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About this Handbook

This handbook is designed to assist students as they progress through the Athletic Training Program (AT Program) at Ball State University. It is a centralized location for important information relative to the AT Program. Furthermore, this handbook is designed to assist faculty, staff, and preceptors in the education, guidance, and experiences of the students. Important policies, guidelines, and resources are presented.

Once admitted in the AT Program, students are responsible for the information contained in this handbook, and will sign the Ball State University Athletic Training Program Handbook Acknowledgement (Appendix A). Students are encouraged to read it and keep it as a reference while an athletic training student at Ball State University. Every fall, students will be required to take and pass (at least 80%) a quiz via Canvas regarding the content of this handbook. This information is an adjunct to, not a replacement for, the Ball State University Undergraduate Catalog and the Code of Student Rights and Responsibilities. Additional information is available on the university’s website at www.bsu.edu or the Athletic Training Program’s website at www.bsu.edu/athletictraining.

General Information about the Program

The Athletic Training Program at Ball State University blends both coursework and clinical education to develop a well-rounded entry-level certified athletic trainer (ATC). Ball State University has produced many prominent alumni who are currently employed in the high school, sports medicine clinic, college, and professional sports settings. In addition, many students have also become physical therapists, physician assistants and physicians. The program strives to continue this tradition.

The Ball State University Athletic Training Program was one of the first educational programs to receive National Athletic Trainers’ Association (NATA) approval as it became an undergraduate minor in 1971. The program has either been approved or accredited since that time. The University has remained strongly committed to maintaining and improving this program as demonstrated by the implementation of the Athletic Training Major in 1987. The major develops the knowledge, skills, and professional attitudes/behaviors necessary for the entry-level athletic trainer. The academic faculty and preceptors continually strive to provide the students with the most current evidence-based clinical guidelines through attendance at workshops and conferences, and through conducting original research.

The program is currently accredited by the Commission on the Accreditation of Athletic Training Education (CAATE). The CAATE accredits programs that prepare athletic training professionals. Accreditation is one step in a process that is meant to ensure a supply of qualified athletic training health care professionals. A program is accredited when it meets the standards established by the CAATE. The standards constitute the minimum requirements to which an accredited program is held accountable. For additional information about the accreditation of athletic training programs, please visit www.caate.net.

Mission of Ball State University

As a public research university, we focus on students and high-quality, relevant educational outcomes. Disciplinary knowledge is integrated with application. We do this in a manner that fundamentally changes students, researchers, and our external partners, who look to the university for guidance. We transform information into knowledge, knowledge into judgment, and judgment into action that addresses complex problems.

Mission of the School of Kinesiology

As a leader in professional preparation, scientific inquiry and applied technology, the School of Kinesiology will provide high-quality educational experiences for our students, contribute to the scholarly advancement of our academic disciplines, and serve our professional societies and the community at-large.

Mission of the Ball State University Athletic Training Program

The mission of the Ball State University Athletic Training Program is to provide quality education which will create life-long learners who are committed to delivering high-quality patient-centered care within an interprofessional health care team. We aspire to develop students who are dedicated to maintaining involvement within the profession through clinical practice and service.
Program Goals and Objectives

Goal #1: Students utilize evidence-based decision-making to answer clinical questions and provide patient-centered care.

Objectives:
1. Develop appropriate clinical questions based on patient cases.
2. Demonstrate competency in searching the literature for current evidence.
3. Demonstrate competency in appraising the available literature.
4. Apply the available evidence and patient goals/values to implement safe and effective clinical practices.
5. Incorporate patient-oriented outcome measures to evaluate the quality of the care provided.

Goal #2: Students demonstrate competence in athletic training knowledge and clinical skills to provide the best possible patient care.

Objectives:
1. Recognize the signs and symptoms of emergency medical conditions and demonstrate appropriate management of emergency conditions.
2. Identify signs and symptoms of common injuries and illnesses.
3. Demonstrate competency in the clinical evaluation of common injuries and illnesses.
4. Prescribe appropriate therapeutic interventions based on the results of the clinical examination.
5. Identify appropriate measures to be taken and apply the skills necessary to prevent injuries and illnesses.
6. Employ appropriate strategies to maintain medical records.
7. Describe appropriate policies and procedures to implement to prevent the incidence and/or severity of injuries.

Goal #3: Students promote themselves and the field of athletic training through professional and community involvement.

Objectives:
1. Utilize appropriate terminology when in the role of a health care provider.
2. Support professional development and networking through attendance at professional meetings.
3. Recognize the importance of professional membership.
4. Identify the value of community and/or volunteer service through participation.

Goal #4: Students develop the interpersonal skills needed to communicate and collaborate within an interprofessional health care team.

Objectives:
1. Demonstrate appropriate communication, through written and verbal strategies, with physicians, emergency personnel, and other health care professionals.
2. Demonstrate appropriate communication, through written and verbal strategies, with patients, coaches, parents, and administrators.
3. Recognize when referral to appropriate professional personnel is necessary, and develop an interprofessional care plan.
4. Demonstrate competence in the ability to disseminate scientific research through written and oral work.

Goal #5: Students model professional and ethical behaviors when representing themselves as a health care professional.

Objectives:
1. Demonstrate knowledge of and comply with the National Athletic Trainers’ Association Code of Ethics when engaging in clinical practice.
2. Demonstrate knowledge of and comply with the policies and procedures contained within the Ball State University Athletic Training Handbook.
3. Demonstrate knowledge of and comply with the Board of Certification Standards of Professional Practice.
4. Demonstrate knowledge with continuing education requirements in order to practice as an athletic trainer.
Foundational Behaviors of Professional Practice

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

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

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

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

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

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

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

Professionalism
- Advocate for the profession.
- Demonstrate honesty and integrity.
- Exhibit compassion and empathy.
- Demonstrate effective interpersonal communication skills.
Overview of Classroom and Clinical Experiences

A strong emphasis is placed on the knowledge learned in the classroom and laboratory. Students are expected to utilize newly acquired knowledge to practice and enhance their clinical skills. Clinical education experiences challenge the student to develop and apply the knowledge and clinical skills learned in the classroom. Clinical education addresses the continuum of care that prepares the student to function in a variety of patient care settings, working with patients engaged in a wide range of activities, and managing injuries/conditions described in the athletic training knowledge, skills, Role Delineation Study/Practice Analysis, and standards of practice delineated for an athletic trainer in the profession. Clinical experiences are designed to expose students to the following areas: individual and team sports, sports requiring equipment (e.g., helmet and shoulder pads), patients of different sexes, non-sport patient populations (e.g., outpatient clinic), and a variety of conditions other than orthopedics (e.g., primary care). Settings for these clinical experiences range from BSU intercollegiate athletics, area high schools, area colleges, clinics and hospitals, the BSU Health Center, IU rehabilitation, and a sports performance center. The classroom and clinical education experiences are vital in preparing the student for employment in a variety of settings.

Overview of Clinical Integration Proficiency (CIP) Manual

Students in the BSU Athletic Training Program must perform a multitude of clinical skills and clinical integration proficiencies (CIPs) while in the program. The clinical skills are first learned, performed, and evaluated in the classroom and/or laboratory setting. Once the student has practiced and successfully completed the skills through formal evaluation in the classroom/laboratory, they will be able to perform these skills while engaging in clinical education. CIPs represent the synthesis and integration of knowledge, skills, and clinical decision-making into actual patient care.

The Clinical Integration Proficiency (CIP) Manual contains the skills and tasks that must be completed by the student prior to graduation. These items are designed to be completed while students are engaged in clinical education, and should be performed on actual patients whenever possible. These skills and proficiencies will be evaluated for mastery by the preceptor, and will include the incorporation of evidence-based practice and the assessment of Foundational Behaviors.

Completion of certain CIPs will be required every semester that the student is enrolled in a clinical course, and the clinical education coordinator will oversee the process. In most cases, assessment of CIPs should occur when the student is engaged in real patient care and may be necessarily assessed over multiple interactions with the same patient. Upon graduation, at least 75% of all CIPs should be performed “Live” (not simulated), so the performance of CIPs (live versus simulated) will be monitored on a semester-by-semester basis. In a few cases, assessment may require simulated scenarios, as certain circumstances may occur rarely but are nevertheless important to the well-prepared practitioner. If a student performs a CIP, but it was not at the level of mastery, the student will be required to repeat that task in order to meet the requirements for successful completion of the clinical course and/or graduation. Completion and mastery of all items contained in the manual must be demonstrated prior to graduation.

Athletic Training Program Application Procedures

*The athletic training program is no longer accepting students into the undergraduate degree program. We will be teaching out the undergraduate curriculum and plan to start Master’s degree program in the summer of 2020.

The Ball State University Athletic Training Program has selective admission requirements. The pre-professional program begins in the fall or spring semester of the freshman year with formal application to the professional program due in the spring application cycle. Transfer students, BSU students who have earned at least 30 credits, and students not admitted in the spring semester may apply during the fall application cycle. Decisions are made by the Athletic Training Program Selection Committee before the end of registration for the following semester.

Students must meet the following requirements to be considered for admission into the Athletic Training Professional Program:

- Formal letter of application
- Completion of the Ball State University Athletic Training Program Application and all related documents. This includes the essay questions, Mid-Term Grade Report, Confidential Recommendation Waiver, and Clinical Education Statement of Understanding. Please refer to
Completion of AT 196, AT 240, and AQUA 260 (with a grade of no less than B-). Completion of ANAT 201 (with a grade of no less than C). These courses must be completed or in progress at the time of application.

Students must have valid emergency cardiac care certification upon entry into the professional phase of the program.

