccination Status: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Describe what job duties you were performing when the exposure incident occurred:

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Describe the circumstances under which the exposure incident occurred:

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Name the body fluids, if any, that you were exposed to:

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Describe the route of exposure (mucosal contact, contact with non-intact skin, percutaneous):

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Describe any personal protective equipment (PPE) in use at time of exposure incident:

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Did PPE fail? \_\_\_\_\_ If yes, how?

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Identification of source individual(s) name(s):

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Other pertinent information:

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**Complete this form and return to Dr. Meredith Decker, Coordinator of Clinical Education, Master of Science in Athletic Training Program in PEB 112F (817) 272-6307. This record is to be kept for the duration of the individual's term at UTA plus seven (7) years.**

*APPENDIX B: Hepatitis B Vaccine Declination Form*

**Hepatitis B Vaccine Declination Form**  
**Please Print**

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

\_\_\_\_\_  
Athletic Training Student Signature

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



APPENDIX C: Impaired Observation Checklist (IOC)

**UNIVERSITY OF TEXAS AT ARLINGTON**  
**MASTER OF SCIENCE IN ATHLETIC TRAINING PROGRAM**  
**IMPAIRED OBSERVATION CHECKLIST (IOC)**  
**Please Print**

Student: \_\_\_\_\_ Student ID: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Observations/Assessment	Yes	No
<b>Smell</b> of alcohol or marijuana on breath or person		
<b>Speech:</b> Slurred, confused, fragmented, rapid, slow, unusually loud or soft (circle or highlight) all that apply)		
<b>Disorientation:</b> Is the student confused about where they are, what day it is, what time it is? Is the student forgetful? Decreased alertness? (circle or highlight all that apply)		
<b>Personality:</b> Significant change in personality such as mood swings, euphoria, depressions, abusive behavior, violence, secretiveness, insolence, insubordination, irritability, moodiness. Tendency to isolate self (circle or highlight all that apply)		
<b>Social Changes:</b> Avoids social gatherings, eats alone (describe)		
<b>Apparent inability to focus on tasks</b> (describe)		
<b>Shaking or trembling of hands</b>		
<b>Skin:</b> Pale, flushed, Excessive perspiration (circle or highlight all that apply)		
<b>Needle marks on arms, unusual sneezing or nasal congestion</b> (circle or highlight all that apply)		
<b>Eyes:</b> Bloodshot, dilated pupils, pinpoint pupils (circle or highlight all that apply)		
<b>Blank stare on expression</b>		
<b>Physical appearance:</b> Deteriorating and/or changes in appearance such as change in dress, unkempt appearance, flushed complexion (describe)		
<b>Energy:</b> Displays weariness, fatigue, exhaustion, excessive yawning, sudden or unpredictable change in energy level, unusually energetic (circle or highlight all that apply)		
<b>Class/Lab/Clinical Time:</b> A pattern of tardiness, prolonged breaks, unexplained departures from class, lab or clinical, disappearance from class, lab or clinical, excessive absenteeism, late assignments with elaborate excuses for not meeting deadlines, avoiding group work, unsafe clinical performance/placing patients/clients at risk, impaired judgment in the clinical area, deteriorating productivity (circle or highlight all that apply)		
<b>Student states consumption of alcohol or ingesting drugs,</b> including over-the-counter or prescription, that adversely affects the student's ability to practice athletic training or perform classroom and clinical duties with reasonable skill and safety		

<b>Careless performance of tasks</b> (describe)		
Additional comments:		

Based on my observations, I have a reasonable suspicion that \_\_\_\_\_ (student) may be impaired and could be a danger to self or others. I request further assessment and evaluation to determine the cause of the suspected impairment.

_____	_____	_____
Faculty/Preceptor name (printed)	Signature	Date

**To be completed by the student** to be referred (optional). Are you taking any medications, or is there any other information you believe might explain your behavior?

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