# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>TITLE</th>
<th>PAGE NUMBER(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td>Program Summary</td>
<td>5</td>
</tr>
<tr>
<td>Personnel</td>
<td>5</td>
</tr>
<tr>
<td>Mission Statements</td>
<td>6</td>
</tr>
<tr>
<td>Program Goals and Student Outcomes</td>
<td>7</td>
</tr>
<tr>
<td>Admissions</td>
<td>8-9</td>
</tr>
<tr>
<td>Additional Costs</td>
<td>9</td>
</tr>
<tr>
<td>Retention Policy</td>
<td>10</td>
</tr>
<tr>
<td>Graduation Requirements</td>
<td>11</td>
</tr>
<tr>
<td>Non-Discrimination</td>
<td>11</td>
</tr>
<tr>
<td>Academic Advising</td>
<td>12</td>
</tr>
<tr>
<td>ATS Conduct</td>
<td>12-16</td>
</tr>
<tr>
<td>Dress Code</td>
<td>16-17</td>
</tr>
<tr>
<td>Class Attendance</td>
<td>18</td>
</tr>
<tr>
<td>Student Healthcare/Communicable Disease Policy</td>
<td>18-19</td>
</tr>
<tr>
<td>Capstone Exam</td>
<td>19-21</td>
</tr>
<tr>
<td>BOC Exam and Texas Licensing</td>
<td>22</td>
</tr>
<tr>
<td>Simulation</td>
<td>22</td>
</tr>
<tr>
<td>Course Sequence</td>
<td>22</td>
</tr>
<tr>
<td>Academic Grievances</td>
<td>23</td>
</tr>
<tr>
<td>Clinical Education Experiences</td>
<td>25</td>
</tr>
<tr>
<td>Clinical Placement Prerequisites</td>
<td>26-28</td>
</tr>
<tr>
<td>Clinical Hour Requirements</td>
<td>29</td>
</tr>
<tr>
<td>Clinical Education Experience, Attendance, &amp; Time Logs</td>
<td>30-33</td>
</tr>
<tr>
<td>Outside Employment Policy</td>
<td>33</td>
</tr>
<tr>
<td>Clinical Education Paperwork &amp; Requirements</td>
<td>33-34</td>
</tr>
<tr>
<td>Logging of Clinical Skills</td>
<td>36</td>
</tr>
<tr>
<td>Clinical Supervision Policy</td>
<td>36-37</td>
</tr>
<tr>
<td>Miscellaneous Clinical Experience Policies</td>
<td>38</td>
</tr>
<tr>
<td>Substance Abuse Policy</td>
<td>38-40</td>
</tr>
<tr>
<td>Appendix A: BBP and Exposure Control Plan</td>
<td>42-46</td>
</tr>
<tr>
<td>Appendix B: Hepatitis B Vaccination Declination Form</td>
<td>47</td>
</tr>
<tr>
<td>Appendix C: Impaired Observation Checklist</td>
<td>48-49</td>
</tr>
</tbody>
</table>
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 UT Arlington MSAT should read and be familiar with all parts of this handbook.

The UT Arlington 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 UT Arlington 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**

<table>
<thead>
<tr>
<th>College of Nursing and Health Innovation</th>
<th>Dean: Elizabeth Merwin, PhD, RN, FAAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of Kinesiology</td>
<td>Associate Dean and Chair: David Keller, PhD</td>
</tr>
<tr>
<td></td>
<td>Administrative Assistants:</td>
</tr>
<tr>
<td></td>
<td>• Cindy Stringer</td>
</tr>
<tr>
<td></td>
<td>• Cynthia Ontiveros (MSAT)</td>
</tr>
<tr>
<td></td>
<td>• Mayra Martinez</td>
</tr>
<tr>
<td></td>
<td>• Ruth Griffin</td>
</tr>
<tr>
<td></td>
<td>• Jasmine Woods</td>
</tr>
<tr>
<td>Master of Science in Athletic Training</td>
<td>Program Director (PD): Laura Kunkel, EdD, LAT, ATC, PES</td>
</tr>
<tr>
<td></td>
<td>Coordinator of Clinical Education (CCE): Meredith Decker-Hamm, PhD, LAT, ATC, PES</td>
</tr>
<tr>
<td></td>
<td>Core Faculty:</td>
</tr>
<tr>
<td></td>
<td>• Cindy Trowbridge, PhD, LAT, ATC, CSCS (Director, Therapeutic Interventions Lab)</td>
</tr>
<tr>
<td></td>
<td>• Adam Annaccone, EdD, LAT, ATC, PES, CES (Director, Simulation)</td>
</tr>
</tbody>
</table>
MISSION STATEMENTS