Students must complete one academic year (two semesters) at Ball State (one semester for transfer students) with a minimum overall grade-point average of 2.75.

Copy of all official transcripts.

Minimum of 25 hours of athletic training directed observation during the semester in which the application is submitted, with a minimum of 50 directed observation hours completed at the time of program interview. These hours are initially coordinated through AT 196.

Students must complete one academic year (two semesters) at Ball State (one semester for transfer students) with a minimum overall grade-point average of 2.75.

Copy of all official transcripts.

Minimum of 25 hours of athletic training directed observation during the semester in which the application is submitted, with a minimum of 50 directed observation hours completed at the time of program interview. These hours are initially coordinated through AT 196.

Two letters of recommendation (from individuals who are not BSU faculty/staff).

Pre-Professional Student Evaluation Form (completed BSU preceptors).

Interview with the Athletic Training Program Selection Committee.

Once admitted to the program, and prior to beginning the professional phase of the program, students are required to obtain a physical examination from the Health Center (or another provider) and submit the “Medical Examination Verification” form which includes immunization records. Students must have (or be in the process of receiving) the immunizations recommended by the United States Centers for Disease Control and Prevention for Healthcare Workers. This includes: Measles, Mumps, and Rubella (MMR), Varicella, Tetanus, Diphtheria, Pertussis (Tdap), and Hepatitis B. Students must meet able to meet the technical standards set forth by the Ball State University Athletic Training Program (Appendix B). The “Medical Examination Verification” document also includes the “Technical Standards” form, which must be read and signed by both the student and a physician.

Transfer Students

*The athletic training program is no longer accepting students into the undergraduate degree program. We will be teaching out the undergraduate curriculum and plan to start Master’s degree program in the summer of 2020.

Transfer students (students who have earned at least 30 credits at another institution) must complete one semester of Ball State University residency during which time they may apply to the program if eligible. Transfer students must meet the same program admission criteria as stated above (See Athletic Training Program Application Procedures for details). All athletic training major-required courses transferred will be evaluated by the Program Director to determine specific course equivalency. Generally, transferred athletic training courses will not meet a specific athletic training course requirement at Ball State University since there is a great degree of variability amongst course content from institution to institution. However, these courses will count as general elective hours toward the total hours (120 hours) required for graduation. In order to meet all program requirements, the transfer student must plan to spend a minimum of 5 semesters enrolled in the athletic training professional program once admitted.

Criteria for Retention

Once admitted into the athletic training program, the students' academic and clinical progress will be evaluated each semester. The student who continues to demonstrate satisfactory academic and clinical progress in the program will continue to the next semester. If an unsatisfactory report in either the clinical or academic aspects is noted, the student will be placed on probation for one semester to remedy the deficiencies. If these deficiencies are not corrected, the student may be dismissed from the athletic training program. In this case, students will be removed or prevented from taking athletic training-caption courses as well as removed or prevented from engaging in clinical education. This decision is made by the Program Director in conjunction with the Retention Committee (consists of those same faculty/staff on the Athletic Training Selection Committee). Actions on behalf of the Retention Committee will documented and discussed with the student.

If a student is found to be in violation of a Ball State University Athletic Training Program Handbook policy, the NATA Code of Ethics, or the BOC Standards of Professional Practice, if the student demonstrates academic dishonesty or professional misconduct, the situation will be reviewed with the Retention Committee and appropriate actions (warning,
probation, dismissal from program) will be taken. Depending on the committee’s decision, student may be removed or prevented from taking athletic training-caption courses as well as removed or prevented from engaging in clinical education. Actions on behalf of the Retention Committee will documented and discussed with the student.

Students who withdraw from the athletic training program will need to re-apply to be re-admitted. On an individual basis, the written application materials to be submitted may be slightly modified (as approved by Athletic Training Program Selection Committee).

The following guidelines will be used to evaluate each student at the end of each semester in order to remain in good standing in the athletic training program:

1. Must satisfy (with or without accommodation) the mental, cognitive, emotional, and physical technical standards involved in completing the requirements for program completion. See Appendix B for the Ball State University Athletic Training Program Technical Standards.

2. Students must maintain active student membership in the National Athletic Trainers’ Association.

3. Must maintain a minimum overall grade point average of 2.75 with no semester lower than a 2.5. A student dropping below this mark will be placed on probation for one semester. Failure to meet this standard after one semester on probation may result in dismissal from the athletic training program.

4. Must maintain a minimum grade point average of 2.75 in the Athletic Training Program (including all major-required courses).

5. Students must earn a “C” or better in all athletic training major courses. Any student who receives a grade lower than a “C” in any athletic training course will be required to retake the course.

6. Students must complete, at the level of mastery, the designated number of clinical integration proficiencies (CIPs) every semester contained in the Clinical Integration Proficiency Manual and specified by the student’s Clinical Education in Athletic Training course syllabus. If a student completes a CIP, but fails to perform at the level of mastery, the student is required to repeat and master that CIP within that semester. If a student fails to complete the designated number of CIPs performed at the level of mastery for a given Clinical Education in Athletic Training course, the student will received a grade penalty in the course and be placed on probation in the program. The student will be required to perform the deficient CIP(s) at the level of mastery in the following semester. Failure to do so will result in dismissal from the program.

7. Successful completion (at least 80%) of annual OSHA Bloodborne Pathogen Training, HIPAA training, and the Ball State University Athletic Training Program Handbook Quiz prior to engaging in clinical education.

8. Maintain current certification in emergency cardiac care, at the level of a professional rescuer or healthcare provider (adult and pediatric).

9. Remain in compliant with requirements related to clinical education (e.g., TB testing, influenza vaccination, criminal background check).

10. All students are required to abide by the policies and procedures contained in the Ball State University Athletic Training Program Handbook, including the NATA Code of Ethics (Appendix C) and the BOC’s Standards of Professional Practice (Appendix D). Any violations of these policies, any case of academic dishonesty or professional misconduct can result in probation or dismissal from the program.

**Appeal Process**

A student has the right to appeal any decision made by the Athletic Training Program Selection Committee or Retention Committee. The appellant must submit a letter to the director of the Athletic Training Program within ten (10) working days of receiving notification of an adverse decision. The letter should contain reasons as to why the decision is being appealed and why it should be reversed. A conference to discuss the appellant’s appeal will then be held with the student, Director of the Athletic Training Program, Head Athletic Trainer, members of the Selection Committee (including a student representative), and Chair or Associate Chair of the School of Kinesiology. After hearing the student’s appeal, a final decision will be rendered and the appellant will be notified.

If a student wishes to appeal a grade, the procedures to do so may be found in the Ball State University Code of Student Rights and Responsibilities. Please go to [www.bsu.edu/studentcode](http://www.bsu.edu/studentcode).
Bachelor of Athletic Training Degree Requirements

Certified athletic trainers must possess, at a minimum, a bachelor’s degree from a program that is accredited by the Commission on Athletic Training Education (CAATE). Athletic training education consists of the following eight content areas:

- Evidence-Based Practice
- Prevention and Health Promotion
- Clinical Examination and Diagnosis
- Acute Care of Injuries and Illnesses
- Therapeutic Interventions
- Psychosocial Strategies and Referral
- Healthcare Administration
- Professional Development and Responsibility

The athletic training major at Ball State University consists of 73-75 credit hours, and may be completed in 5 semesters (including at least one summer) or 6 semesters. Students are encouraged to enroll in at least 15 credit hours per semester, and attend all advising sessions as scheduled in order to meet the requirements for graduation. Students must also take and pass the Writing Proficiency Exam (scheduled through the Banner system) once they have earned at least 60 credits. Upon admission into the program, students will be enrolled in courses every semester as well as engage in clinical education every semester, which occurs outside of the classroom. While it is difficult to obtain a second major while majoring in athletic training, students are typically able to complete a minor of interest. Students are asked to schedule their classes between the hours of 8:00am and 1:00pm to minimize conflicts with clinical education as much as possible. The following are additional graduation requirements: completion of Senior Exit Survey, completion of a general medial clinical education experience (assigned during the student’s senior year), completion (at the level of mastery) of all items contained in the Clinical Integration Proficiency Manual, and participation in the Senior Exit Interview.

The following is the suggested time table for the timely completion of coursework in the athletic training major:

