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I. Athletic Training Education Program

VISION STATEMENT

Delta State University Athletic Training Education Program will provide a learning environment for undergraduate athletic training students committed to their professional growth and development in the field of athletic training.

MISSION STATEMENT

Delta State University Athletic Training Education Program in the Division of Health, Physical Education and Recreation functions within the mission of the university. The primary mission of the Athletic Training Education Program (ATEP) is to provide quality educational experiences through which students may receive didactic instruction and obtain the clinical skills necessary to practice as an athletic trainer certified by the Board of Certification, Inc (BOC) for Athletic Trainers. The ATEP conceptual framework provides the athletic training students with opportunities to gain and refine psychomotor skills specific to their professional course work. Recognizing the importance of excellence in teaching and instruction, the ATEP faculty, in their commitment to the combination of diverse clinical and intellectual experiences, collaborates in educating students. Through successful completion of the ATEP, graduates are prepared to enter the profession of Athletic Training and assume a leadership role in the implementation of changes evolving in the sports medicine arena.

PROGRAM GOALS

The Athletic Training Education Program aids in achieving the University Statement of Purpose through the following goals.

- Transferring knowledge and values related to athletic training to students
- Equipping students with needed skills and insights related to athletic training and by encouraging students to grow professionally and develop a strong sense of personal and professional integrity
- Preparing future athletic training, sport, fitness, exercise science, and physical education professionals to live purposeful lives through undergraduate professional preparation and education
- Providing services to the general community through research, professional service, continuing education, publications, presentations, and collaboration with the community

PROGRAM OBJECTIVES

Upon completion of the classroom, clinical and internship requirements of the Athletic Training Education Program, the student will be able to:

1. Demonstrate an understanding of the importance of prevention of athletic injuries and competency in the various methods and practices that could be used to help bring about a reduction in athletic injuries.

2. Integrate knowledge, skills, and critical thinking/problem solving abilities acquired into a framework for evaluating athletic injuries and illnesses.
3. Provide appropriate levels of emergency care for athletic injuries and differentiate between cases that require referral to emergency medical services or to physicians.

4. Construct, monitor, and modify a comprehensive rehabilitation program for athletes recuperating from illness and injury, facilitating their return to full athletic participation.

5. Initiate, organize, and administer an athletic training service program for a high school and/or college athletic program.

6. Provide information, counsel, and guidance covering a broad spectrum of issues of importance to overall health and well-being to the athletes, identify individuals in need of more advanced assistance and intervention in these areas, and direct those individuals to appropriate internal and external agencies.

7. Recognize that the body of knowledge, which comprises the discipline, is continually being amended as a result of research efforts, and thus appreciate the need for continuing education in order to keep abreast of these changes.

8. Develop a sense of professional ethics and incorporate those ethical standards in their professional activities.

PROGRAM DESCRIPTION

The Athletic Training Education Program is a two-fold program consisting of a didactic portion and a clinical experience portion. The total affect is to provide the necessary education to prepare students to qualify to take the Board of Certification Examination (BOC) for Athletic Trainers. The BOC Exam certifies students as entry-level athletic trainers.

The didactic aspect of the ATEP is a process to provide textual information. This portion incorporates academic work for a specific and specialized knowledge base. The clinical feature is designed as a two-tiered hands-on experience. The first consists of structured clinical education. The student will observe and perform clinical skills under the direct supervision of a certified athletic trainer and other allied health care professionals. During each academic year, the ATEP student will have a total of three clinical assignments (fall, winter and spring). Students, in cooperation with the clinical supervisors, are responsible for the health care of the athletes/patients at each assignment, respectfully. This provides practical application of learned skills in real time, real life situations. The second is an internship experience which allows the student to prepare for professional duties as an entry-level athletic trainer post-certification.
ORGANIZATIONAL DESIGN

For the Athletic Training Educational Program’s staff and students to function properly and professionally, the following chain of command is in effect:

All questions and/or issues related to student-athlete healthcare should be directed to the Head Athletic Trainer. All academic questions and/or issues (clinical or didactic) should be directed to the Athletic Training Education Program Director.

ATHLETIC TRAINING APPLICATION PROCEDURES

Prospective students must complete the following to be considered eligible for admission into the Athletic Training Education Program:

1. Submit a formal letter of application with questionnaire and resume.
2. Have a minimum grade point average of 2.5 in the general studies curriculum.
3. Have a minimum grade point average of 2.5 in the major studies curriculum.
4. Have a minimum grade of “C” or better in the pre-requisite courses (BIOL 100/110).
5. Submit completed application packet to the ATEP Director by April 1st.
6. Complete and have on file a copy of current American Red Cross First Aid and Professional Rescuer CPR/AED or comparable certification.
7. Complete and have on file with the ATEP Director a minimum 100 hours of observation under the direct supervision of an AT.
8. Complete and have on file with the ATEP Director and Student Health Services the University entrance physical and proof of Hepatitis B vaccination or waiver form.
9. Complete and have on file with the ATEP Director proof of attendance form for OSHA/HIPPA Training.
10. Review and Sign the Technical Standards for Admissions form.
11. Interview with the ATEP Selection Committee.
The application process should be started in the fall semester of the freshman and/or first year with formal application due by April 1st. Contact the Program Director (x4562) for more information or application packet.

PROBATION ADMISSION POLICY

Students that fall short of the eligibility requirements for full admission at the time of their application to the Athletic Training Education Program may be granted probationary admission. A student granted probationary admission must clear all deficiencies within the time limitations below or that student will not continue in the ATEP. Full admission status will be granted with the timely removal of all deficiencies.

1. Students that have less than a 2.5 overall grade point average at the time of their application to the program must attain the 2.5 grade point average by the end of the following semester.

2. Students that have less than a 2.5 grade point average in the major studies curriculum at the time of their application to the program must attain the 2.5 grade point average by the end of the following semester.

3. Students that have earned less than the grade of “C” in any of the pre-/co-requisite courses must retake the course or courses in which they are deficient and earn a grade of “C” or better by the end of the following semester, including summer sessions.

4. Students that do not hold current American Red Cross First Aid and Professional Rescuer CPR/AED or comparable certification must have corrected this deficiency by August 15 of that year.

5. Students that have not completed and appropriately documented the minimum 100 hours of observation under the supervision of an AT must have corrected this deficiency by August 15 of that year.

6. Students that have not completed and filed with the ATEP Director and Student Health Services the University entrance physical and proof of Hepatitis B vaccination must have corrected this deficiency by August 15 of that year.

CRITERIA FOR RETENTION IN THE ATHLETIC TRAINING EDUCATION PROGRAM

The following guidelines will be used to determine the “good standing” status of curriculum athletic training students.

1. Admittance into the Athletic Training Education Program as a curriculum athletic training student.

2. The student must maintain a GPA of 2.5 or higher overall and a 2.5 or higher GPA in the required major courses, with a ‘C’ or better for each course. The student will be required to retake any Athletic Training major course in which a grade of ‘D’ or lower is received. The student will be placed on academic probation for one semester if the GPA falls below a 2.5. Failure to meet this standard will result in dismissal from the ATEP.
3. The student will have on file with the ATEP Director:

- American Red Cross Professional Rescuer CPR card with AED or comparable certification, renewed every two years
- American Red Cross First Aid card or comparable certification, renewed every three years
- Proof of completion of OSHA training, renewed annually
- Copy of Hepatitis B vaccination or waiver form
- Professional liability insurance
- HIPPA form/confidentially form

Failure to have all necessary paperwork on file, on time, will result in the student being dismissed from the program.

4. The Athletic Training Staff will evaluate the student's clinical skills twice during each clinical assignment. Evaluations will be based on a student’s clinical performance. Any student receiving less than satisfactory evaluations will be placed on probation until the deficiency has been corrected.

5. The student must complete an individual timesheet on a daily basis, turned into the ATEP Director following the completion of each clinical course. Daily hours must be signed off by the clinical site supervisor each day. Failure to do so may result in exemption of those hours calculated for his/her total. Number of hours needed per semester is based on clinical requirements.

PROBATION PROTOCOL (based on the infraction):

**Grades** - consists of involvement in study hall or another form of educational assistance. The student will meet with Program Director to set-up a time-managed schedule and timeline. At the end of the probationary semester, if the individual has not attained a 2.5 GPA, the student will be dismissed from the ATEP.

**Paperwork** – consists of two weeks. The student has this time to produce the missing paper work. If the student has not produced the omitted files, he/she will be placed on one-month probation. Failure to comply at this time will result in dismissal from the ATEP. During the time of probation, the student is subject to additional duties assigned by the Athletic Training Staff. Such duties may be, but are not limited to, water duty, early morning “laundry duty”, and clerical duties.

**Evaluations** – consists of lessened interaction with student-athletes. The student will meet with the Athletic Training Staff to determine areas of and solutions for deficiency. Failure to improve within the semester may result in dismissal from the ATEP.

**Hours** – consists of lessened interaction with student-athletes, with more monitored athletic training room responsibilities. The student will meet with the Athletic Training Staff to determine the cause of insufficient hours. Failure to accumulate required hours per semester will hinder the student’s ability to meet criteria for the BOC.