University of Texas at Arlington

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

UTA College of Nursing and Health Innovation

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 providing educational advancement and excellence to students pursuing a career in athletic training. The program emphasizes critical inquiry, scientific theory, skill acquisition and application, and professional behaviors that advance health and the human condition across diverse populations of patients. Faculty and preceptor mentoring produce graduates that are competent, creative, and caring clinicians who enhance best-practice patient-centered healthcare, exercise sound judgement, and value lifelong learning.
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.**

### UT ARLINGTON ATHLETIC TRAINING PROGRAM GOALS

| Goal #1 | Provide didactic and clinical educational experiences that provide students with the knowledge, skills, and abilities needed to practice in a variety of practice settings and with a diverse population of patients. |
| Goal #2 | Recruit, admit, retain, and graduate individuals who meet or exceed the MSAT admissions standards and are committed to a career in athletic training. |
| Goal #3 | Faculty will continually develop contemporary expertise in routine areas of athletic training and will engage in scholarship. |

### UT ARLINGTON ATHLETIC TRAINING PROGRAM STUDENT OUTCOMES

| Goal #1 | Students will demonstrate the knowledge, skills, clinical abilities, and professional behaviors needed to practice with diverse populations of patients. |
| Goal #2 | Students and graduates will become competent clinicians who enhance best-practice healthcare, exercise sound judgement, and value lifelong learning. |
| Goal #3 | Students and graduates will become creative, caring clinicians who engage in patient-centered healthcare. |
MSAT ADMISSIONS PROCESS

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

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

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

Applicants who meet the following criteria are eligible to be admitted:

- Earned Bachelor’s degree, with an undergraduate cumulative GPA of 3.0, or a 3.0 GPA during the last 60 hours of undergraduate course work
- 50 hours of observation with an athletic trainer (LAT and/or ATC credential)
- Meet program technical standards for admission
- Measles, Mumps, and Rubella (MMR) vaccination (two doses)
- Hepatitis B vaccination (three doses)
- International applicants must meet the University’s English language test score requirements for graduate admission
- Required prerequisite courses
  *Prerequisite courses must have been completed with a grade of “C” or better and within the last 10 years.
- Anatomy and Physiology I
- Anatomy and Physiology II
- Functional Anatomy (may also be titled Applied Kinesiology, Kinesiology, or Biomechanics)
- Physiology of Exercise
- Nutrition
- Psychology
- Statistics or Research Design
- Biology (lecture and lab)
- Physics (lecture and lab) *Will accept PHYS 3360 from UTA students
- Chemistry (lecture and lab)
• Preferred prerequisite courses
  o Medical Terminology
  o Care and Prevention of Athletic Injuries

Criminal Background Check

• All students initially accepted for admission into the MSAT will be required to complete a criminal background check prior to final acceptance. Students who have a criminal record are encouraged to meet with the MSAT Program Director to discuss how this may affect their ability to become credentialed as an athletic trainer. Note: A form is sent via email from UT Arlington with instructions. Any applicant with a criminal background will be evaluated on a case-by-case basis by the program faculty. Prospective students should also consider the BOC certification exam eligibility criteria as it relates to candidates with felony or misdemeanor charges and convictions and Texas licensure eligibility for applicants with prior criminal convictions.

ADDITIONAL COSTS

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

See the MSAT website for more information.
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, he/she 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. Maintain a GPA of 3.0.
3. Adhere to all Athletic Training Policies and Procedures and standards/ethical codes identified in this document.
4. Gain clinical experiences working with all required patient populations and health conditions.
5. Meet all minimum clinical hour requirements per semester.
6. Complete all Year 1 and Year 2 required clinical skills
7. Pass the Capstone Exam with a score of a 75% or higher.

NOTE: The student is responsible for completing courses in 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).