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Spring Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Year 1 (Pre-Professional Phase)</strong></td>
<td><strong>Year 1 (Pre-Professional Phase)</strong></td>
</tr>
<tr>
<td>AT 196 – Introduction to Athletic Training (2 cr.)</td>
<td>AQUA 260 – Emergency Medical Responder (3 cr.)</td>
</tr>
<tr>
<td>ANAT 201 – Human Anatomy (3 cr.)</td>
<td>AT 240 – Prevention and Care of Musculoskeletal Inj. (3 cr.)</td>
</tr>
<tr>
<td>UCC – Foundation: ENG 103 – Rhetoric and Writing (3 cr.)</td>
<td>UCC – Foundation: ENG 104 – Composing Research (3 cr.)</td>
</tr>
<tr>
<td>UCC – Foundation: History (3 cr.)</td>
<td>UCC – Foundation: Personal Finance (1 cr.)</td>
</tr>
<tr>
<td>UCC – Foundation: Physical Fitness/Wellness (2 cr.)</td>
<td>Elective Course (2 cr.)</td>
</tr>
<tr>
<td><strong>Sub-Total: 16 credits</strong></td>
<td><strong>Sub-Total: 15 credits</strong></td>
</tr>
<tr>
<td><strong>Year 2 (Professional Phase)</strong></td>
<td><strong>Year 2 (Professional Phase)</strong></td>
</tr>
<tr>
<td>AT 250 – App of Taping, Wrapping, and Prot. Devices (1 cr.)</td>
<td>AT 261 – Clinical Education in Athletic Training 2 (2 cr.)</td>
</tr>
<tr>
<td>AT 260 – Clinical Education in Athletic Training 1 (2 cr.)</td>
<td>AT 371 – Upper Extremity Orthopedic Evaluation (3 cr.)</td>
</tr>
<tr>
<td>AT 370 – Lower Extremity Orthopedic Evaluation (3 cr.)</td>
<td>EXSC 293 – Foundations of Physiology and Exercise (3 cr.)</td>
</tr>
<tr>
<td>PHYS 205 – Human Physiology (3 cr.)</td>
<td>EXSC 294 – Functional Anatomy (3 cr.)</td>
</tr>
<tr>
<td>UCC – Tier 1 Domain: Social Sciences (3 cr.)</td>
<td><strong>Sub-Total: 14 credits</strong></td>
</tr>
<tr>
<td><strong>Sub-Total: 15 credits</strong></td>
<td><strong>Sub-Total: 15 credits</strong></td>
</tr>
<tr>
<td><strong>Year 3 (Professional Phase)</strong></td>
<td><strong>Year 3 (Professional Phase)</strong></td>
</tr>
<tr>
<td>AT 360 – Clinical Education in Athletic Training 3 (2 cr.)</td>
<td>AT 361 – Clinical Education in Athletic Training 4 (2 cr.)</td>
</tr>
<tr>
<td>AT 372 – Therapeutic Modalities in AT (WISER+) (3 cr.)</td>
<td>AT 373 – Therapeutic Exercise and Techniques in AT (3 cr.)</td>
</tr>
<tr>
<td>EXSC 201 – Human Performance Concepts &amp; Assessment (3 cr.)</td>
<td>AT 374 – Organization and Administration in AT (3 cr.)</td>
</tr>
<tr>
<td>NUTR 340 – Principles of Human Nutrition (3 cr.)</td>
<td>AT 477 – Psychosocial Aspect of Sports Medicine (3 cr.)</td>
</tr>
<tr>
<td>UCC – Tier 1 Domain: Fine Arts (3 cr.)</td>
<td>EXSC 301 – Fundamentals of Exercise Prescription (3 cr.)</td>
</tr>
<tr>
<td>Writing Proficiency Exam (0 cr.)</td>
<td><strong>Sub-Total: 14 credits</strong></td>
</tr>
<tr>
<td><strong>Sub-Total: 14 credits</strong></td>
<td><strong>Sub-Total: 14 credits</strong></td>
</tr>
</tbody>
</table>
### Change of Major

Once admitted to the program, if a student decides to change their major and voluntarily withdraw from the Athletic Training Program, the student is encouraged to first discuss this situation with the program director, AT faculty, or AT staff. If the student still wishes to change majors or withdraw from the program, he/she will be required to submit a letter in writing to the director of the AT Program stating their intent to withdraw from the program. The student will also be required to complete a “Change of Major” form, found at the Whiting Business Advising Center, AC 224, in order to be assigned to a new academic advisor.

### Additional Costs Associated with the Program

There are extra costs associated with the Ball State University Athletic Training Program once admitted to the professional phase of the program. These costs are in addition to tuition, room and board, and fees charged by the university, and include the following:

- Lab Fees ($30 per course) for AT 196, AT 240, AT 372, and AT 373.
- Lab Pack required for AT 250 which contains taping supplies ($78)
- Transportation costs required for travel to off-campus clinical education sites (gas, public transportation fees, etc.).
- Clinical Integration Proficiency (CIP) Manual (approximately $40, purchased at Hiatt Printing)
- Clothing costs to meet clinical education dress code requirements ($35-$200, as students choose).
- Annual TB test (FREE of charge at BSU Student Health Center), and other required immunizations as needed (cost varies).
- Background check fee (required for certain clinical sites) ranging from $7 (paper form) to $17.50 (online). This background check may need to be repeated every semester or yearly, depending on the clinical assignment and requirements of the clinical site.
- Annual National Athletic Trainers’ Association student membership fee ($75)
- Costs associated with maintaining current emergency cardiac care certification (adult/pediatric) for the professional rescuer (cost varies).
- Annual influenza inoculation, required for certain clinical sites ($25)
- Cost associated with attendance at professional conferences (cost varies).

### Service Requirement

The Athletic Training Program, in the School of Kinesiology, requires a service commitment of its students. By giving to the community throughout the student’s professional preparation program, participation and leadership in this area is hoped to trigger a life-long commitment to volunteerism and community involvement. Each student is required to participate in a minimum of 1 community service project per year. Suggestions for service project available through the program include the following:

- Chase Charlie 5K Medical Coverage
- Well-O-Ween
- Leaf Raking (proceeds from customers go to the BSU Athletic Training Club)
Other service opportunities are available through the university. Please go to cms.bsu.edu/campuslife/communityservice for more information. Students are required to report their service activities upon request.

Board of Certification Examination Requirements

The Board of Certification (BOC) provides a certification program for entry-level athletic trainers. The BOC establishes and regularly reviews both the standards for the practice of athletic training and the continuing education requirement for BOC certified athletic trainers. The BOC is the only accredited certification program for athletic trainers in the United States. For more information about the exam, visit www.bocatc.org.

The purpose of the BOC exam is to assess candidates’ knowledge in the five domains of athletic training as defined by the current BOC Role Delineation/Practice Analysis:

- Injury/Illness Prevention and Wellness Protection
- Clinical Evaluation and Diagnosis
- Immediate and Emergency Care
- Treatment and Rehabilitation
- Organization and Professional Health and Well-Being

The BOC certification exam contains a combination of 175 scored and unscored (experimental) items including: multiple-choice questions, stand-alone alternative items (drag-and-drop, text based simulation, multi-select, hot spot, etc.), and focused testlets (scenarios followed by five key/critical questions related to that scenario). Candidates have four hours to complete the exam.

In order to attain BOC certification, distinguished by the ATC® credential, an individual must complete an entry-level athletic training program accredited by the Commission on Accreditation of Athletic Training Education (CAATE) and pass the BOC certification exam. Students who are enrolled and/or registered in their final semester/quarter prior to graduation are eligible to sit for the BOC exam. It is the goal of the BSU Athletic Training Program for all students to take and pass the BOC examination either prior to or upon graduation. BOC exam results for the program can be found on our website at www.bsu.edu/athletictraining.

Program Awards

A variety of awards are available to students enrolled in the professional phase of the Athletic Training Program. These scholarships and awards are presented at the Awards Banquet in the spring semester. See Appendix E for more information on program awards.

Scholarship opportunities are available through several organizations. The School of Kinesiology awards several honorary scholarships each spring. Furthermore, the National Athletic Trainers’ Association Foundation offers scholarships, primarily targeted to current students who have junior standing in the program and have at least one academic year remaining. Go to www.natafoundation.org for more information. Submission for an NATA Foundation scholarship will automatically result in being considered for a Great Lakes Athletic Trainers’ Association scholarship. The Indiana Athletic Trainers’ Association also offers scholarships, and the deadline for this is October 1st. Go to www.iatausa.org for more information.

Ball State University offers students financial aid packages and grants through the Scholarship and Financial Aid office. Prospective students should contact this office for information and assistance from financial aid counselors. Types of financial aid available include the following: grants, loans, scholarships, and fee remissions.

Guiding Principles for Success

The Ball State University Athletic Training Program faculty and staff feel the following principles are critical to student success in the program. It is recommended that students abide by these principles when engaging in any activity (e.g., coursework, clinical education, volunteer activities, professional conferences, etc.) related to athletic training or the program.
1. **Curiosity:** Intellectual curiosity is valued and expected. Instructors and students should strive to embrace the “why” questions and understand the science behind the concepts learned. The program strives for enthusiastic instructors and learners.

2. **Communication:** Open, honest, and thoughtful communication among students, instructors, and preceptors is essential. This includes thoughtful criticism, constructive feedback, and positive encouragement. In addition, the development of appropriate oral and written communication skills needed for all aspects of patient care is expected across the curriculum.

3. **Integrity:** The BSU Athletic Training Program aspires to operate at the highest level of ethical conduct and to promote these values among students and instructors. Medical confidentiality must be strictly adhered to in all aspects of education, research, and patient care. Proper professional conduct in accordance with the *NATA Code of Ethics* (Appendix C) and the *BOC Standards of Professional Practice* (Appendix D) is emphasized and expected at all levels of the program.

4. **Critical Thinking, Problem Solving, and Decision Making:** Instructors, preceptors, and students are committed to developing critical thinking, problem solving, and decision making skills. Problem and case-based learning is incorporated at all levels of the BSU Athletic Training Program.

5. **Theory to Practice:** Evidence-based practice and encouraging the link from current research to clinical practice is emphasized in all phases of the program. Students are expected to prepare themselves adequately for the classroom to ensure they possess the appropriate level of knowledge to practice clinical skills.

6. **Advocacy:** The BSU Athletic Training Program embraces the concept of advocacy. Students should be advocates for their own learning. Instructors and preceptors should be advocates for student learning and embrace teachable moments. The concept of being an advocate for the patient should be a principle observed and reinforced to students in all aspects of clinical education.

**Clinical Education**

Clinical education is the cornerstone of athletic training education as it provides students with “real-world” opportunities to integrate the knowledge and skills learned in the classroom on patients under the supervision of a preceptor. The *Foundational Behaviors of Professional Practice* will be required and evaluated during all clinical education experiences. The clinical portion of the student’s education is a component of each Clinical Education (AT 260, AT 261, AT 360, AT 361, AT 460, AT 461) course. To ensure a meaningful educational experience and to remain in good standing with CAATE, strict clinical education requirements and guidelines are upheld by the program.