**Ethics/Professional Code Violations** - Failure to comply with all ethical and professional practice and responsibility codes set forth by the NATA and BOC, respectfully, will result in immediate dismissal.
from ATEP. **No Exceptions.** The NATA Code of Ethics can be viewed at [www.nata.org](http://www.nata.org) and the BOC Standards for Professional Practice can be viewed at [www.bocatc.org](http://www.bocatc.org)

In summary, the ATEP Staff and Clinical Site Supervisors will incorporate the “Three Strike Rule” for the purpose of grading any infractions by the ATEP students. The “Three Strike Rule” works as follows:

- **Strike One:** a verbal warning and report to the ATEP Director
- **Strike Two:** a verbal and written warnings and report to the ATEP Director
- **Strike Three:** a written warning and meeting with the ATEP Disciplinary Committee

In the case where a student receives three strikes the student will be placed on probation (relieved of all clinical responsibilities) for a period of no less than one month. Exact probationary term will be determined by a majority vote of the ATEP Disciplinary Committee members.

**APPEALS PROCESS**

The student has the right to appeal the decisions made by the ATEP Disciplinary Committee, respectfully. The student must submit a letter to the Program Director within seven (7) days of receiving notification. The letter should contain the reason(s) the student is appealing the decision and why the decision should be reversed. A conference will be held with the student, Division Chair, Program Director, and Athletic Training Staff to discuss the decision and the student appeal.

**TRANSFER POLICY**

Students that transfer to Delta State University and declare a major in Athletic Training must meet all guidelines set forth in the University’s Catalog. To access transfer guidelines please visit http://www/docs/acad_affairs/2009-20Catalog%20ready%20for%20online%20w%20bookmarks%20and%20logo%207-17-09.pdf. Additionally, acceptable course substitution of any core requirement will be determined by the Division of Health, Physical Education and Recreation’s Chairperson.

**II. Curriculum Experience**

The Athletic Training Education Program (ATEP) is accredited by the Commission on Accreditation of Athletic Training Education (CAATE). To earn a degree in athletic training a student must apply for admission in the ATEP after completing prerequisite courses. The ATEP is a six (6) semester education program. The ATEP combines study in the liberal arts, life sciences, and behavioral sciences with study of athletic training to offer the Bachelor of Science in Athletic Training Degree. The purposes of the ATEP are to prepare practitioners of athletic training to meet the healthcare needs of the physically active, to provide a higher education foundation sufficient to support graduate study should the athletic training student elect to pursue a post-graduate degree, and to prepare the professional athletic training student for the Board of Certification (BOC) examination.
MAJOR COURSE REQUIREMENTS

General Education

ENG 101,102/103 (6hrs); ENG Lit Electives (6hrs); Fine Art (3hrs); HIS (6hrs);
MAT 104 (3hrs); BIO 100/110, 229 (7/8hrs); PSY 101 (3hrs);
Social Science electives (6hrs); Personal Development (2hrs) =45

Special Degree

ENG 300/301, CIS 205, HSE 140, FCS 343 = 10

Professional Education

HSE 336, PER 360, PER 380, PER 438, HSE 470 = 22

Specialized Education/Major

HSE 250, HSE 251, HSE253, HSE 254, HSE 255, HSE 258, HSE 259,
HSE 350, HSE 351, HSE 354, HSE356, HSE 357, HSE 358, HSE 359,
HSE 360, HSE 361, HSE 450, HSE 451, PER 391 = 47

TOTAL =124

INSTRUCTIONAL PLAN

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<th>Freshman Fall</th>
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<tr>
<td>ENG 101, Comp 1</td>
<td>ENG 102, Comp 2</td>
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<tr>
<td>HIS Elective</td>
<td>Soc Sci Elective</td>
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<tr>
<td>SPE 101 Speech</td>
<td>HIS Elective</td>
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<td>PSY 101 Psychology</td>
<td>Lab Science</td>
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<td>Soc Sci Elective</td>
<td>MAT 104 Algebra</td>
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<tr>
<td>Personal Development</td>
<td>Personal Development</td>
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Deadline for program application, April 1

***Entrance into the ATEP***

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<thead>
<tr>
<th>Sophomore Fall</th>
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<tbody>
<tr>
<td>ENG Lit Elective</td>
<td>ENG Lit Elective</td>
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<tr>
<td>BIO 229 A&amp;P</td>
<td>PER 438 Kinesiology</td>
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<tr>
<td>HSE 253 Intro to AT</td>
<td>HSE 357 Eval of LE</td>
</tr>
<tr>
<td>HSE 255 Taping &amp; Wrapping Tech</td>
<td>HSE 362 LE Lab</td>
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<tr>
<td>CIS 205 Computer</td>
<td>HSE 254 Found of AT</td>
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<tr>
<td>HSE 250 Clinical I</td>
<td>HSE 251 Clinical II</td>
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Total
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<tbody>
<tr>
<td>HSE 356 Eval of UE</td>
<td>PER 380 Measure &amp; Eval</td>
</tr>
<tr>
<td>HSE 359 UE Lab</td>
<td>Fine Arts Elective</td>
</tr>
<tr>
<td>HSE 336 Ex Phys</td>
<td>HSE 360 Phys Rehab Tech</td>
</tr>
<tr>
<td>PER 360 Ex Phys Clinical</td>
<td>HSE 361 Phys Rehab Tech Lab</td>
</tr>
<tr>
<td>HSE 350 Clinical III</td>
<td>HSE 351 Clinical IV</td>
</tr>
<tr>
<td>HSE 258 Modalities</td>
<td>FCS 343 Nutrition</td>
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<tr>
<td>HSE 259 Modalities Lab</td>
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<tr>
<td>ENG 300/301</td>
<td></td>
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<table>
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<th>Senior Fall</th>
<th>Senior Spring</th>
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<tbody>
<tr>
<td>HSE 354 Gen Med</td>
<td>HSE 470 Internship in AT</td>
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<td>HSE 450 Clinical V</td>
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<tr>
<td>HSE 140 Per &amp; Com Health</td>
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<tr>
<td>PER 391 O&amp;A</td>
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<tr>
<td>HSE 451 Senior Seminar</td>
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<td>Total</td>
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</tr>
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</table>

INTERNSHIP IN AT

Each student will have the opportunity during their last semester in the program to engage in an internship in athletic training. This opportunity will prepare students for work responsibilities as a certified athletic trainer post graduation. Specific guidelines on selection of site and procedures for internship experience is outlined in the “Delta State University Athletic Training Education Program Internship Manual” provided to students enrolled in the HSE 470: Internship in Athletic Training course.

III. CLINICAL EXPERIENCE

CLINICAL ASSIGNMENTS

As part of the CAATE standards, students will work with a variety of assignments. These variations include gender-specific, contact, extremity-specific, and diverse sporting types. The ATEP Director will assign students in order to fulfill these requirements.

Sport *Intercollegiate and Interscholastic* | Contact | Concentrated Extremity
---|---|---
Football | Equipment Intensive | Mixed
Men's Soccer | High Contact | LE
Women's Soccer | High Contact | LE
Women's Cross Country | Low Contact | LE

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11
Winter Assignments

<table>
<thead>
<tr>
<th>Sport</th>
<th>Contact Level</th>
<th>Assignment Type</th>
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<tbody>
<tr>
<td>Men's Basketball</td>
<td>High Contact</td>
<td>Mixed</td>
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<tr>
<td>Women's Basketball</td>
<td>High Contact</td>
<td>Mixed</td>
</tr>
<tr>
<td>Men’s Swimming</td>
<td>Low Contact</td>
<td>UE</td>
</tr>
<tr>
<td>Women’s Swimming</td>
<td>Low Contact</td>
<td>UE</td>
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Spring Assignments

<table>
<thead>
<tr>
<th>Sport</th>
<th>Contact Level</th>
<th>Assignment Type</th>
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<tbody>
<tr>
<td>Football</td>
<td>Equipment Intensive</td>
<td>Mixed</td>
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<tr>
<td>Softball</td>
<td>Low Contact</td>
<td>UE</td>
</tr>
<tr>
<td>Baseball</td>
<td>Low Contact</td>
<td>UE</td>
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Other

<table>
<thead>
<tr>
<th>Facility</th>
<th>Contact Level</th>
<th>Assignment Type</th>
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<tbody>
<tr>
<td>Athletic Training Facility</td>
<td>N/A</td>
<td>Mixed</td>
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<tr>
<td>Outpatient Physical Therapy Clinic</td>
<td>N/A</td>
<td>Mixed</td>
</tr>
<tr>
<td>General Medical</td>
<td>N/A</td>
<td>Mixed</td>
</tr>
</tbody>
</table>

ATEP CLINICAL EXPERIENCE HOURS

- Athletic Training Students (ATS) are required to keep track of their hours for partial credit in clinical courses.
- Hours are to be recorded daily and signed daily by the clinical supervisor.
- Timesheets are to be turned in to the ATEP Director by noon following completion of the clinical course.
- Students will record one hour for each hour they are engaged in athletic training clinical experiences. Partial hours are recorded to the nearest 1/4 hour.
- Students traveling on a road trip may not record hours for travel (hours to and from the site or hours spent in a hotel/motel are not acceptable).
- Hours accrued through any outside athletic training activity should be agreed upon by discussion with ATEP Director and verified by the supervising Clinical Instructor (CI) and/or Approved Clinical Instructor (ACI). These hours will be recorded as volunteer hours only.
- The ACI is responsible for checking the recorded hours on each form and approving it with his/her signature.