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, appropriate disciplinary action will be taken by the MSAT faculty.
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

UT Arlington 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 UT Arlington 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 UT Arlington 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

UT Arlington Athletic Training Students are expected to:

1. Document clinical hours regularly by using Typhon and submit case logs associated with their clinical skills spreadsheets. 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 the sports medicine staff pertinent to athletic training (e.g. discuss management, rehab, taping, 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 UT Arlington MSAT dress code, be groomed, and dress professionally (clean and appropriate garments) at clinical sites, when attending continuing education programs, or representing the UT Arlington 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 or PEB 202.

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, and it is outside normal hours, then close the door and ensure that it is locked before exiting the building. Students also have swipe card access to PEB 303 and likewise are responsible for ensuring security by closing the door after vacating the room.

14. Athletic Training Students represent the UT Arlington MSAT. Any violation of the:

- UTA MSAT Student Handbook;
- applicable policies for students enforced by the University of Texas at Arlington, including the UT Arlington 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
University of Texas at Arlington Honor Code

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

I promise that I will submit only work that I personally create or that I contribute to group collaborations, and I will appropriately reference any work from other sources. I will follow the highest standards of integrity and uphold the spirit of the Honor Code.” (Source: 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: jeans, shorts, leggings, t-shirts
Business Casual: khakis, slacks, golf shirts, sweaters
Business: suits, dresses

- 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, or engaged in simulation, business or business casual dress is expected
• In all cases in which students are representing the MSAT program:
  o Clothing should fit appropriately, be clean, wrinkle-free and without holes or frayed areas. Clothing which is too revealing, suggestive, or tight fitting is not acceptable.
  o Shoes should be kept clean, in good repair, and appropriate.
  o Personal cleanliness/hygiene must reflect professional standards (clean and neat).
  o Hair is to be clean, neatly arranged and should not interfere with clinical practicum functions.
  o Face should be shaved or mustache/beards/sideburns, etc., if worn, are to be neatly trimmed, clean, and appropriate for business appearance.

• During clinical experiences:
  o Students should dress in a manner benefitting professionals. We strongly encourage students to dress in business casual while engaging in clinical experience.
  o 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 the UTA clothes.
  o Students should not wear clothing representing other schools, sites, or programs unless assigned to those sites (i.e., SMU clothes are acceptable at SMU).
  o Students are expected to wear their nametags at all times. 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).
  o Closed-toed shoes must be worn at all times.
  o Selection of jewelry for clinical experiences should reflect a concern for professionalism, safety and infection control precautions.
  o 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.
  o Men’s and women’s 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. A student’s grade will be dropped by one letter grade if they have two or more unexcused absences. Refer to the policy regarding travel with teams on page 38 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.
The UT Arlington MSAT follows those safety policies developed by the UTA Office of Environmental Safety. Specifically, the UT Arlington BBP Exposure Control Plan and Biological Safety Procedure.

**CAPSTONE EXAM REQUIREMENT**

**Overview:** The Capstone exam is a program and graduation requirement, as well as a course requirement in KINE 5224 and 5225 (see below for breakdown in each course).

**KINE 5224 Requirements**

The Capstone exam will be taken during the Fall of Year 2 within the KINE 5224 course. Students must score >75% to have passed the exam. There will not be any rounding up of final grades on the exam. Capstone requirements continue into the Spring of Year 2, within the KINE 5225 course, and are based on the status of a passing or failing exam grade.

**KINE 5225 Requirements**

**For those students that did pass the capstone exam in the Fall semester**

**Must be done before getting approval from Dr. Kunkel to take the BOC**

1. Review the capstone exam
2. Identify personal weaknesses, aka “themes” missed
3. Create a self-analysis for all domains
   a. Prioritize domains from weakest to highest
   b. Include missed topics or themes
   c. Identify weakness in answering questions (not content related)
4. Come up with a plan of action to address these areas in need of further review
   a. Submit plan to Dr. Decker for review (the plan will be part of a grade for KINE 5225)
   b. Once the plan is received, Dr. Decker will notify Dr. Kunkel so she can approve the BOC application to be moved forward when it is submitted by each individual student

**For those students who did not pass the capstone exam in the Fall semester**

Students will have to undergo structured remediation for all domains below 75% within the Capstone exam. Students can begin remediation at the end of the Fall semester, but a majority of the remediation process will
take place in the Spring semester. Approval to take the BOC will not be given until the Capstone is passed.

The January/February BOC test window will not be available for students that did not pass the Fall Capstone exam.