Clinical education experience placements are made based on course sequencing, site availability, and student needs. A student’s preference will be considered, but is not guaranteed. Students are required to complete a minimum of six (6) semesters of clinical education. During the first two semesters in the professional phase of the program, students will engage in clinical education on campus. Over the course of the remaining four semesters in the program, the student may be assigned to on-campus or off-campus clinical education experiences. When the student is off-campus, he/she may be assigned to 8-week rotations at two different sites over the course of the semester, or a full semester at one clinical site. Clinical education experiences may be completed during the summer with prior approval from the clinical education coordinator. When assigned to an off-campus clinical education experience, the student should be prepared to fulfill requirements for that site (e.g. background check, immunizations, orientation) as well as plan for transportation to that site.

Students are to refrain from applying skills during their clinical education experiences which have not first been instructed and evaluated either in the classroom or by the preceptor. This is to ensure safety of both the patient and the student. If, however, a learning opportunity arises where the student may gain experience with a clinical skill but the clinical skill has not yet been taught or assessed in a required course, the preceptor may instruct the student on the clinical skill so that the student may benefit from that situation. In this case, a student is NOT allowed to complete the corresponding item from the Clinical Integration Proficiency Manual since that skill has not been formally taught in the classroom/laboratory environment.

**Emergency Cardiac Care:** In order to engage in clinical education, students must always maintain current certification (adult and pediatric) in emergency cardiac care (for the professional rescuer or healthcare provider). While the program will make available re-certification opportunities, this is ultimately the responsibility of the student. Should
a student’s certification lapse, he/she will be removed from their clinical education experience pending re-certification and will receive a point deduction in his/her respective Clinical Education course.

Students must be supervised at all times by a preceptor when engaged in clinical education, meaning that the preceptor must be physically present and have the ability to intervene on behalf of the student and/or the patient. Clinical education follows a logical progression of clinical supervised responsibility given to the student as he/she progresses through the program, leading to autonomous practice upon graduation.

The following definitions are provided to clarify the terminology associated with clinical education:

- **Clinical Education**: The application of athletic training knowledge, skills, and clinical abilities on an actual patient base that is evaluated and feedback provided by a preceptor.
- **Clinical Site**: A physical area where clinical education occurs.
- **Direct Supervision**: Provided by a preceptor during the delivery of athletic training services. The preceptor must be physically present and have the ability to intervene on behalf of the athletic training student and the patient.
- **Direct Patient Care**: The application of athletic training knowledge, skills, and clinical abilities on an actual patient.
- **Preceptor**: A certified/licensed healthcare professional who teaches and evaluates students in a clinical setting using an actual patient base.

**Clinical Education Supervision**

Although one of the major goals of a clinical experience is for students to become autonomous in their skills & decision making, students should never confuse autonomy with unsupervised practice. Students will ALWAYS practice athletic training under the supervision of a BSU preceptor. Autonomy, as practiced by students, refers to becoming proficient to the extent that they collaborate in making and implementing decisions regarding the care of their patients. Students should work to become competent and comfortable in decision-making, but all care-related decisions made by students must be reviewed with their preceptors prior to implementation. Clinical experiences will frequently involve student autonomy in activity and collaboration in decision making, but students are never the primary care provider for a patient or team. To this end, it is wholly incorrect for a student to see themselves as “the athletic trainer” for a team or to look at his/her time in clinical experience as “covering” a practice or a game. Instead, clinical experiences must be seen from an educational perspective and the students must see themselves as being there to learn, develop and/or refine clinical skills, and to foster an understanding and appreciation of all aspects of the profession.

The BSU Athletic Training Program, in its entirety, is a vital part of the athletic training student’s learning goals. Clinical education integrates the didactic knowledge from the classroom with the practical application of athletic training skills and decision making, under direct supervision, to develop the confidence and real world experience while adhering to the standards of supervision of clinical education set forth by the CAATE. At no time should athletic training students work independently of their assigned preceptor, or make decisions without the collaboration of their preceptor, nor should supervision of an ATS be transferred to any person other than the assigned preceptor without the express written approval of the BSU AT program director or clinical education coordinator. At no time will the athletic training student be viewed as a replacement of a certified athletic trainer.

The BSU Athletic Training Program does not support unsupervised clinical education experiences, nor are they considered part of the student’s clinical education experience. Students may not represent themselves as an athletic trainer or perform athletic training activities outside of their clinical education experience. However, there may be unplanned times that a student is briefly unsupervised. During these uncommon times, students will not perform athletic training skills. If a student finds themselves in a situation in which he/she is unsupervised, he/she may act voluntarily as a first aid provider only, and can only provide first aid services, which will be viewed as non-compulsory. This voluntary opportunity may be refused by the student at any time. A student’s refusal will have no detrimental effect on the student’s clinical education evaluation or standing in the program.

**Clinical Education Evaluation**

Students will be regularly assessed on their performance in the clinical education setting. The preceptor who supervises the student will complete each required evaluation. It is the student’s responsibility to ensure that the preceptor is aware that the evaluation is due, and that it needs to be completed. The student will be evaluated at the
mid-point of the experience, which will provide feedback regarding progress up to this point, strengths, and help to establish specific skills and goals to accomplish for the remainder of the experience. The student will also be evaluated at the end of the clinical experience. This evaluation will be more detailed, providing feedback regarding the student’s Foundational Behaviors and Professional Practice as well as level-specific knowledge and skills. For both of these evaluations, it is expected that the student and preceptor will meet in person to discuss the preceptor’s evaluation prior to the evaluation being submitted. Failing to have clinical evaluations submitted on time will result in a grade penalty in the student’s respective Clinical Education course.

**General Medical Clinical Education Experience**

As a graduation requirement, all students will be required to engage in a general medical clinical education experience. This experience occurs at the Ball State University Health Center or an off-campus facility during the students’ third year (5th/6th semester) in the program. You will be required to complete 10-15 hours of clinical experience over a 1 week intensive experience. This week will be scheduled by the clinical education coordinator. You must complete the required hours (recorded in ATrack) and complete the appropriate Clinical Integration Proficiency (CIP) that corresponds to this experience (Level 3 – Objective 2.2.1). Be sure to have the preceptor at the Health Center sign off on your CIP.

**Clinical Hours**

All students are required to record the time spent engaged in clinical education through ATrack. Students are required to keep their clinical hours log updated, as the hours log will be checked every Monday morning. Preceptors will be approving their assigned student hours on a weekly basis. Failure to maintain up-to-date records of clinical hours will result in a grade penalty in the student’s respective clinical education course. Students should only count those hours for which they were engaged in clinical education. Travel time (to/from clinical education sites), food/snack breaks, homework breaks, social visits, and other miscellaneous instances should NOT be included in the clinical hours log.

The following clinical hours policy is in place related to amount of time engaged in clinical education:

<table>
<thead>
<tr>
<th></th>
<th>1st/2nd Semester Student</th>
<th>3rd/4th Semester Student</th>
<th>5th/6th Semester Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum # Clinical</td>
<td>160</td>
<td>160</td>
<td>160</td>
</tr>
<tr>
<td>Hours/Semester</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maximum # Clinical</td>
<td>240</td>
<td>320</td>
<td>400</td>
</tr>
<tr>
<td>Hours/Semester</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># Days Off Required/Week</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

A 1st/2nd semester student should average no more than 15 hours/week (maximum), a 3rd/4th semester student should average no more than 20 hours/week (maximum), and a 5th/6th semester student should average no more than 25 hours/week (maximum).

**Clinical Education: Student Expectations**

1. Model the Foundational Behaviors of Professional Practice.
2. Uphold the policies and procedures contained within the BSU Athletic Training Program Handbook, including professional dress at all times when providing patient care.
3. Abide by the NATA Code of Ethics and the BOC Standards of Professional Practice.
4. Be punctual to clinical education experiences.
5. Communicate any schedule changes, tardiness, or unforeseen situations (e.g. illness, personal emergency) with your preceptor as soon as possible.
6. Be an active learner.
7. Refrain from applying skills during clinical education that have not been formally instructed and evaluated by either the classroom instructor or the preceptor.
8. Expect and understand the need for constructive criticism.
9. Have a positive attitude.
10. Communicate all things related to patient care to the preceptor. The preceptor is responsible for the care of the patient, so it is vital that you communicate results of assessments, changes in health status, or other medically-related situations to the preceptor. Furthermore, seek approval from the preceptor prior to changing the patient care plan.

Clinical Education: Preceptor Expectations
1. Model the Foundational Behaviors of Professional Practice.
2. Uphold the policies and procedures contained within the BSU Athletic Training Program Handbook.
3. Abide by the NATA Code of Ethics and the BOC Standards of Professional Practice.
4. Communicate any schedule changes, tardiness, or unforeseen situations (e.g. illness, personal emergency) with the student(s) as soon as possible.
5. Have a positive attitude.
6. Provide constant physical supervision. As the student progresses through the program, they can be afforded greater responsibility and autonomy, but always under supervision.
7. Provide instruction and assessment of the current knowledge, skills, and clinical abilities of the student.
8. Provide instruction and opportunities for the student to develop clinical integration proficiencies, communication skills, and clinical decision-making during actual patient/client care.
10. Facilitate the clinical integration of skills, knowledge, and evidence regarding the practice of athletic training.
11. Complete all clinical evaluations of students in a timely fashion. All clinical evaluations should be discussed in person with the student prior to submission.
12. Orientate the student to the clinical site, which includes the following: location of bloodborne pathogen barriers and control measures, practice and review of the site’s Emergency Action Plan, location of all emergency equipment (e.g. AED), and introductions to key personnel at that site.