*As an observation student these hours do not count toward the minimum 1000 hours required for graduation by the Athletic Training Education Program.

OBSERVATIONAL OPPORTUNITIES

As a part of their educational experience, students will have several opportunities to observe day-to-day practices of orthopedic surgery, pharmacy and medical insurance and billing by allied health care professionals involved with and approved by the Delta State University ATEP.

Students are always encouraged to observe surgeries performed on DSU student-athletes. Prior to each surgical case, each student is encouraged to review the surgical procedures and other articles and text pertaining to the surgery and injury. The educational experience during the surgery will be much better if the student has some preliminary knowledge. Note: These instances do count toward clinical experience accumulated hours.
VOLUNTEER OPPORTUNITIES

As a part of their educational experience, students will have several volunteer opportunities to work with approved DSU ATEP personnel at high school and community functions. These opportunities are recorded and credited to the students’ overall experience as an athletic training student; however, will not count toward clinical experience accumulated hours. They will be viewed as professional development opportunities only.

PROFESSIONAL APPEARANCE POLICY

In order to establish a professional appearance consistent with allied health care professionals and Delta State University, all Athletic Training Students (ATS) must abide by the athletic training professional appearance policy listed below. Any student who cannot abide by this will be dealt with accordingly, with chronic offenders facing probation, suspension or termination from the program. The professional appearance policy is in effect at all times, day or night, when in the athletic training facilities or at athletic practices, regardless of whether on duty or not.

It is the student’s responsibility to be in appropriate dress at all times while conducting athletic training student responsibilities at Delta State University. At no time will a student’s absence or tardy report be excused for a student being dismissed for inappropriate dress.

1. A student working in the capacity of an ATS must wear DSU Athletic Training Issued Apparel, DSU ATEP apparel or apparel issued by DSU Sports Medicine Society. No other school’s logo must be worn.

2. DSU athletic training apparel must only be worn while working as an ATS.

3. Shirts will be tucked in neatly at all times when performing duties as an ATS or when in the Athletic Training Facility (no exceptions).

4. Pants will be worn in an appropriate and neat manner (waist of pants on the person’s waist, no cut off bottoms or excess amounts of holes, etc). No jeans allowed for athletic events or at affiliated clinical sites. Jeans are acceptable at some clinical rotations during practices. Students must comply with Clinical Supervisor’s decision regarding jeans at practice. Khakis, Tan or Black pants are appropriate.

5. Shorts must all be of appropriate length: Must not be too short: finger-tip rule-standing straight up, tips of fingers must not pass the hem of the shorts; Must not be too long: athletic shorts must not pass the knee. Only khaki, tan or black shorts are acceptable at athletic events.

6. All shoes must be closed-toed. No sandals or flops will be worn will working.

7. All clothing must be appropriate in length and fit in order to cover skin and underclothing.

8. Game attire may be business causal (depending on the sport). All dress requirements must be established prior to the event. Check with your Clinical Supervisor for full details.
9. Students must dress in polo style shirt and khaki pants or more professional dress while assigned to General Medical and Outpatient Physical Therapy Assignments and all additional educational opportunities (as previously addressed).

10. Earrings on male students are unacceptable. Females may wear earrings if appropriate (may not be long or dangling). Visible body art and piercing are unacceptable.

11. Hairstyles should be neat and maintained. For males, hair may not extend below the shirt collar and facial hair must be kept neatly trimmed. Make a point to be cleanly shaven (no stubble) especially at athletic events, physician visits and physicals. For females with long hair, it must be pulled back/put up in a neat and functional fashion (especially while performing duties such as wound care).

12. Jewelry (necklaces, bracelets, watches, rings, etc.) must not interfere with the proper delivery of patient care. No choke necklaces will be allowed.

13. Hats may be worn outdoors. Check with your Clinical Supervisor regarding hats at indoor practices. No hats are to be worn at indoor events or in physical therapy and medical facilities.

Failure to abide by this policy will result in the student being sent home to change. Habitual infractions will result in probation and eventually dismissal from the ATEP.

UNIVERSITY CODE OF CONDUCT POLICY

1. The use of illegal drugs will not be tolerated: anyone caught on or away from campus using or selling drugs or possession of drug paraphernalia will be subject to removal from the Athletic Training Education Program as ruled on by The University Disciplinary Committee.

2. Any actions committed on or away from campus that are illegal and punishable by any law where the student is acting in a capacity, or representing the University in any capacity that puts the Athletic Training Education Program or The University in a poor public position may lead to probation, suspension, or termination of enrollment in the Athletic Training Education Program as ruled on by The University Disciplinary Committee.

3. Any action deemed as, construed as, or pertaining to sexual harassment as defined in The University Student Catalog by any student in the Athletic Training Education Program will result in referral to The University Disciplinary Committee for appropriate action and possible removal from the Athletic Training Education Program.

4. Failure to meet or maintain the academic requirements of the Athletic Training Education Program will result in probation, suspension, or termination of enrollment in the program. The student must then go through the application process as stated in the University Student Catalog.

MORAL CHARACTER CODE OF CONDUCT

To become a more holistic person and professional, all students are encouraged to learn and exercise the following principles than define individual character.

1. Dependability:
   a. On time regardless of schedule changes
   b. Ability to complete tasks in a timely manner
c. Available to answer questions and provide assistance

2. Enthusiasm:
   a. Wants to be in the athletic training facility
   b. Positive attitude
   c. Leaves problems at the door

3. Initiative:
   a. Asks questions
   b. Doing things without being asked
   c. Active in the learning process

4. Resourcefulness:
   a. Creativity
   b. Using what is available to find answers (staff, literature, etc.)
   c. Applying classroom knowledge

5. Ability to make sound decisions while working for and representing Delta State University
   a. Decisions both in and out of the athletic training facility
   b. Always representing Delta State University Athletic Training
   c. Interactions with visiting team staff
   d. Actions while representing Delta State University

6. Ability to maintain an acceptable professional appearance
   a. Clothing (neat, clean, appropriate according to our dress code)
   b. Posture (standing, sitting, etc.)
   c. Behavior

7. Ability to seek career-minded self improvement
   a. Initiative
   b. Working on professional growth
   c. Asking questions
   d. Concern for what is going on
   e. Striving to improve

8. Ability to react positively to work-related criticism
   a. Take it in stride and uses feedback for improvement
   b. Not making excuses

9. Ability to effectively manage time
   a. Balancing athletic training facility and other responsibilities
   b. Preoccupation with social issues
   c. Multitasking
   d. Scheduling treatments with athletes and other athletic training staff
   e. Adaptability/flexibility
   f. Preparing for practice and competitions effectively and efficiently
   g. Using athletic training facility time effectively and efficiently
10. Role model
   a. Presents professional demeanor that positively influences people inside and outside the athletic training facility

11. Communication
   a. Effectiveness with athletes, AT Staff, students, sports medicine team
   b. Coordinating schedules
   c. Consulting with AT prior to discussing assessment with athlete

12. Collegiality
   a. Accepting and respecting other opinions
   b. Allowing other people to make reasonable decisions that differs from yours
   c. Being open-minded

13. Caring
   a. Demeanor toward athletes
   b. Demeanor toward peers and other staff
   c. Demeanor in the Athletic Training Facility in general

ATEP CODE OF CONDUCT POLICY

1. The Athletic Training Student (ATS) shall dress in a professional manner to positively represent the Athletic Training Education Program in every aspect, as stated in the professional appearance policy.

2. The ATS shall NOT fraternize with the athletes in any aspect, which is known to be unhealthy and/or unethical in representing the Athletic Training Education Program.

3. The ATS shall exhibit courtesy and professionalism in all aspects while representing the Athletic Training Education Program.

4. The ATS shall respect and abide by the instructions and rules established by the Athletic Training Staff.

5. The ATS shall demonstrate honesty, integrity, and loyalty in all aspects of the Athletic Training Education Program.

6. The ATS shall NOT condone the unauthorized and/or non-therapeutic use of drugs and/or alcohol. It will be considered a violation of this code should you be involved in any public embarrassment, violent incidents, or damage of property as a result of substance abuse. Punitive action from the Athletic Training Education Program Director will result.

7. The ATS shall NOT wear any part of his/her athletic training uniform or represent the Delta State University Athletic Training Education Program in any fashion while partaking in extracurricular activities, which are not sanctioned by the Athletic Training Education Program staff.

8. The ATS shall NOT condone, engage in, or defend unsportsmanlike practices.

9. The ATS who provides or accepts academic work that is not his/her own is in violation of Delta State University Code of Conduct Policy and will be penalized.
10. The ATS must demonstrate sound moral judgment in his/her academics and in his/her decisions that directly involve the Athletic Training Education Program.