For the structured Remediation, the following steps MUST be completed in order:

1. Review the capstone exam
2. Develop a self-analysis related to your strengths and weaknesses in each domain below a 75% (this should not be solely focused around the capstone exam, but should encompass the whole domain)
   a. Review your self-assessment from KINE 5225
   b. Identify personal areas of weakness (themes; content; anatomy, etc…)
   c. Prioritize domains from weakest to highest. Include missed topics or themes. Identify weakness in answering different question types from the capstone (not content related).
3. Schedule an appointment with each designated faculty member for each domain below a 75%.
   a. Suggest a meeting time and be prepared to meet for 30 minutes to 1 hour. (This is not a drop-in appointment).
4. Bring completed self-analysis & remediation packet
5. Complete remediation plan including study plan and plan potential remediation quiz dates with each faculty member.
6. Carry out your study plan for each capstone domain
7. Schedule remediation quiz(zes) based on your readiness to complete capstone domain by passing each quiz with greater than 80%. In order to take a domain quiz, you must complete any work assigned by the faculty member.
   a. If a remediation quiz is not passed, the student must reattempt the quizzes until an 80% is reached.
   If a quiz is not passed, the student cannot take a retake quiz any earlier than one calendar day after the failed attempt. Ultimately, the retake timeline of a quiz is at the discretion of the faculty member overseeing the domain.
8. Once the full remediation plan is completed (each domain has been passed), submit the packet to Dr. Decker for review (the plan will be part of a grade for KINE 5225).
9. Schedule capstone retake on or before March 30th
   a. There must be at least five (5) days between passing the last quiz and taking the capstone. This is done to ensure general study time for the capstone exam.
b. Therefore, if you are still taking remediation quizzes for a capstone domain the week prior to March 30th; you MUST consider that you may not pass the quiz and you may NOT be allowed to retake and execute a passing score on the quiz within the time frame required to arrange for a time to complete your capstone retake on or before March 30th.

c. See results related to your completion of Capstone B
   i. *Failure to take Capstone B
   ii. **Not passing Capstone B

*Failure to take the Capstone B exam on or before March 30th will result in a zero for Capstone B in KINE 5225. The consequences of a zero are quite serious as it can drop your total grade below a C in KINE 5225, which is considered a non-passing grade.

**If you do not pass Capstone B with a score of >75%, you will need to attempt Capstone C on or before the last day of spring classes (usually the first week of May). Failure to pass Capstone C with a score of >75%, will result in a grade of an “I” for KINE 5225.

1. Failure of capstone B results in your repeating the Structured Remediation described above.
   Scheduling of the capstone will still only occur after successful completion of all remediation quizzes and faculty member approval.
      a. Once the capstone has been successfully completed (a score of >75%), the grade in KINE 5225 will be changed from and “I” to the letter grade the student earned. However, the ATS will not be graduating with their classmates and their graduation will be delayed until August or December. Failure to take or pass the capstone within a year will result in the grade in KINE 5225 changing to an “F”, which signifies that the ATS has NOT completed the MS in Athletic Training.
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 standardized patient (SP) encounters. The SP is an extended performance assessment where students interact with patients in an unstructured environment. Students are not given specific instructions in the SP format. 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 UT Arlington 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. 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

Finally, students will need to complete all required clinical skills as “performed” via case log submissions to complete the MSAT program.

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. Students will need to reach out to the CCE if they need to simulate any required skills during their Year 1 or Year 2 clinical experiences. Simulation should not exceed more than 25% of each year’s required clinical skills. Preceptors may simulate skills with students, as long as the student has received approval from the CCE to for simulation.
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 UT Arlington athletic training facilities or other clinical settings. These experiences are designed to give you additional opportunities for experiential learning and will provide a great opportunity to gain additional experiences toward the clinical hour requirement. Based on the number of events hosted by UT-Arlington each year, the CCE will determine and announce how many events are required each semester. This requirement constitutes a portion of the student’s grade for each clinical practicum course.

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

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, flu shots, 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 complete training during the summer of their first year, before they begin their first clinical experience. This allows for the students to be adequately certified throughout the duration of the program.