Clinical Education Infectious Illness Policy
Students are required to refrain from engaging in clinical education when they are ill. The Ball State University Athletic Training Program Infectious Illness Policy is designed to ensure the safety of the patient and protect the student. See Appendix F for details on the Infectious Illness Policy. Upon admission into the program, all students are required to read and sign the Infectious Illness Policy.

Clinical Education Student Misconduct Procedures
In the event that students are behaving inappropriately (e.g., violating dress code policy, making patient care decisions without discussing the situation with the preceptor, engaging in inappropriate conversations while in the presence of patients, students, staff, or others, displaying a poor attitude, etc.) while engaged in clinical education, the following procedures are to be followed:
1. Preceptor meets privately with the student to verbally discuss the behaviors that are inappropriate. The preceptor will discuss the facts surrounding the misbehaviors (dates, setting, patients/others involved, specific behaviors identified). The preceptor will give suggestions to the student regarding how the behaviors can be rectified.
   - If the preceptor is a graduate assistant athletic trainer, the preceptor will inform his/her supervising staff athletic trainer of the student misconduct.
2. If misconduct on behalf of the student continues, the preceptor will meet privately with the student to verbally discuss the behaviors that are inappropriate. The preceptor will document the facts surrounding the misbehaviors (dates, setting, patients/others involved, specific behaviors identified), and discuss these facts with the student. The preceptor and the student will both sign the document, indicating that the student has been informed of the facts surrounding the misconduct. The preceptor will forward the signed document to the clinical education coordinator, so that a record can be maintained in the student’s file.

- If the preceptor is a graduate assistant athletic trainer, the preceptor will inform his/her supervising staff athletic trainer of the student misconduct, and the written document will need to be signed by the supervising staff athletic trainer.

3. If the behaviors that are considered misconduct continue, the preceptor will document the facts surrounding the continued misbehaviors (dates, setting, patients/others involved, specific behaviors identified). The preceptor will inform the student that the behaviors are still present, and notify the student that further actions will need to be taken. At this time, the preceptor will initiate a formal meeting to discuss the situations and behaviors with the clinical education coordinator and/or program director. The purpose of this meeting is to discuss the documented instances of misconduct and the steps taken by the preceptor to correct the misconduct, the student reaction to feedback regarding the misconduct, and the remediation or disciplinary actions that may need to be taken to correct the misconduct.

4. The student will then be required to participate in a meeting with the preceptor, supervising staff athletic trainer (if the preceptor is a GA), the program director and/or clinical education coordinator. The meeting will again discuss the facts involved in the student misconduct, as well as inform the student of the disciplinary or remedial actions that will need to occur in order for the student to continue to be engaged in clinical education.

Please note: all cases of misconduct will be taken on a case-by-case basis and are dependent on the magnitude of the misconduct. If a behavior/action is considered professional misconduct, as identified by a violation of the NATA Code of Ethics or the BOC Standards of Professional Practice, then a student may be immediately removed from clinical education experiences until the incident is investigated. Instances of professional misconduct may result in immediate probation or dismissal from the program, as determined by the Program Director in conjunction with the Retention Committee.

Social Media Policy

The following is a policy established for students related to social media and electronic forms of communication (email, texting), particularly as it relates to clinical education. Violations of this policy will be evaluated on a case-by-case basis. Depending on the magnitude of the infraction, a violation may be considered professional misconduct, resulting in either probation or dismissal from the program.

1. Students should avoid social media interaction (e.g., Facebook friends, Twitter followers) with current AT program faculty, staff, preceptors, and student-athletes/patients. This includes BSU graduate assistant athletic trainers. Current students are encouraged to “like” the Ball State Athletic Training Program’s Facebook page and follow @BSU_AT on Twitter, for current information/news related to the program.

2. Students should avoid social media/electronic forms of communication to discuss health-related issues with student-athletes or patients, particularly if the student is currently engaging in clinical education experiences that may result in interaction with that athlete or patient. This includes Facebook, Twitter, email, and texting, etc. (If the patient/athlete has a medical need, he/she should contact the ATC or the appropriate health care professional, not the student).

3. Students should avoid any social media/electronic forms of communication with any athletes or patients who are minors. This includes Facebook, Twitter, email, and texting, etc.

4. Students should avoid taking any pictures or posting anything about the patients they are providing care to, or patients other students are providing care to, on any social media. This includes Facebook, Twitter, email, and texting, etc. This is unprofessional and is a HIPAA violation.

5. Do NOT share any information regarding patient diagnosis, diagnostic imaging, injury-related information, or suggestions for injury care, etc. to any form of social media or electronic forms of communication.
Alcohol/Drug Use Policy

As a student in a professional program for healthcare providers, it is important that you exercise sound judgment and understand the consequences associated with the misuse of alcohol and/or drugs. Students in the program are expected to abide by all state and federal regulations related to the use of drugs and alcohol. Furthermore, on and off campus violations of University policy and local and state laws related to alcohol and drugs will result in disciplinary action. A violation may be considered professional misconduct, resulting in either probation or dismissal from the program. Any student suspected of drug or alcohol abuse prior to or during a clinical education experience will be immediately withdrawn from the experience and referred to the Counseling Center for evaluation.

Please refer to the Office of Student Rights and Community Standards for more information regarding the university's policies.

Student Transportation to Clinical Sites

Students will be given the opportunity to gain clinical experience at a variety of locations, including on- and off-campus locations. In the case of off-campus clinical education experiences, students will be responsible for traveling to and from their primary clinical site at their expense. Ball State University will not provide the student with transportation to these sites, nor will the university or program pay for the student’s expenses related to traveling to those sites. In some cases, the student’s clinical education experience will relocate (e.g., for an athletic event) based on the schedule at that site. It is the responsibility of the student to travel to and from the designated site per the arrangements made with the student and preceptor.

Students will be responsible for any tickets, accidents, etc. they may incur while driving to these clinical sites. Therefore, students are highly encouraged to have insurance and to drive responsibly.

Student Travel to Clinical Sites in Adverse Weather

In the event of bad weather or hazardous road conditions, each individual student must determine if they feel they can safely travel to the clinical education site. If a student determines it is unsafe, they need to inform his/her preceptor in as much of advance as possible. Students should not abuse this policy or tempt fate. In a nutshell, if the student feels they can arrive and return safely then they should. If the student is unsure of their safety then they should not drive. The student should ride with a safe driver or call the preceptor and inform him/her of the planned absence. It is the student’s responsibility to reschedule the missed experience if possible. If the clinical education site is closed due to bad weather, the student is not required to attend the clinical education experience.

Student Transportation of Injured/Ill Patients

Under no circumstance should a student transport an injured/ill patient in any vehicle for off-site emergency care, physician appointments, or any other reason. Preceptors should not ask or expect students to provide such services in their own, a preceptor’s, or the institution’s vehicle. The issues involved with such actions expose the student, preceptor, and institution to great potential liability. Just as it is the preceptor’s responsibility to avoid placing students in such situations, it is also the student’s responsibility to inform the program director or clinical education coordinator of any instance in which the student feels they were placed in a compromising situation. If the preceptor has made arrangements to transport an injured/ill patient medical care or a physician appointment, and the student volunteers to accompany the preceptor and patient, the student must be cleared through Ball State University’s Transportation Services in order to be covered from a liability standpoint to travel in a university vehicle. In this case, the student would count those hours towards clinical education.

Conflicts with Clinical Education

The student’s first academic responsibility is to attend all major, minor, and elective courses the student enrolls in each semester. Students may not voluntarily miss or be required to miss classes, especially athletic training major course, to engage in clinical education or for any other activity (e.g., job, extracurricular activity, etc.). Excused absences for these class sessions may only be granted by the instructor for the specific course. Students should attempt to schedule all classes between the hours of 8:00am and 1:00pm to avoid potential conflicts with clinical education.
experiences. If there is a conflict between the scheduled time of a required class and a clinical education experience, it must be resolved with the program director and/or clinical education coordinator, as well as the preceptor the student is assigned to, prior to the start of the clinical education experience. The student is required to communicate with the assigned preceptor ahead of time regarding the schedule for clinical education experiences.

The student’s second academic responsibility is to attend all scheduled clinical education experiences. A clinical experience may not supersede a class session unless the instructor for the specific course has given the student an excused absence for the class session. The preceptor may not grant an excused absence for any course. The preceptor has the authority to determine excused absences from clinical education for assigned students (e.g., day(s) off, personal illness, family emergencies).

Upon admission to the professional phase of the Ball State University Athletic Training Program, students will be required to engage in clinical education experiences every semester that they are enrolled in the program (which may include summer, depending on the individual timeline for graduation). Clinical education experiences are assigned based on the learning needs of the student as well as the requirements set forth by the program. Clinical education experiences occur outside of the classroom, but include the application of knowledge and skills learned in the classroom to patients in a health care setting. Clinical education may occur prior to the start of the academic semester and extend beyond the conclusion of the academic semester. Clinical education experiences may occur at any time class is not in session, and frequently involves mornings, afternoons, evenings, and weekends. It is the student’s responsibility to engage in clinical education as assigned while abiding by the weekly minimum and maximum number of clinical hours as outlined by the clinical education course syllabus (AT 260, AT 261, etc.) in which the student is enrolled. The occurrence of clinical education (e.g., days, hours, timing) will change based on the clinical education assignment that semester. If the student chooses to participate in extra-curricular activities (e.g. intercollegiate athletics, intramurals, Greek life, performing arts, clubs), become a member of the military (e.g. active duty, reserve status, ROTC), or commit to part-time employment, the student does so knowing the clinical education requirements are the priority as a requirement of the Ball State University Athletic Training Program. Any other activities or commitments mentioned previously must not excessively conflict with clinical education. To the greatest extent possible, extra-curricular activities and outside commitments must be scheduled around clinical education. If participation in extra-curricular activities, military duty, or part-time employment interferes with clinical education requirements, the student may be required to complete additional clinical education experiences (e.g. summer clinical education experience, additional semester) in order to make up the deficiency.