11. The ATS shall **NOT** remove materials from the athletic training room for his/her own personal use.

**EDUCATIONAL COMPETENCIES AND CLINICAL PROFICIENCIES IN ATHLETIC TRAINING**

Guided by the Commission on Accreditation of Athletic Training Education (CAATE) Standards, the National Athletic Trainers’ Association Educational Council (NATAEC) has established the educational competencies and clinical proficiencies necessary to qualify for the Board of Certification (BOC) Examination and hence become an entry-level athletic trainer. These competencies and proficiencies will be instructed in academic and clinical education classes and refined in each student’s clinical experiences. Each student will be required to learn and practice each identified competency and then be evaluated on his/her level of proficiency by a Delta State University Approved Clinical Instructor (ACI).

The following is a progression of clinical education skills for the Delta State University Athletic Training Education Program. Each semester students will learn specific skills and as they progress through the curriculum the number of skills each student is responsible for increases. Therefore, each clinical education course with the exception of the first will have specific skills and continued skills as part of the framework.

Once the student has applied to the Athletic Training Education Program and been classified as a Curriculum Athletic Training Student, the student progresses through the clinical education requirements and skills as they are sequenced. They are organized to correspond with classroom instruction and expected levels of individual responsibility and maturity. The performance of the educational competencies and clinical proficiencies are partial requirements for the class grade. Failure to complete this portion of your Clinical Experiences in Athletic Training course, respectfully, will reflect in the course grade AND the student will not be able to progress to the next clinical course until the competencies and proficiencies are successfully completed. Students will **NOT** receive an “incomplete” for these classes.

No student shall perform a skill on an athlete, until a competency has been instructed in class and satisfactorily practiced by the student in a laboratory environment. Only under direct supervision by a qualified supervisor should a student administer treatment, etc. for an athlete. Failure to stay within an individual’s scope of practice may result in probation (i.e. lessened interaction with student-athletes) or dismissal from the ATEP, for multiple infractions.

**SPECIFIC AND CONTINUED COMPETENCY DEMONSTRATIONS TO BE EVALUATED BY APPROVED CLINICAL INSTRUCTORS (ACIs) DURING ATHLETIC TRAINING STUDENTS’ CLINICAL EXPERIENCES**

**HSE 250, sophomore level (1st semester) psychomotor competencies to be evaluated:**

<table>
<thead>
<tr>
<th>Competency Area</th>
<th>Specific Competencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Usage of electronic injury reporting systems</td>
<td></td>
</tr>
<tr>
<td>Usage of basic medical abbreviations and terminology</td>
<td></td>
</tr>
<tr>
<td>Perform appropriate documentation of over-the-counter medications</td>
<td></td>
</tr>
<tr>
<td>Assess and accurately measure vital signs (temperature, blood pressure, pulse, respirations, height, weight, urinalysis using chemstrips)</td>
<td></td>
</tr>
</tbody>
</table>
Perform patient preparation and application of selected modalities (ice bag, ice massage, hot pack, whirlpool)
Perform patient preparation (only; no treatment application) for electrical stimulation, intermittent compression, traction and therapeutic ultrasound
Adhere to OSHA guidelines while performing basic wound care techniques
Ability to correctly triage emergency situations
Ability to participate as a member and as a leader in the stabilization and spine boarding of a suspected spinal injury
Performs the skills of first aid and emergency care
Performs rescue breathing and CPR, including two-person skills and the use of a bag valve and a pocket mask
Selection and application of taping and wrapping to various body parts
Selection and fitting of protective equipment (headgear, footwear, shoulder pads, mouth guards, rib guards, ankle and knee braces)
Selection and application of appropriate splints to various body parts
Construct and apply protective devices (doughnut pad, custom-made splints, contusion pads, etc.)
Replicate procedures for using an emergency epinephrine injection to prevent anaphylactic shock
Replicate procedures for using an emergency bronchodilator (inhaler) to prevent asthma attacks

**HSE 251, sophomore level (2nd semester) psychomotor competencies to be evaluated:**

<table>
<thead>
<tr>
<th>Ability to identify and palpate bony landmarks and soft tissue on the le</th>
<th>Ability to perform comprehensive injury assessment of the foot, ankle and lower leg</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assess active and passive range of motion of selected body parts (foot, ankle, knee, hip) using standard goniometric techniques</td>
<td>Ability to perform comprehensive injury assessment of knee and related structures</td>
</tr>
<tr>
<td>Ability to perform comprehensive injury assessment of hip, pelvis and thigh</td>
<td>Ability to perform comprehensive injury assessment of thoracic and lumbar spine</td>
</tr>
<tr>
<td>Performs primary/secondary survey/assessment in appropriate situations</td>
<td>Evaluate and manage heat-related illnesses</td>
</tr>
<tr>
<td>Collects and interprets climatic data to determine a safe playing environment</td>
<td>Documents and interprets weight charts</td>
</tr>
<tr>
<td>Usage of electronic injury reporting systems</td>
<td>Usage of basic medical abbreviations and terminology</td>
</tr>
<tr>
<td>Perform appropriate documentation of over-the-counter medications</td>
<td>Assess and accurately measure vital signs (temperature, blood pressure, pulse, respirations, height, weight, urinalysis using chemstrips)</td>
</tr>
<tr>
<td>Perform patient preparation and application of selected modalities (ice bag, ice massage, hot pack, whirlpool)</td>
<td>Perform patient preparation (only; no treatment application) for electrical stimulation, intermittent compression, traction and therapeutic ultrasound</td>
</tr>
<tr>
<td>Adhere to OSHA guidelines while performing basic wound care techniques</td>
<td>Ability to correctly triage emergency situations</td>
</tr>
<tr>
<td>Ability to participate as a member and as a leader in the stabilization and spine boarding of a suspected spinal injury</td>
<td>Performs the skills of first aid and emergency care</td>
</tr>
<tr>
<td>Performs rescue breathing and CPR, including two-person skills and the use of a bag valve and a pocket mask</td>
<td>Selection and application of taping and wrapping to various body parts</td>
</tr>
<tr>
<td>Selection and fitting of protective equipment (headgear, footwear, shoulder pads, mouth guards, rib guards, ankle and knee braces)</td>
<td>Selection and application of appropriate splints to various body parts</td>
</tr>
<tr>
<td>Construct and apply protective devices (doughnut pad, custom-made splints, contusion pads, etc.)</td>
<td>Replicate procedures for using an emergency epinephrine injection to prevent anaphylactic shock</td>
</tr>
<tr>
<td>Replicate procedures for using an emergency bronchodilator (inhaler) to prevent asthma attacks</td>
<td>HSE 251, sophomore level (2nd semester) psychomotor competencies to be evaluated:</td>
</tr>
</tbody>
</table>
guards, ankle and knee braces)
Selection and application of appropriate splints to various body parts
Construct and apply protective devices (doughnut pad, custom-made splints, contusion pads, etc.)
Replicate procedures for using an emergency epinephrine injection to prevent anaphylactic shock
Replicate procedures for using an emergency bronchodilator (inhaler) to prevent asthma attacks

**HSE 350, junior level (3rd semester) psychomotor competencies to be evaluated:**

<p>| Ability to identify and palpate bony landmarks and soft tissue on the UE |
| Assess active and passive range of motion of selected body parts (cervical spine, shoulder, elbow, wrist, hand, fingers) using standard goniometric techniques |
| Ability to perform comprehensive injury assessment of the shoulder complex |
| Ability to perform comprehensive injury assessment of elbow |
| Ability to perform comprehensive injury assessment of forearm, wrist and hand |
| Ability to perform comprehensive injury assessment of thorax and abdominal regions |
| Ability to perform comprehensive injury assessment of head and face |
| Administers static and dynamic postural evaluation procedures, including tests for muscle shortening |
| Ability to select the appropriate parameters for and prepare and apply superficial cold treatment (ice bag, ice massage, cold whirlpool, ice immersion, vapo-coolant spray, controlled cold therapy unit) |
| Ability to select the appropriate parameters for and prepare and apply superficial heat treatment (moist heat pack, warm whirlpool, contrast bath, paraffin bath) |
| Ability to select the appropriate parameters for and prepare and apply various therapeutic ultrasound treatments (bladder, underwater, combo, direct) |
| Ability to select the appropriate parameters for and prepare and apply various electrical stimulation treatments |
| Ability to select the appropriate parameters for and prepare and apply intermittent compression for UE/LE injuries |
| Ability to select the appropriate parameters for and prepare and apply various traction treatments (mechanical, manual, positional) |
| Ability to select the appropriate parameters for and prepare and perform a massage treatment utilizing various massage strokes |
| Ability to identify and palpate bony landmarks and soft tissue on the le |
| Assess active and passive range of motion of selected body parts (foot, ankle, knee, hip) using standard goniometric techniques |
| Ability to perform comprehensive injury assessment of the foot, ankle and lower leg |
| Ability to perform comprehensive injury assessment of knee and related structures |
| Ability to perform comprehensive injury assessment of hip, pelvis and thigh |
| Ability to perform comprehensive injury assessment of thoracic and lumbar spine |
| Performs primary/secondary survey/assessment in appropriate situations |
| Evaluate and manage heat-related illnesses |
| Collects and interprets climatic data to determine a safe playing environment |
| Documents and interprets weight charts |
| Usage of electronic injury reporting systems |
| Usage of basic medical abbreviations and terminology |
| Perform appropriate documentation of over-the-counter medications |
| Assess and accurately measure vital signs (temperature, blood pressure, pulse, respirations, height, weight, urinalysis using chemstrips) |
| Perform patient preparation and application of selected modalities (ice bag, ice massage, hot pack, whirlpool) |
| Perform patient preparation (only; no treatment application) for electrical stimulation, intermittent |</p>
<table>
<thead>
<tr>
<th>Compression, traction and therapeutic ultrasound</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adhere to OSHA guidelines while performing basic wound care techniques</td>
</tr>
<tr>
<td>Ability to correctly triage emergency situations</td>
</tr>
<tr>
<td>Ability to participate as a member and as a leader in the stabilization and spine boarding of a suspected spinal injury</td>
</tr>
<tr>
<td>Performs the skills of first aid and emergency care</td>
</tr>
<tr>
<td>Performs rescue breathing and CPR, including two-person skills and the use of a bag valve and a pocket mask</td>
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<td>Selection and application of taping and wrapping to various body parts</td>
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<td>Selection and fitting of protective equipment (headgear, footwear, shoulder pads, mouth guards, rib guards, ankle and knee braces)</td>
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<tr>
<td>Replicate procedures for using an emergency bronchodilator (inhaler) to prevent asthma attacks</td>
</tr>
</tbody>
</table>