- **Blood-borne pathogen protection and exposure plan:** Students receive annual BBP training through the university, as well as a review of the MSAT policies at each fall in-service. 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 point. 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 ATP 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

## CLINICAL HOUR REQUIREMENTS

<table>
<thead>
<tr>
<th>Level</th>
<th>Semester</th>
<th>Clinical Course</th>
<th>Clinical Hours: Min/Max</th>
<th>Clinical Experiences</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Summer</td>
<td>KINE 5120</td>
<td>50/100</td>
<td>Three clinical experiences will occur throughout the first year and may include a variety of the following settings: 1. Collegiate/University 2. Secondary School 3. Sports Medicine Rehabilitation Clinic 4. Physician Clinic 5. Pro/Semi-Pro Sports 6. Outreach Settings (2-week immersion at first assigned rotation in Summer)</td>
</tr>
<tr>
<td></td>
<td>Fall</td>
<td>KINE 5221</td>
<td>275/500</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Spring</td>
<td>KINE 5222</td>
<td>275/500</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Summer</td>
<td>KINE 5223</td>
<td>200/400</td>
<td>Clinical experiences may be on or off campus and will satisfy the needs to meet CAATE requirements. Career specific assignments are ideal at this time if all CAATE requirements are met. (5-week full-time immersion throughout the summer semester; 6-7-week full-time immersion period will occur in the Spring)</td>
</tr>
<tr>
<td></td>
<td>Fall</td>
<td>KINE 5224</td>
<td>275/500</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Spring</td>
<td>KINE 5225</td>
<td>365/600</td>
<td></td>
</tr>
</tbody>
</table>

Clinical Immersion Periods: Students will have a minimum of 5-weeks in a full-time immersive rotation during the summer and spring of Year 2.
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).

A minimum of 15 hours per week throughout the duration of the semester 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; 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 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 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 clinical immersion days and throughout the entirety of the full-time immersion period. Each student’s schedule will vary depending on their clinical assignment. Absences at a clinical site will be treated in the same way as they are for missing class.

“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-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. If a long-term medical illness or injury arises that will result in a prolonged period of absences, more than a day, a doctor’s note will need to be provided to the CCE explaining the length of time the student is expected to be absent.

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”:

All students must receive one day off per 7-day period, not to include class days. This means students must have one day completely off from class and clinical experiences. The student and preceptor should work together to determine the most appropriate day. The day off does not have to be the same day each 7 days.

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
- 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 UT Arlington 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 experience takes 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.

*Forms due one week prior to the start of a rotation:*

• Start of Rotation Paperwork

Forms due at the mid-point of a clinical rotation (dates TBD based on clinical assignment):

• Midterm Evaluation of Preceptor
Forms due at the end of a clinical rotation (due by the last day of the assigned clinical rotation):

- Final Evaluation of Preceptor
- Clinical Assignment Evaluation

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 starte and deduction in that portion of the course grade for this requirement.

Within this 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 on 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 (schedule agreements, orientation checklists, CIPs, etc). If paperwork is not complete upon submission, the instructor will return to the student for completion and a $\frac{1}{2}\%$ grade deduction will occur.
LOGGING OF REQUIRED CLINICAL SKILLS/CASE LOGS

Clinical skills listed in the Year 1 and Year 2 Skills Spreadsheet and subsequently on Typhon are the skills needed to accomplish over the entire year (summer, fall, and spring). There is a “number required to complete” for each skill and this is how many times students will need to perform that skill autonomously over this year period. There is not currently a semester requirement for number of skills to complete in the summer and fall, but we encourage that you accomplish as many as you can! You will need to hit the “number required to complete” for each skill by the end of the spring semester to graduate. So, moral of the story, do not save yourself a mountain of skills to complete in your last semester.

Logging Skills

Case logs are the primary way you will log these skills. Each skill has a specific procedure/skill check box for you to use when logging these encounters, but it is also encouraged that you use the Clinical Notes box to elaborate on the patient encounter. This will help your Preceptor to identify the patient you were working with since you cannot log any HIPAA identifying information. You will only be required to log case logs relative to these skills. A specific number of case logs per month are no longer a requirement per semester. There is still a 7-day period to log case logs, so make sure you are staying on top of these skills.

All skills must be completed on direct, live patient care. Simulations with your Preceptors are not acceptable for these clinical skills to meet the number required.

The spreadsheet is a comprehensive, easy to access list of all the skills for your reference. It is also for you to track the skills you complete and when. You will not need to submit the spreadsheet. A full list of skills can also be found on the right side of the home page on Typhon (purple circle in image below).