Students submit a “Clinical Education Statement of Understanding” with their application for admission to the program that states the above information. Students are encouraged to work out their clinical education schedule with their preceptor prior to beginning the experience. However, due to unforeseen circumstances (e.g., weather conditions) the clinical education schedule may change unexpectedly. In that case, both the student and the preceptor need to be flexible and adapt to the circumstances as best as possible.

**Clinical Education Dress Code Policy**

In order to promote the professionalism that is required of health care professionals when providing patient care, the following dress code is in effect:

A. **General Appearance Information**

1. Professional presentation as an athletic training student must occur at all times during clinical education experiences. Professional presentation includes appropriate attire, demeanor, and proper hygiene. Discretion should be used concerning make-up, tattoos, jewelry, and piercings.

2. When engaged in a general medical and/or off-campus clinical education experience, discuss proper dress with the preceptor prior to engaging in clinical education. At a minimum, the policy set by the Ball State University Athletic Training Program applies at all clinical sites.

3. To ensure patient and student safety, the following jewelry items are not permitted to be worn during clinical education experiences: nose rings, eyebrow rings, tongue piercings, long necklaces, excessive finger rings and bracelets, and excessive ear piercings.

4. Personal hygiene requirements include the following: hair must be clean, out of the eyes, and unobtrusive while participating in clinical education experiences. Long hair should be tied back so as to not interfere
with patient care. Hands and fingernails should be clean at all times, and fingernails must be at an appropriate length as to not harm patients or serve as a potential health hazard. Facial hair, with the exception of neatly trimmed beard, mustaches or goatees, is not permitted.

5. Appropriate attire must be professional at all times and may not reveal undergarments or body areas that would be considered inappropriate in a healthcare setting.

B. Clothing Attire for Athletic Training Centers/Athletic Practices

1. Collared Shirts/Polos:
   a. Collared shirts (polo shirts) with the BSU Athletic Training logo (white BSU polo shirts for observational students) are required.
   b. Collared shirts must be tucked in at all times.
   c. Clothing should be of an appropriate color when representing Ball State University. This would include clothing worn under the required collared shirts or sweatshirts. Appropriate BSU colors include red, black, white, gray, or tan khaki.

2. Pants/Shorts:
   a. Pants/shorts should be of appropriate length (shorts should be fingertip length) and worn on or above the iliac crests. A belt is recommended.
   b. Appropriately-colored (e.g., tan) dress pants/shorts are required.
   c. Black nylon pants are permitted during inclement weather only.
   d. Ripped or patched clothing, rolled up pants, jeans or jean shorts, mesh shorts/pants, sweatpants, capri pants, or items of clothing where undergarments are exposed are not permitted.

3. Other Clothing Items:
   a. Sweatshirts or jackets with the BSU Athletic Training logo are permitted when appropriate.
   b. Shoes, with appropriate socks, must be worn at all times. Shoes must be functional; open-toed shoes, such as sandals, flip-flops, etc. are not permitted. High-heeled shoes are not permitted.
   c. Hats (with the bill forward) are only permitted for outdoor activities and must include a BSU logo and be in BSU colors. No hats are to be worn when inside the athletic training facilities.
   d. In cold weather, the outer-most layer of sweatshirts or jackets must contain a BSU or Ball State Athletic Training logo in appropriate Ball State colors.
   e. Clothing that advertises other schools, alcohol, tobacco, or other drugs are not permitted.

C. Clothing Attire for Indoor/Outdoor Event Coverage

1. For outdoor events, clothing should be based on the above guidelines and coordinated between the athletic training staff and students. In the event of inclement weather, black, red, or gray nylon pants are allowed, as are coats, hats, and gloves that are functional.

2. For indoor events, business/business-casual dress is appropriate, including dress pants for women, and ties/dress pants for men. Dress should always be conservative so that the student is able to provide patient care to the best of his/her ability without exposing undergarments, distraction of hair or jewelry, etc. Socks (dress socks, nylons, in compliance with OSHA) should always be worn, and dress shoes should always be functional (closed-toe, no heels). Please talk with your preceptor for further guidance concerning appropriate dress for indoor events.

3. Travel attire should be consistent with the athletic training staff and should be professional.

Bloodborne Pathogens Policy and Exposure Protocol

The Ball State University Athletic Training Program requires students to receive formal education and re-training in the area of bloodborne pathogens and biohazardous guidelines on a yearly basis. This training is required prior to students engaging in directed observation or clinical education experiences. To this end, the program has a written policy related to bloodborne pathogens and an exposure plan. These policies are designed to eliminate or minimize exposure to bloodborne pathogens, as well as define reporting and follow-up procedures in the case of an exposure incident. This plan is developed based on OSHA’s (Occupational Safety and Health Administration) bloodborne
Therapeutic Equipment Safety Policy

The Ball State University Athletic Training Program requires that therapeutic equipment at all clinical sites is inspected, calibrated, and maintained according to the manufacturer’s recommendations. This is required to safeguard the health of the patient and the safety of the student and clinician. Please see Appendix H for details regarding this policy.
Appendix A

Ball State University Athletic Training Program
Handbook Acknowledgement

I have reviewed a copy of the current Ball State University Athletic Training Program Handbook, and understand that I am responsible for knowing and understanding the information contained within the handbook. I understand if I have a question about the policies in the handbook, it is my responsibility to seek clarification from the program director of the Ball State University Athletic Training Program. I agree to abide by the written policies and procedures including:

- Academic and program retention requirements
- Clinical education policies, expectations, and professional conduct
- Infectious Disease Policy
- Bloodborne Pathogen Policy and Exposure Protocol

_________________________________________________   ___________________________
Student Name (Printed)        Date

_________________________________________________
Student Signature

Ball State University Athletic Training Program
Professional Conduct and Confidentiality Acknowledgement and Agreement

Please read the following and sign below stating that you are aware of the confidentiality policy and agree to abide by the governance of this policy

My signature below indicates that I, as a student in the Athletic Training Program at Ball State University, in compliance with HIPAA, the NATA Code of Ethics, and the BOC Standards of Professional Practice, recognize that I have an obligation to myself, the athletes, patients, coaches with whom I work, preceptors, and to Ball State University, to withhold from anyone, other than my immediate supervisors or other appropriate medical health professionals, any information I acquire professionally or personally which is considered confidential. This includes any information about a patient’s medical condition, the treatment of a medical condition, any information which I may acquire in locker rooms, athletic training facilities, physician’s offices or otherwise which is considered to be non-public information. The unique opportunity that I have to engage in clinical education as a student will be jeopardized if I violate this confidentiality, may irrevocably destroy the rapport I establish with athletes, patients, coaches, and physicians, and may result in my immediate dismissal from my clinical education assignment, the athletic training program, and/or Ball State University. I also understand that I represent the Ball State University Athletic Training Program at all times, and, as a result, I will conduct myself in a professional manner at all times. I understand that if I fail to abide by this professional conduct statement and the statutes included in the NATA Code of Ethics and the BOC Standards of Professional Practice, I will incur consequences for my actions and accept that penalty.

_________________________________________________   ___________________________
Student Name (Printed)        Date

_________________________________________________
Student Signature
Appendix B

Ball State University Athletic Training Program
Technical Standards

I. Overview

The Athletic Training Program at Ball State University is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The technical standards set forth by the Athletic Training Program establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program’s accrediting agency (Commission on Accreditation of Athletic Training Education [CAATE]).

II. Admission/Retention Requirements

The following abilities and expectations must be satisfied by all students admitted to the Athletic Training Program. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation; the student will not be admitted into or retained in the program. Compliance with the program’s technical standards does not guarantee students eligibility for the Board of Certification exam.

Candidates for admission and retention in the Athletic Training Program must demonstrate:

A. The mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm.
B. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients.
C. The ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively. Students must be able to understand and speak the English language at a level consistent with competent professional practice.
D. The ability to record the physical examination results and a treatment plan clearly and accurately.
E. The capacity to maintain composure and continue to function well during periods of high stress.
F. The perseverance, diligence and commitment to complete the Athletic Training Program as outlined and sequenced.
G. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
H. Effective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

III. Student and Health Care Provider Verification

Candidates for selection to the Athletic Training Program will be required to verify they understand these technical standards. If a student or the program later identifies actual or potential mental, psychological, or physical difficulties in meeting the standards established for the program, the student, with assistance from the office of Disability Services, will use this information to determine if the student can meet the technical standards with reasonable accommodation; this review will take into account whether accommodation would jeopardize clinician/patient safety, or the educational process of the student or the institution, including all
course work and clinical education experiences deemed essential to graduation. The student must inform the program director of any changes in health status which may impact the ability to meet the technical standards.

IV. Certification

At the time of formal application to the professional phase of the program, the student will read and sign the following statement of understanding:

I certify that I have read and understand the technical standards listed above (section II) and recognize that they must be satisfied in this education program. If I need an adaptation or accommodation for this program based on a disability, I will make an appointment with the office of Disability Services for review of that request.