HSE 351, junior level (4th semester) psychomotor competencies to be evaluated:

| Ability to instruct and perform various therapeutic exercises for UE/LE |
| Demonstrates appropriate methods of evaluating rehabilitation and reconditioning progress and interpreting results |
| Utilizes isokinetic and other testing equipment to develop individualized rehabilitation or reconditioning programs |
| Demonstrates the ability to instruct and perform various contemporary therapeutic exercises (joint mobilizations, plyometrics, PNF, soft-tissue mobilizations, etc.) |
| Ability to instruct and perform various aquatic therapy exercises for UE/LE |
| Uses motivational techniques with athletes and others involved in physical activity |
| Ability to interpret nutritional information and applies this information in developing proper nutritional plans for athletes, including pre-event meal plans |
| Ability to identify and palpate bony landmarks and soft tissue on the UE |
| Assess active and passive range of motion of selected body parts (cervical spine, shoulder, elbow, wrist, hand, fingers) using standard goniometric techniques |
| Ability to perform comprehensive injury assessment of the shoulder complex |
| Ability to perform comprehensive injury assessment of elbow |
| Ability to perform comprehensive injury assessment of forearm, wrist and hand |
| Ability to perform comprehensive injury assessment of thorax and abdominal regions |
| Ability to perform comprehensive injury assessment of head and face |
| Administers static and dynamic postural evaluation procedures, including tests for muscle shortening |
| Ability to select the appropriate parameters for and prepare and apply superficial cold treatment (ice bag, ice massage, cold whirlpool, ice immersion, vapo-coolant spray, controlled cold therapy unit) |
| Ability to select the appropriate parameters for and prepare and apply superficial heat treatment (moist heat pack, warm whirlpool, contrast bath, paraffin bath) |
| Ability to select the appropriate parameters for and prepare and apply various therapeutic ultrasound treatments (bladder, underwater, combo, direct) |
| Ability to select the appropriate parameters for and prepare and apply various electrical stimulation treatments |
| Ability to select the appropriate parameters for and prepare and apply intermittent compression for UE/LE injuries |
| Ability to select the appropriate parameters for and prepare and apply various traction treatments (mechanical, manual, positional) |
| Ability to select the appropriate parameters for and prepare and perform a massage treatment utilizing various massage strokes |
| Ability to identify and palpate bony landmarks and soft tissue on the lower extremities |
| Assess active and passive range of motion of selected body parts (foot, ankle, knee, hip) using standard goniometric techniques |
| Ability to perform comprehensive injury assessment of the foot, ankle and lower leg |
| Ability to perform comprehensive injury assessment of knee and related structures |
| Ability to perform comprehensive injury assessment of hip, pelvis and thigh |
| Ability to perform comprehensive injury assessment of thoracic and lumbar spine |
| Performs primary/secondary survey/assessment in appropriate situations |
| Evaluate and manage heat-related illnesses |
| Collects and interprets climatic data to determine a safe playing environment |
| Documents and interprets weight charts |
| Usage of electronic injury reporting systems |
| Usage of basic medical abbreviations and terminology |
| Perform appropriate documentation of over-the-counter medications |
| Assess and accurately measure vital signs (temperature, blood pressure, pulse, respirations, height, weight, urinalysis using chemstrip) |
| Perform patient preparation and application of selected modalities (ice bag, ice massage, hot pack, whirlpool) |
| Perform patient preparation (only; no treatment application) for electrical stimulation, intermittent compression, traction and therapeutic ultrasound |
| Adhere to OSHA guidelines while performing basic wound care techniques |
| Ability to correctly triage emergency situations |
| Ability to participate as a member and as a leader in the stabilization and spine boarding of a suspected spinal injury |
| Performs the skills of first aid and emergency care |
| Performs rescue breathing and CPR, including two-person skills and the use of a bag valve and a pocket mask |
| Selection and application of taping and wrapping to various body parts |
| Selection and fitting of protective equipment (headgear, footwear, shoulder pads, mouth guards, rib guards, ankle and knee braces) |
| Selection and application of appropriate splints to various body parts |
| Construct and apply protective devices (doughnut pad, custom-made splints, contusion pads, etc.) |
| Replicate procedures for using an emergency epinephrine injection to prevent anaphylactic shock |
| Replicate procedures for using an emergency bronchodilator (inhaler) to prevent asthma attacks |