Other means of tracking what you have accomplished are through the Procedures/Skills Totals on the home page of Typhon. This is what the program will use to track your skills. The critical procedures and skills are the ones in bold and this matches what is in your spreadsheet. The minimum number may vary from the spreadsheet because that includes Year 1 skills as well. You are only responsible for the number in your spreadsheet, so please use that document as your reference.
Approval of Skills

Skills will need to be approved by your Preceptor to count towards your “number required to complete.” Approval of case logs = acknowledgement that this patient encounter took place and all procedures/skills listed were completed as part of the encounter. This is equivalent to how they used to sign off on your CSAs for it to count towards the clinical requirement.

Preceptors previously had to approve case logs, but now it is a hard requirement for these skills to count. The CCE will send regular reminders as well, but it is ultimately the responsibility of the student throughout the rotation.

CLINICAL SUPERVISION POLICY

While engaging in clinical education experiences, athletic training students are directly 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 UT Arlington 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 16-17.

MISCELLANEOUS CLINICAL EXPERIENCE POLICIES

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 at 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
APPENDIX A: BBP and Exposure Control Plan

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

Purpose

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

6. 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 recappping 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 UT Arlington Environmental Safety Office (PH: (817) 272-2185 Fax: (817) 272-2144, Email: ehsafety@uta.edu) for removal and disposal.

C. Disinfection

1. Tables and work areas will be disinfected with medical grade cleaning solution rated to eliminate blood-borne pathogens (i.e., Iso-Quin or Cavicide) at the end of each treatment session and at the end of the working day. Use PPE while cleaning.

   i. For specific spills of bloody fluids, the medical grade solution will be placed on the area and allowed to sit for 10 minutes. The fluid will then be absorbed using paper towels. The person performing this duty will wear gloves. The gloves and towel(s) will then be placed in the Biohazard container.
2. Instruments will be disinfected by the following procedures. Following use instrument will be placed in the designated disinfection tray. At the end of the day all used instruments will be soaked thoroughly, rinsed and the instruments then placed back into the original instrument tray.

D. Vaccination

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

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

E. Training

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

F. Post Exposure Evaluation and Follow-Up

1. Should an exposure incident occur follow the UTA Exposure Control Policy. Also, contact your 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:
________________________________________________________________________
________________________________________________________________________

Describe the circumstances under which the exposure incident occurred:
________________________________________________________________________
________________________________________________________________________

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

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

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

Did PPE fail? _____________  If yes, how?
________________________________________________________________________
Identification of source individual(s) name(s):

__________________________________________________________________________________________

Other pertinent information:

__________________________________________________________________________________________

Complete this form and return to Dr. Meredith Decker-Hamm, 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 UT Arlington plus seven (7) years.
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: _______________________

<table>
<thead>
<tr>
<th>Observations/Assessment</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Smell</strong> of alcohol or marijuana on breath or person</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Speech:</strong> Slurred, confused, fragmented, rapid, slow, unusually loud or soft</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(circle or highlight all that apply)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Disorientation:</strong> 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)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Personality:</strong> 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)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Social Changes:</strong> Avoids social gatherings, eats alone (describe)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Apparent inability to focus on tasks</strong> (describe)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Shaking or trembling of hands</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Skin:</strong> Pale, flushed, Excessive perspiration (circle or highlight all that apply)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Needle marks on arms, unusual sneezing or nasal congestion</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(circle or highlight all that apply)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Eyes:</strong> Bloodshot, dilated pupils, pinpoint pupils (circle or highlight all that apply)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Blank stare on expression</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Physical appearance:</strong> Deteriorating and/or changes in appearance such as change in dress, unkempt appearance, flushed complexion (describe)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Energy:</strong> Displays weariness, fatigue, exhaustion, excessive yawning, sudden or unpredictable change in energy level, unusually energetic (circle or highlight all that apply)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Class/Lab/Clinical Time:</strong> 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)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Student states consumption of alcohol or ingesting drugs</strong>, 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</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

48
<table>
<thead>
<tr>
<th><strong>Careless performance of tasks</strong> (describe)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Additional comments:</strong></td>
</tr>
</tbody>
</table>

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.

________________________________________  Signature  ________________________________  Date

Faculty/Preceptor name (printed)  

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?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________