_______________________________________________________ _____________________________
Signature of Applicant       Date

_______________________________________________________
Applicant Name (Printed)

**Physician Verification:**

The applicant can meet the general intent (e.g., orientation, clear speech, intact memory, and ability to reach heights ranging from the head of someone sitting down to the floor for purposes of examining a patient) of the technical standards, with or without accommodations:

_______________________________________________________ _____________________________
Signature of Physician       Date

_______________________________________________________
Physician Name (Printed)
Appendix C

National Athletic Trainers’ Association
Code of Ethics
(September 28, 2005, Revised 2013)

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

PRINCIPLE 1:
Members shall respect the rights, welfare and dignity of all.
   1.1 Members shall not discriminate against any legally protected class.
   1.2 Members shall be committed to providing competent care.
   1.3 Members shall preserve the confidentiality of privileged information and shall not release such information to a third party not involved in the patient’s care without a release unless required by law.

PRINCIPLE 2:
Members shall comply with the laws and regulations governing the practice of athletic training.
   2.1 Members shall comply with applicable local, state, and federal laws and institutional guidelines.
   2.2 Members shall be familiar with and abide by all National Athletic Trainers’ Association standards, rules and regulations.
   2.3 Members shall report illegal or unethical practices related to athletic training to the appropriate person or authority.
   2.4 Members shall avoid substance abuse and, when necessary, seek rehabilitation for chemical dependency.

PRINCIPLE 3:
Members shall maintain and promote high standards in their provision of services.
   3.1 Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity or services.
   3.2 Members shall provide only those services for which they are qualified through education or experience and which are allowed by their practice acts and other pertinent regulation.
   3.3 Members shall provide services, make referrals, and seek compensation only for those services that are necessary.
   3.4 Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge.
   3.5 Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.
   3.6 Members who are researchers or educators should maintain and promote ethical conduct in research and educational activities.
PRINCIPLE 4:
Members shall not engage in conduct that could be construed as a conflict of interest or that reflects negatively on the profession.

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

   4.2 National Athletic Trainers’ Association current or past volunteer leaders shall not use the NATA logo in the endorsement of products or services or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.

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

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

   4.5 Members shall not provide or publish information, photographs, or any other communications related to athletic training that negatively reflects the profession.
Appendix D

Board of Certification Standards of Professional Practice
(Implemented September 1, 2016)

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

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

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

The BOC Standards of Professional Practice consists of two sections:

I. Practice Standards

II. Code of Professional Responsibility

I. PRACTICE STANDARDS

Preamble
The primary purpose of the Practice Standards is to establish essential duties and obligations imposed by virtue of holding the ATC® credential. Compliance with the Practice Standards is mandatory. The BOC does not express an opinion on the competence or warrant job performance of credential holders; however, every Athletic Trainer and applicant must agree to comply with the Practice Standards at all times.

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

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

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

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

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

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

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

### II. CODE OF PROFESSIONAL RESPONSIBILITY

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

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

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

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

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

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

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

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

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

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

1.7.1 Does not make unsupported claims about the safety or efficacy of treatment

**Code 2: Competency**
The Athletic Trainer or applicant:

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

2.2 Complies with the most current BOC recertification policies and requirements

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

3.1 Practices in accordance with the most current BOC Practice Standards

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

3.3 Practices in collaboration and cooperation with others involved in a patient’s care when warranted; respecting the expertise and medico-legal responsibility of all parties
3.4 Provides athletic training services only when there is a reasonable expectation that an individual will benefit from such services

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

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

3.6 Does not guarantee the results of any athletic training service

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

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

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

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

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

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

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

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

**Code 4: Research**

The Athletic Trainer or applicant who engages in research:

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

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

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

**Code 5: Social Responsibility**

The Athletic Trainer or applicant:

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

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

**Code 6: Business Practices**

The Athletic Trainer or applicant:

6.1 Does not participate in deceptive or fraudulent business practices

6.2 Maintains adequate and customary professional liability insurance

6.3 Acknowledges and mitigates conflicts of interest
Appendix E

Ball State University Athletic Training Program Awards

**James C. Dickerson Outstanding Senior Award**
Outstanding graduating senior who epitomizes the strong potential to represent Ball State University and the field of athletic training with pride and excellence throughout his/her career. This student will continue to be an ambassador of Ball State University and the profession of athletic training.

STAFF VOTING

**Rex L. Sharp Professional Dedication Award**
Epitomizes the student that continually displays and implements those efforts necessary to be a professional in the field of athletic training. The award is given for dedication, knowledge, leadership, and commitment toward a career as a certified athletic trainer.

STAFF VOTING

**Richard L. Hoover Cardinal Athletic Training Student Award**
Award based on an application process which includes a written essay, academic achievement, and clinical skills which best exemplifies the Ball State University Athletic Training Program.

APPLICATION – STAFF VOTING

**Professional Promise Award**
Award given to the athletic training student who has shown the most improvement during his/her time in the program including issues such as skills, academics, dedication, and professionalism.

STAFF VOTING

**Sayers Bud Miller Inspirational Award**
Award to the athletic training student who goes above and beyond what is asked of him/her and who volunteers him/herself to causes inside and outside of the athletic training profession. This award is given to the student athletic trainer who displays enthusiasm, charisma, and instills the love of the profession of athletic training in his/herself and those around him/her.

STAFF VOTING

**Most Valuable Athletic Training Student Award**
Award given by fellow athletic training students to the person who has provided outstanding leadership in the athletic training program and has handled the daily riggers of an athletic training student with poise, integrity, and professionalism.

STUDENT VOTING

**Rookie Athletic Training Student Award**
Award given to the person who has best exemplified the role of a Ball State athletic training student during their first year in the athletic training program. This person demonstrates the potential to become an exceptional athletic training professional.

STAFF VOTING
Matthew B. Roush, MD Memorial Scholarship
Dedicated to the memory of Dr. Roush, this scholarship is given to a Ball State University senior student or graduate assistant who is pursuing a career in sports medicine. It recognizes a person who will be dedicated to lifelong learning and becoming an exceptional educator. The student should epitomize those cornerstone qualities exhibited by Dr. Roush. These include kindness, compassion, and selflessness. It honors the exceptional person who makes up the health care professional. This memorial scholarship helps us all to remember the man who had a big smile and an even bigger handshake.

Gary Noble Memorial Athletic Training Club Service Award
Students in the Athletic Training Club are encouraged to embrace volunteerism and service leadership in order to more fully appreciate and develop social responsibility. In this spirit, The Gary Noble Memorial Athletic Training Club Service Award is bestowed upon a student who exhibits exemplary volunteerism for the community (local and at-large) and professional service. A personal plaque is given along with recognition on an Athletic Training Room plaque.
*Club advisors, and one beginning student and one advanced student in the club selected by the advisors, will review award applications.
*Awards are subject to modification at the discretion of the Athletic Training Program and are not guaranteed to be distributed annually.
Appendix F

Ball State University Athletic Training Program
Infectious Disease Policy

Athletic training students have a small but real health risk during their clinical education experiences. They frequently come into contact with patients/athletes who are ill with potentially infectious diseases, and they often are required to tape or bandage wounds that present the potential for contact with blood borne pathogens. In addition, athletic training students who are ill with an infectious disease may present a health risk to patients/athletes. The Ball State University Athletic Training Program aspires to prevent disease exposure to staff, athletic training students, and patients/athletes.

Athletic training students must use universal precautions to limit the exposure to blood borne pathogens. OSHA blood borne pathogen training (or other acceptable training) for medical workers will be conducted annually for athletic training students prior to students engaging in clinical education in the fall. Institutional and program infection control policies will also be reviewed at this time.

The Center for Disease Control (CDC) provides specific guidelines for reporting communicable and infectious disease, see http://www.cdc.gov/nhsn/PDFs/CMS/CMS-Reporting-Requirements.pdf. These guidelines are designed to provide for the uniform reporting of diseases of public health importance within the community, in order that appropriate control measures may be instituted to interrupt the transmission of disease, and will be followed by the BSU Athletic Training Program.

Athletic training students must realize that ill health care workers present some risk to the patients/athletes they treat and with whom they come in contact. To limit this risk, the following steps will be followed:

1. Hand washing and good personal hygiene techniques are two of the best measures to prevent communicable diseases. Hand washing should occur after contact with each patient. Additionally, hand washing is encouraged at all times when in contact with a patient or not. In the absence of immediate hand washing with soap and water, antibacterial hand sanitizer may be used. Hand washing with soap and water should occur as soon as possible, however.
2. If an athletic training student is ill, the student will be examined by a physician (or other licensed health care provider) of his/her choice. The physician will determine the appropriate treatment and the amount of time the student will be absent (if applicable) from clinical education experiences.
3. If it is determined that the athletic training student may have a potentially infectious disease, he/she will be asked to relate that information to their preceptor and the Clinical Education Coordinator before their next scheduled clinical education experience.
4. The Clinical Education Coordinator, in consultation with the program’s Medical Director, will determine if the athletic training student requires further physician (or other related licensed health care provider) consultation/examination before he/she returns to clinical education experiences. The physician may schedule an examination, bar the athletic training student from reporting to their clinical setting, or permit the athletic training student to report back to their clinical setting.
5. Preceptors may require that an athletic training student who appears ill, be examined by either a physician (or other licensed health care provider) of the athletic training students’ choosing.
6. A physician (or licensed health care provider) must examine an athletic training student who misses any clinical education experience due to infectious illness before they are allowed to resume the clinical experience.

__________________________________________  ____________________________
Signature of Student                              Date
Appendix G

Ball State University Athletic Training Program
Bloodborne Pathogen Policy and Exposure Protocol

Part I: Blood borne Pathogen Policy

The Ball State University Athletic Training Program’s Bloodborne Pathogen Policy is intended to prevent transmission of bloodborne diseases within the clinical education environment. This policy is developed from and is in alignment with Ball State University’s Environmental Health and Safety Office Bloodborne Pathogen Exposure Control Plan, which is available at http://cms.bsu.edu/-/media/WWW/DepartmentalContent/RiskManagement/EHS/Bloodborne%20Pathogens%20Program%202015.pdf.