**HSE 450, senior level (5th semester) psychomotor competencies to be evaluated:**

| Ability to utilize a physician’s desk reference (PDR) or other database to obtain information related to medications commonly prescribed to patients |
| Ability to recognize a pharmacological emergency (e.g. Overdose, anaphylactic shock, etc.) |
| Ability to perform comprehensive assessment, including recognizing signs and symptoms of an athlete or patient with a non-traumatic illness or a general medical condition (e.g. Bronchitis, infectious mononucleosis, std, etc.) |
| Demonstrates the ability to recognize infectious and non-infectious illnesses |
| Demonstrate the ability to replicate the reporting an incident to the nearest poison control center |
| Demonstrates appropriate use of the otoscope for ear and nasal examinations |
| Conducts auscultations of normal heart, breath and bowel sounds, demonstrating proper position and location of stethoscope |
| Demonstrate the ability to interpret case studies |
| Demonstrate the ability to interpret literature reviews |
| Demonstrate the ability to interpret statistical data and outcome assessments |
| Ability to implement an EAP for athletic activity |
| Ability to communicate with various healthcare professionals |
| Simulate confidential conversations with appropriate health care workers in terms of psychological intervention |
| Ability to communicate with diverse populations |
| Ability to communicate with various healthcare professionals with sensitivity to patient confidentiality |
| Ability to design an athletic training facility |
| Ability to develop a budget and maintain inventory of athletic supplies and equipment |
| Ability to recognize unusual behaviors of persons in need of psychological intervention and make the appropriate referral to staff athletic trainers and/or team physicians |
| Ability to recognize a person with a suspected drug abuse problem and make the appropriate referral to staff athletic trainers and/or other team physicians |
| Demonstrates ability to use appropriate medical documentation to record injuries and illnesses |
| Demonstrates ability to organize a comprehensive patient-file management system that uses both paper and electronic media |
| Techniques and methods for disseminating injury prevention and health care information to healthcare professionals, athletes and general public |
| Demonstrates knowledge of procedures required for obtaining and maintaining credentials as a certified athletic trainer, including requirements for state licensures and continuing education |
| Demonstrates adherence to the NATA code of ethics and standards for professional practice |
| Advocates the NATA as an allied health professional organization dedicated to the care of the physically active individual |
| Defends the moral and ethical responsibility to intervene in situations that conflict with NATA standards |
| Ability to instruct and perform various therapeutic exercises for UE/LE |
| Demonstrates appropriate methods of evaluating rehabilitation and reconditioning progress and interpreting results |
| Utilizes isokinetic and other testing equipment to develop individualized rehabilitation or reconditioning programs |
| Demonstrates the ability to instruct and perform various contemporary therapeutic exercises (joint mobilizations, plyometrics, PNF, soft-tissue mobilizations, etc.) |
| Ability to instruct and perform various aquatic therapy exercises for UE/LE |
| Uses motivational techniques with athletes and others involved in physical activity |
| Ability to interpret nutritional information and applies this information in developing proper nutritional plans for athletes, including pre-event meal plans |
| Ability to identify and palpate bony landmarks and soft tissue on the UE |
| Assess active and passive range of motion of selected body parts (cervical spine, shoulder, elbow, wrist, hand, fingers) using standard goniometric techniques |
| Ability to perform comprehensive injury assessment of the shoulder complex |
| Ability to perform comprehensive injury assessment of elbow |
| Ability to perform comprehensive injury assessment of forearm, wrist and hand |
| Ability to perform comprehensive injury assessment of thorax and abdominal regions |
| Ability to perform comprehensive injury assessment of head and face |
| Administers static and dynamic postural evaluation procedures, including tests for muscle shortening |
| Ability to select the appropriate parameters for and prepare and apply superficial cold treatment (ice bag, ice massage, cold whirlpool, ice immersion, vapo-coolant spray, controlled cold therapy unit) |
| Ability to select the appropriate parameters for and prepare and apply superficial heat treatment (moist heat pack, warm whirlpool, contrast bath, paraffin bath) |
| Ability to select the appropriate parameters for and prepare and apply various therapeutic ultrasound treatments (bladder, underwater, combo, direct) |
| Ability to select the appropriate parameters for and prepare and apply various electrical stimulation treatments |
| Ability to select the appropriate parameters for and prepare and apply intermittent compression for UE/LE injuries |
| Ability to select the appropriate parameters for and prepare and apply various traction treatments (mechanical, manual, positional) |
| Ability to select the appropriate parameters for and prepare and perform a massage treatment utilizing various massage strokes |
| Ability to identify and palpate bony landmarks and soft tissue on the lower extremity |
| Assess active and passive range of motion of selected body parts (foot, ankle, knee, hip) using standard goniometric techniques |
| Ability to perform comprehensive injury assessment of the foot, ankle and lower leg |
| Ability to perform comprehensive injury assessment of knee and related structures |
| Ability to perform comprehensive injury assessment of hip, pelvis and thigh |
| Ability to perform comprehensive injury assessment of thoracic and lumbar spine |
| Performs primary/secondary survey/assessment in appropriate situations |
| Evaluate and manage heat-related illnesses |
| Collects and interprets climatic data to determine a safe playing environment |
| Documents and interprets weight charts |
| Usage of electronic injury reporting systems |
| Usage of basic medical abbreviations and terminology |
| Perform appropriate documentation of over-the-counter medications |
| Assess and accurately measure vital signs (temperature, blood pressure, pulse, respirations, height, weight, urinalysis using chemstrips) |
| Perform patient preparation and application of selected modalities (ice bag, ice massage, hot pack, whirlpool) |
| Perform patient preparation (only; no treatment application) for electrical stimulation, intermittent compression, traction and therapeutic ultrasound |
| Adhere to OSHA guidelines while performing basic wound care techniques |
| Ability to correctly triage emergency situations |
| Ability to participate as a member and as a leader in the stabilization and spine boarding of a suspected spinal injury |
| Performs the skills of first aid and emergency care |
| Performs rescue breathing and CPR, including two-person skills and the use of a bag valve and a pocket mask |
| Selection and application of taping and wrapping to various body parts |
| Selection and fitting of protective equipment (headgear, footwear, shoulder pads, mouth guards, rib guards, ankle and knee braces) |
| Selection and application of appropriate splints to various body parts |
| Construct and apply protective devices (doughnut pad, custom-made splints, contusion pads, etc.) |
| Replicate procedures for using an emergency epinephrine injection to prevent anaphylactic shock |
| Replicate procedures for using an emergency bronchodilator (inhaler) to prevent asthma attacks |
IV. DUTIES AND RESPONSIBILITIES

PROGRAM EXPECTATIONS

Observation Students

The intent of the first year in our academic major is for students to observe and learn about the profession of athletic training. Each student is to familiarize him/herself with the roles and responsibilities of an ATS, policy and procedures, day-to-day operations, and the athletic training and athletic facilities. This semester is for exploration and to help students determine if athletic training is his/her career of choice.

- The observation student will prepare for application to the ATEP. If the student is a transfer or decides upon the major late, the student is held to the same application deadline for admissions into the ATEP as indicated in application procedures.
- The student may observe curriculum athletic training students and certified athletic trainers in the athletic training facility and with specific athletic teams. Each student should have a variety of settings and sports in which to observe while under the direct supervision of a certified athletic trainer. Observation students are required to obtain a minimum of 100 hours of observation and complete specific criteria (as outlined in Admission Requirements) before applying to the Athletic Training Education Program.
- The student will pass with a grade of ‘C’ or higher in all pre-requisite courses for admission to the Athletic Training Education Program.
- The student shall adhere to all policies and procedures as outlined in this manual.

To progress in the Athletic Training Education Program, students must complete academic course work, clinical education requirements, and be officially accepted into the Athletic Training Education Program.

Curriculum Athletic Training Students – Sophomore to Senior Level

- It is recommended that the student join the National Athletic Trainers’ Association (NATA), the Southeastern Athletic Trainers’ Association (SEATA) and the Mississippi Athletic Trainers’ Association (MATA).
- The student shall maintain a 2.5 GPA or higher and pass all major courses with a grade of ‘C’ or better.
- The student shall adhere to all policies and procedures as outlined in this manual.
- The student will be assigned sport coverage as an Athletic Training Student (ATS) and should begin applying their athletic training skills to athletic and physically active populations as they are instructed and have practiced educational competencies through classroom and clinical settings. The student should complete at least 200 hours per semester toward their clinical education requirements.
- The junior/senior students will mentor a freshman/sophomore student. Mentors are to be role models and are responsible for providing guidance to the less experienced student. This may include assistance with issues such as adjusting to college life, developing athletic training skills, providing advice for time management, and being a “friend”.
- Senior students will complete all requirements to take Board of Certification Examination including certification in CPR for Professional Rescuer and AED and First Aid. When the student has completed the requirements both academically and clinically for the Athletic Training Education Program, they should be prepared to take the BOC Examination.
ATHLETIC TRAINING FACILITY RULES

These policies are applicable for all Staff ATs, Graduate Assistant ATs, Student-athletes, and Coaches. It is your responsibility to adhere and enforce these rules.

1. Athletes must take a shower prior to receiving post-practice treatment.
2. Athletes must report for treatment to allow ample time for the full treatment and to report to practice on time.
3. Athletes must dress appropriately for treatment (i.e., shorts and t-shirt).
4. NO tobacco products.
5. NO profanity or loud noises.
6. NO shoes.
7. NO food or drinks.
8. NO lounging.
9. NO disruptive behavior or lack of cooperation towards the athletic training staff.
10. The athletic training staff can refuse treatment to anyone.

ATHLETIC TRAINING STUDENT RESPONSIBILITIES

Athletic Training Students are held to a higher standard of protocol than the traditional student. Each ATS has the unique opportunity to observe and participate in intercollegiate athletics as a health care professional. Due to this role, the ATS is put into a position of additional responsibilities and scrutinized actions. The student is part of the health care team and will be held accountable for actions performed as well as not performed.

Athletic Training Room/Clinical Experience

1. Familiarize yourself with all athletic training room policies and procedures. Adhere to and enforce all rules to the best of your ability.
2. Familiarize yourself with general athletic training room operations and documentation (i.e. physical examination procedures, medical referrals, emergency procedures, logs, paperwork, etc.) [Refer to Appendices for specific policy/procedures]
3. Familiarize yourself with practice and game set up and procedures - carry out your duties with efficiency.
4. Fulfill daily and weekly cleaning duties - always doing your fair share of the work. A clean athletic training room is the responsibility of ALL athletic training room personnel. Never be satisfied with an unclean work environment. It is a medical facility.
5. Notify the appropriate team AT of all injuries. Do not exceed your limitations, if in doubt, take the necessary precautions and refer the injured person.

6. When someone enters the athletic training room, greet him/her, find out what he/she needs, and take care of it. Do not allow the person to wait, self-treat, or self-tape. When providing treatment:
   a. Check with Staff AT(s) for appropriate treatment protocol.
   c. Set timer.
   d. When treatment period ends clean-up treatment area.
   e. Rehabilitation is to be closely supervised - personal attention and motivating behavior should be provided. SOAP/Progress Notes should be recorded each session.

7. Anyone receiving treatment or performing rehabilitation should be supervised at all times.

8. When dispensing any medication, always ask the athlete if he/she is allergic to any medications and get prior approval from an AT. Complete Med Log with all pertinent information.

9. Respect all Coaches. Never question, argue, or smart off. Inform Staff ATs of any situations or problems.

10. Decisions regarding treatments, medical referrals, and rehabilitation protocols are made by the Staff AT and Team Physician only.

11. Be attentive to your surroundings and athletes at all times. This is a time of work and education, not social hour.

12. Please respect the privacy of the staff athletic trainer(s) while in his/her office. Their offices are not your office.

13. Medical information is private. Anything you see or hear concerning an athlete remains confidential.

14. Familiarize yourself with all supplies and emergency equipment, and their location.

15. Feel free to ask questions at the appropriate time.

16. Student-athletes are not allowed to use staff computers. They may use a phone for local calls only with Staff permission.

BUSINESS RESPONSIBILITIES

1. Due to the ATEP’s high expectations of its students, tardiness and absences, for class or clinical experience will not be tolerated. The student must give the appropriate staff a minimum of 48 hours notice, if he/she will miss a class meeting or clinical assignment for any reason. The student who must miss a clinical experience time for any reason is responsible for finding a replacement of equal or higher level and communicating with the appropriate personnel as to whom that replacement will be. Failure to meet clinical education requirements as well as unexcused absences will lead to probation and/or termination from the Athletic Training Education Program.
2. Students may occasionally miss a class due to travel with an athletic team. The student is responsible for clearing all missed classes, prior to meeting time, with the Program Director and Instructor and make up any missed assignments or tests/quizzes.

3. Students must follow and enforce, when applicable, all rules and regulations of the NCAA and DSU governing varsity practices, competitions, or events (i.e. use of tobacco products, use of drugs or ergogenic aid, etc.).

4. Show initiative - do not wait to be told what to do.

5. Use any free time to learn a new skill or practice an old one and feel free to ask questions.

6. Students must have an understanding of how and why certain treatments are performed and the physiological basis. Therefore, students must first be taught and have adequate practice prior to performing any skill (treatment or otherwise) on student-athletes or patients.

7. Students should observe various members of the personnel performing evaluations to learn bedside manner (patient-practitioner interaction), alternative methods, and enhance the educational process.

8. Practice the philosophy of See One, Do One, Teach One
   - See a skill taught and performed in class or clinical experience by an instructor or CI
   - Do the skill under supervision of an AT, practice and master the skill, pass off the skill with an ACI
   - Teach the skill to another student

9. Be enthusiastic and eager to learn.

10. Take constructive criticism as educational input.


**PROFESSIONAL CONFIDENTIALITY**

The Health Information Portability and Accountability Act (HIPAA) of 1996 require a signed release from the patient/athlete prior to disclosure of information regarding injury/illness. As allied health professionals, athletic trainers are morally and professionally obligated to maintain confidentiality of records. This includes, but may not be limited to, diagnosis, treatment, test results, conversation, correspondence, and surgeries.

Security of student-athlete files is to be maintained at all times. No file or documentation should be removed from the athletic training facilities for any reason at any time. Failure to adhere to this code of conduct will result in immediate dismissal from the ATEP.

**LEAVE OF ABSENCE**

If you plan on leaving campus for any extent period of time for any reason, you must complete the appropriate documentation required by the University. (Refer to University Student Handbook).
TRAVEL POLICY

It is the responsibility of the athletic training student, with their academic advisor, to clear classes missed due to travel with the course instructors/professors. The ATEP Director and team Athletic Trainer reserve the right to prohibit a student to travel should a student not comply with team policies, ATEP policies, etc.

In the event you are allowed to travel with a sports team check with the staff certified athletic trainer or clinical supervisor before your departure concerning the appropriate dress.

FIRST RESPONDER POLICY

Delta State University ATEP and CAATE do not support athletic training students being utilized as first responders. Therefore, athletic training students not directly supervised (as defined by CAATE Standards) by a Delta State University Approved Clinical Instructor (ACI), Clinical Instructor (CI) and/or Certified Athletic Trainer (AT) is strictly prohibited to perform tasks and procedures related to athlete/patient care.

SOCIAL NETWORKING POLICY

All persons involved in the ATEP should be concerned with their personal conduct and behavior. Therefore, the ATEP has adopted the DSU Athletic Department policy regarding social networking. The policy is located in the Appendices section of this handbook and all students must comply with it. Failure to comply with this policy will result in disciplinary action from the ATEP Disciplinary Committee.

MEDICATION POLICY – Consistent with the NCAA policy for all medications

General Guidelines

1. Prescription and prescription strength medications are to be prescribed by a physician, only.

2. Over-the-counter (OTC) medications can only be given with approval from an AT. Prior to dispensing OTC meds, no known allergies (NKA) should be confirmed with the student-athlete.

3. ATSs must be aware of banned substances, which may cause a student-athlete to test positive on random drug tests. Students may refer to the NCAA Banned Drug Classes.

4. ATSs must be aware of inherent risks of taking dietary supplements/ergogenic aids due to their lack of ingredient regulations by the FDA. Students may refer to www.drugfreesport.com for a complete listing of banned substances.

5. All dispensed medications are to be recorded in the drug-dispensing log when given to student-athletes, faculty, and staff.

6. Medication is to be stored in a locked cabinet in the athletic training rooms with only AT access.

7. Medication supplies will be inspected biannually for expiration dates. The medications that have expired should be disposed of properly. Proper disposal of a medication is to remove from dose package and to flush the medication down the toilet.
8. OTC medications located in the athletic training room should be in unit dose packaging with intact and full manufacturers labeling.

9. All emergency and travel kits containing prescription and OTC medications should be routinely inspected for drug quality and security. All medications should be removed from kit when not in use.

V. EVALUATIONS

ATHLETIC TRAINING STUDENTS (ATS)

Twice per clinical assignment (mid and end), the Site Supervisor (On and Off Site DSU CIs and/or ACIs) will evaluate the student. Each student will have one week to schedule an appointment time with the supervisor to discuss his/her evaluation. Any comments, from staff or student, will be noted on the evaluation forms and each person will sign the form. These forms will be filed in the student’s academic folder with the ATEP Director. Failure to meet with the respective site supervisor will result in reprimand/repercussions and an additional meeting with the Program Director to discuss noncompliance.

APPROVED CLINICAL INSTRUCTOR (ACI)/CLINICAL INSTRUCTORS (CI)

To maintain the high quality standard in our Athletic Training Education Program, it is necessary to assess the clinical instruction provided. Students will have the opportunity to evaluate Clinical Instructors at the mid and end of each clinical assignment. These evaluations are to assess the quality of clinical instruction given and to refine or improve clinical instruction procedures. Each student will be asked to anonymously evaluate the site supervisor and the clinical site then return the completed evaluation form into Division of Health, Physical Education and Recreation Secretary.

ATHLETIC TRAINING EDUCATION PROGRAM

Curriculum students are encouraged to provide feedback throughout their educational experience in regards to the ATEP. Formal evaluations for didactic instruction are completed on each course instructor at the conclusion of each academic term. Clinical experience instruction is evaluated as described above.

VI. RELATIONSHIPS

ATS to Athletes

1. AVOID PERSONAL RELATIONSHIPS WITH ATHLETES (ESPECIALLY WHILE WORKING THE SPORT). This is considered fraternization and could put you in a compromising situation. There is a fine line between professional and personal relationships. ATSs are to maintain professional relationships with his/her athletes. Differentiate business from pleasure.

2. Treat each and every student-athlete the same, with respect. Do not discriminate or perform special favors.

3. Do not discuss a student-athlete’s injury with another student-athlete or friend.
4. Refer the student-athlete to an AT if he/she has a question that you cannot answer. Do not speculate.

5. If any problems arise with a student-athlete, refer the problem to an AT.

6. Do not provide an alibi for student-athletes.

**ATS to Staff Athletic Trainers**

1. Staff ATs are supervisors but also educational and counsel resources. Listen, ask questions, learn from them, and use them as part of a support network.

2. The Staff Athletic Trainers' requests are to be carried out as promptly as possible. If a student delegates to another student, the original student is just as responsible for incomplete tasks.

3. It is encouraged to ask questions of a Staff Athletic Trainer or CI about pertinent subject matter. Ask, do not challenge, especially, in front of patients/athletes, parents, coaches, etc.

4. If there are any grievances, they are to follow the chain of command. Direct initial complaint to the staff athletic trainer first, then the Program Director. The matter (when appropriate) will be discussed among the Staff, where the appropriate course of action will be decided.

**ATS to Graduate Assistants**

1. Although the Graduate Assistant(s) are students they are entry-level ATs and should be shown respect as if he/she were a member of the staff.

2. It is encouraged to ask questions of an AT about pertinent subject matter. Ask, do not challenge, especially, in front of patients/athletes, parents, coaches, etc.

3. If there are any grievances, they are to follow the chain of command. Direct initial complaint to the GA, then the Program Director. The matter (when appropriate) will be discussed among the Staff, where the appropriate course of action will be decided.

**ATS to Team Physicians**

1. Physicians are a medical and educational resource. Listen, ask questions, and learn from them.

2. Always follow the physician’s directions explicitly.

3. Referral to the team physicians for an appointment can only be made with prior approval from the Staff Athletic Trainers.

4. If you are present when a team physician is examining an athlete, present the case to the physician including sport, history, the details of the injury, and your impressions.

5. Remember, these physicians are extremely busy, they may run behind schedule or seem abrupt at times, but they are vital to the function of our health care system and should be treated with respect at all times.
ATS to Coaches

1. The AT is responsible for reporting injuries or the status of student athletes to the respective coach(es).

2. If a coach asks you a question about an athlete or their injury answer it to the best of your knowledge, do not speculate. If a question still remains, refer the coach to the AT.

3. Abide by the respective rules of the assigned team set by the coaching staff or AT. Students are accountable for the same rules as the team members at practices, games, on the road, etc.