Training and education will be provided on a yearly basis for all students prior to beginning clinical or directed observation experiences. The training, as well as the guidelines/policies below, is based off of the Occupational Safety and Health Administration (OSHA) bloodborne pathogens standard. All students are required to utilize electronic resources (power point, video presentation) to review the material prior to taking an online quiz. Students must earn 80% or better on the quiz before engaging in clinical education experiences. Documentation of training is maintained electronically.

All students admitted into the Professional Phase of the program are required to obtain the Hepatitis B vaccination, if not already vaccinated. The University Health Center will provide, at the student’s expense, Hepatitis B vaccinations. The vaccine is given by injection on three separate dates. Usually, the first two are given 1 month apart, and the third dose is administered 5 months after the second. After these three doses, the Hepatitis B vaccine is 85-95% effective in preventing Hepatitis B infection in those whom receive the vaccinations.

Be aware of the following bloodborne pathogen guidelines when engaging in clinical education:

- The most serious infections spread through blood and body fluids are Hepatitis B (HBV), Hepatitis C (HCV) and Human Immunodeficiency Virus (HIV; the virus that causes AIDS). Hepatitis B vaccine will protect you from contracting Hepatitis B. There is no known vaccine for HCV or HIV.
- These infections are caused by exposure to blood or other body fluids.
- The most common exposure for athletic training students is treating bleeding and/or open wounds without protective barriers.
- The use of personal protective equipment (PPE), such as gloves, gowns, masks, and protective eyewear, is the best way to avoid exposure to bloodborne pathogens.
- Immediately and thoroughly wash hands and other skin surfaces that are contaminated with blood, body fluids containing visible blood, or other body fluids to which universal precautions apply. Use antibacterial sanitizer if hand washing is not available.
- Clinical education sites (e.g., athletic training facilities) have various PPE and other engineering controls available for student use such as: Gloves, masks, protective eyewear, gowns, gauze pads, biohazard bags, sharps containers, biohazard containers, absorbent materials, and approved disinfectant/cleaning supplies.
- Disposable articles contaminated with blood or other body fluids should be placed in a suitable biohazard container for storage. Tables and other surfaces should be washed immediately with an appropriate disinfectant.
- All sharp objects such as scalpel blades and razor blades should be disposed of in the designated disposal containers (sharp’s container/box).
- Bloodborne Pathogen Guidelines and Exposure Protocols are posted in clinical education sites (e.g., athletic training facilities) as appropriate. These procedures must be strictly followed.
Universal Precautions: Procedures for Handling Spilled Blood and Body Fluids

1. Apply disposable gloves.
2. Use paper towel or other absorbent material to absorb spill.
3. Place used towel/absorbent material in biohazard container or leak-proof plastic bag.
4. Flood area with 1:9 bleach solution, alcohol or sanitary absorbent agent, or other approved cleaning solution.
5. Clean area with paper towels, vacuum (dry or wet), or broom and dustpan.
6. Place used towel, vacuum cleaner bag, or waste in a biohazard container or a leak proof plastic bag.
7. Remove gloves properly (pull inside out).
8. Place gloves in biohazard container or biohazard bag and tie.
9. Wash hands with soap and water for 15 seconds or use antibacterial sanitizer if hand washing is not available.

Wound Care Procedures

1. Wash hands with soap and water for 15 seconds or use antibacterial sanitizer if hand washing is not available.
2. Apply gloves, inspect for rips or holes.
3. Place sterile gauze pad over wound; apply direct pressure to control bleeding.
4. Elevate wound site above heart level 5-10 minutes.
5. Clean wound with approved cleaner; use a circular outward spiral pattern to remove debris/bacteria.
6. Apply appropriate wound dressing/closure (e.g., Band-Aid, non-adherent pad, Steri-Strips). Ensure dressing is securely applied.
7. Dispose of all contaminated materials in a biohazard container.
8. Wash work surface with approved cleaner.
9. Remove gloves - pull inside out.
10. Wash hands with soap and water for 15 seconds or use antibacterial sanitizer if hand washing is not available.

Part II: Bloodborne Pathogen Exposure Protocol

Upon exposure to blood borne pathogen proceed as follows:

1. Wash exposed skin with soap and water. Flush eye or other mucous membranes with water for 15 minutes. Provide immediate first aid to the area, clean and dress as necessary. Exposure incident means that blood or other potentially infectious materials made contact with:
   a. Eye, mouth, or other mucous membrane
   b. Non-intact skin or parenteral contact
2. Inform clinical site preceptor and complete Bloodborne Pathogen Exposure Incident Form and/or any other necessary documentation for that clinical site.
3. Contact the Head Athletic Trainer and Clinical Education Coordinator as soon as possible but no longer than 24 hours after exposure.
   a. The Clinical Education Coordinator must contact BSU’s Environmental Health and Safety Office at 765-285-2825 either the same or next business day to report the exposure.
4. Determine (through your medical records) your Hepatitis B immunization status to take to your healthcare provider.
   a. Each athletic training student must have the Hepatitis B vaccine, be in the process of attaining the series at the time of acceptance into the program.
   b. Documentation of the vaccine will be on file with the Athletic Training Program.
5. Make an immediate appointment with the Student Health Center. If during the weekend, seek attention with primary care physician or an urgent care facility. Contact the Student Health Center on Monday. Blood should be tested for HBV, HCV, and HIV as soon as it is feasible through your health care provider; within 72 hours of incident is best. Your healthcare provider will then assess the need for any post-exposure treatment, and you should follow-up as requested.
   a. Understand that your health insurance may or may not cover these expenses. However, it is for your benefit to follow through with the recommended procedures.
Ball State University Athletic Training Program
Bloodborne Pathogen Exposure Incident Form

Student Name: ______________________________________  Student ID#: _____________  DOB: _______________

Preceptor Name: ________________________________  Employer: _____________________________________

Location of Incident: _______________________________________________________________________________

Date of Incident: _________________________________  Time of Incident: _______________________________

Give a detailed description of how the incident occurred. ___________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Name of source individual (if permission granted; if permission not granted or not known, write “unknown”):
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Device(s) being used during the incident: ________________________________________________________________

Personal protective equipment used during the incident: ___________________________________________________
__________________________________________________________________________________________________

Actions taken (first aid, clean-up, reporting, etc.): __________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Student Signature: _______________________________________________  Date: ___________________________

Supervisor Signature: _______________________________________________  Date: ___________________________

This report is to be kept in the student’s medical record at the Ball State University Student Health Center. A copy may be given to student or his/her department as requested and consent given.
Appendix H

Ball State University Athletic Training Program
Therapeutic Equipment Safety Policy

The Ball State University Athletic Training Program requires that therapeutic equipment at all clinical sites is inspected, calibrated, and maintained according to the manufacturer’s recommendations. The purpose of this policy is to safeguard the health of the patient and the safety of the student and clinician.

Maintenance of Therapeutic Equipment

1. A qualified technician will annually inspect and calibrate applicable therapeutic equipment at all clinical sites. This includes all sites at Ball State University and all off-campus clinical sites where athletic training students are placed.
   a. All pieces of therapeutic equipment (e.g. hydrocollator, ice machine, paraffin bath, exercise bike) that have electrical power should be inspected annually for safety.
   b. All therapeutic modalities that have electrical power and are used to administer specific dosage-based treatment (e.g. ultrasound, electrical muscle stimulation) should be inspected for safety, as well as calibrated.
   c. Sites accredited by the Joint Commission, Accreditation Association for Ambulatory Health Care, or other recognized external accrediting agencies are exempt from this requirement but are expected to follow the policies of those agencies.
2. The preceptor(s)/staff at each clinical site must arrange inspection and calibration for the therapeutic equipment.
3. The preceptor(s)/staff at each clinical site must arrange payment (if required) for the inspection and calibration. Ball State University is not responsible for payment or reimbursement for inspection and calibration at clinical sites.
4. Verification of inspection and calibration will be maintained as follows:
   a. Hard or electronic copies of inspection and calibration records by the preceptor(s) at each clinical site; the method may be determined by the site but the information must be readily accessible at any time by the preceptor(s) for presentation to the Clinical Education Coordinator/Athletic Training Program.
   b. Visible notification (e.g., sticker, signage) on applicable therapeutic equipment is ideal but not required.
5. The preceptor(s) at each clinical site are also responsible for ongoing maintenance of therapeutic equipment. Any equipment that appears to be unsafe for patient or clinician use shall not be used and shall be clearly marked as not for use until it can be properly inspected and calibrated.
6. The Clinical Education Coordinator will verify regular inspection and calibration of all applicable therapeutic equipment at each clinical site during routine site visits and/or prior to placement of athletic training students at a site.

Procedures for Safe Use of Therapeutic Equipment by Athletic Training Students

1. Athletic training students must be instructed in and must demonstrate competence in the use of specific therapeutic equipment before using said specific therapeutic equipment in the treatment or care of any patient.
   a. Instruction and evaluation shall occur in the classroom/laboratory setting.
   b. If a learning opportunity arises where the student may gain experience with therapeutic equipment but formal classroom/laboratory instruction has not yet taken place, the preceptor may instruct the student on the knowledge and skills associated with the therapeutic equipment so that the student may benefit from that situation.
2. Athletic training students will only use therapeutic equipment while under direct supervision of a preceptor.
3. Athletic training students will only apply therapeutic equipment according to manufacturer guidelines or applicable federal, state, and local laws, and according to accepted clinical practice standards.