ATS to Athletic Training Student

1. Treat one another with respect and with a professional attitude.

2. Share the work as assigned - always do your part.

3. Be constructive in your criticism and helpful in your comments.

4. Refer confrontations and/or problems to a Staff Athletic Trainer.

5. Always attempt to challenge each other to grow in skill and knowledge retained.

ATS to the Public, Media and/or Professional Scouts

1. Accept their attention, graciously, don't seek it out.

2. Present yourself with conduct and manner becoming of an allied health care professional.

3. Be courteous.

4. Refrain from arguments with anyone regarding athletes, coaches, or opponents.

5. Do not be the "inside source".

6. Avoid making statements concerning the status of an injured athlete; refer them to the Head Athletic Trainer.

7. Remember your first responsibilities are to your athletic training duties. Conversations with friends or favors for others have to wait.

ATS to Salespersons or Vendors

1. You are more than welcome to listen to sales pitches made to Staff Athletic Trainers and to ask questions.

2. Do not accept free samples, unless instructed to by a Staff Athletic Trainer.

3. Make no commitments.
4. Endorse no products.

5. Sign nothing.

6. Do not allow yourself to be photographed using a product that can be identified or used as advertisement.

VII. FACILITIES

OPERATIONS POLICIES AND PROCEDURES

Policies and procedures regarding operations of AT facilities are covered in AT rules and regulations in previous section.

Below are times of operations for the AT facilities, respectfully. Weekends and game/event days will vary throughout year. These times will also reflect the sport teams that are in-season and utilizing the facilities.

Chadwick-Dickson Athletic Training Room

Monday-Friday 7:00am-11:30am
1:00pm-6:00pm

Walters Sillers Athletic Training Room

Monday-Friday 1:00pm-6:00pm

Aquatic Center Athletic Training Room

Monday-Friday 2:00pm-6:00pm

ATEP Laboratory

The ATEP Laboratory is for staff and student use for conducting academic and professional development activities. The laboratory is located in the Dorgan Center Room 265 and hours of operation are by scheduled appointment during the academic year. The laboratory schedule is conductive to the University schedule (observing holidays, breaks, etc.). The laboratory is to be kept clean and equipment and supplies stored in cabinets and locked after use. Any student who abuses laboratory privileges will be placed on probation for a period of time decided by the ATEP Disciplinary Committee.

VIII. EQUIPMENT

The Athletic Training Education Program maintains various pieces of equipment to operate and help facilitate the functions of the program. This equipment includes the following, as listed, but may include additional items overlooked or purchased/acquired at a later time. Accidents, mal-functioning, or broken equipment must be brought to the attention of a Staff Athletic Trainer immediately.
Additionally, all personnel using the equipment should take ownership for its upkeep! Therefore, do your part in taking care of all equipment.

IX. PROFESSIONAL DEVELOPMENT AND SCHOLARSHIP OPPORTUNITIES

PROFESSIONAL ORGANIZATIONS

Athletic training students are encouraged to become members of the National Athletic Trainers’ Association (NATA) upon acceptance into the Athletic Training Education Program. This membership provides students with a subscription to the NATA News, a one-year subscription to the Journal of Athletic Training, and other benefits. As a member of the NATA you will automatically be issued membership in your district association, Southeastern Athletic Trainers’ Association (SEATA). Joining these organizations allow the student to receive up-to-date materials and to be a member of professional organizations. Additionally, students are encouraged to become members of their state organization, the Mississippi Athletic Trainers’ Association (MATA), for a minimal fee.

These organizations provide us with professional standards and guidelines to which all athletic trainers must adhere. Therefore, it is very important that Delta State University athletic training students join these organizations.

SCHOLARSHIP INFORMATION

Academic scholarships are available to qualified students through the organizations mentioned above. All students who meet the eligibility requirements are encouraged to apply. All scholarships have specific criteria and are deadline sensitive; therefore, students must be proactive. To review available scholarships visit organizational websites. For assistance with the process, students are encouraged to visit with the Program Director.

SPORTS MEDICINE SOCIETY

The purpose of the Sports Medicine Society is “to promote interest in the field of sports medicine and to provide a better understanding of the roles of certified athletic trainers and other members involved in the field of sports medicine”.

Society meetings will be held monthly. Meetings will incorporate social and educational aspects for students interesting in athletic training. Social gatherings may include cookouts, socials, and attending local sporting events. Educational meetings include informal student presentations, speakers from various allied health professions and related fields of interest, and club business. For more information, please contact a Society’s Executive Committee member for more information.

ATHLETIC TRAINING STUDENT OF THE YEAR

The following must be met or exceeded for consideration for this award:

- Exceeds the standards and expectations set by the ATEP Staff
- Positive representation of the program (Proficiency in skills, GPA, and Moral Character)
• Demonstrate a positive attitude and moral environment in the athletic training room and classroom
• Appears to enjoy tasks and makes it enjoyable for others

MOST IMPROVED ATHLETIC TRAINING STUDENT

This award is presented to the student who, the staff feels, has improved his/her knowledge base the most in the past academic year.

STUDENT LIABILITY INSURANCE

Due to legal issues that may arise as an allied health professional, athletic trainers are strongly recommended to maintain liability insurance. **It is required that all DSU ATEP Curriculum Students obtain liability insurance.** Magginis and Associates and HSPO, through cooperation with the NATA, offer low annual cost liability insurance for students. This insurance may become useful if you perform or are accused of performing a negligent act during your clinical education experience. Evidence of your insurance coverage will be kept in your academic file. Students failing to show proof or maintain a policy of liability insurance will be placed on probation. This will be sustained until he/she can produce proof of current status. If this infraction continues, dismissal from the ATEP may occur. For information on obtaining this low cost insurance, contact the Program Director.

BOARD OF CERTIFICATION EXAMINATION AND APPLICATION

To be eligible to practice as a Certified Athletic Trainer, you must successfully pass the Board of Certification Examination. As a student in an accredited ATEP, you are encouraged to take advantage of the educational opportunities available at Delta State University. Our program will provide you with the knowledge and skills required to pass the national board as well as provide supervised practice opportunities for these skills, on a regular basis. During your clinical education courses, you will be given simulated and real-time scenarios to allow you opportunity to consistently evaluate your competency and proficiency level in athletic training. These scenarios will enhance your ability to handle any situation that could arise in athletic training by developing your critical thinking and problem solving skills.

During your last semester senior year, you will be eligible to apply for the BOC examination. The application process may be completed at [www.bocatc.org](http://www.bocatc.org). The Program Director will assist students with this process.
APPENDICES
APPENDIX A. PROGRAM OBJECTIVES

The BOC’s Role Delineation Study, 5th edition concludes that the profession is divided into six major areas or domains. These domains are:

1. Prevention
2. Clinical Evaluation and Diagnosis
3. Immediate Care
4. Treatment, Rehabilitation, and Reconditioning
5. Organization and Administration
6. Professional Responsibility

In defining these domains and in attempting to assign the elements of athletic training it is evident that many elements transcend several domains rather than fitting in only one domain. These elements are best reflected in the following Athletic Training competencies and clinical proficiencies.

1. Risk Management and Injury Prevention
2. Pathology of Injuries and Illnesses
3. Orthopedic Clinical Examination and Diagnosis
4. Medical Conditions and Disabilities
5. Acute Care of Injuries and Illnesses
6. Therapeutic Modalities
7. Conditioning and Rehabilitative Exercise
8. Pharmacology
9. Psychosocial Intervention and Referral
10. Nutritional Aspects of Injuries and Illnesses
11. Health Care Administration
12. Professional Development and Responsibility

The Athletic Training Education Program will provide students with the knowledge necessary to become entry-level athletic trainers who have the ability to demonstrate professionalism reflective of the standards of practice established by the Code of Ethics of the National Athletic Trainers’ Association, the standards set forth by Delta State University, the program’s mission statement, and the program’s educational philosophy.

An entry-level athletic trainer’s expected performance is to:

Demonstrate knowledge and proficiency in the six domains of athletic training including:

1. Prevention of athletic injuries
2. Recognition and evaluation of athletic injuries
3. Management of athletic injuries
4. Rehabilitation and reconditioning of athletic injuries
5. Health care administration and organization
6. Education and counseling

Within the domains of athletic training, students will demonstrate knowledge and proficiency related to the following while exercising moral judgment and positive and correct attitudes:

1. Cognitive domain – knowledge and intellectual skills
2. Psychomotor domain – manipulation and motor skills
Additionally, each student will be expected to demonstrate a concern for the overall care and welfare of student athletes and identify and accept individual strengths and weaknesses and make positive changes in the area(s) needing improvement.

An entry-level athletic trainer will be able to communicate effectively with the intended individual(s). This implies the ability to:

1. Translate ideas, facts, and concepts to persons within the context of the student’s work.
2. Document and maintain accurate medical records.

An entry-level athletic trainer will be able to demonstrate an ability to cooperate with persons involved in the Sports Medicine profession in a manner that reflects respect and understanding. This implies the ability to:

1. Relate student’s roles to that of other individuals in the context of the student’s work.
2. Demonstrate the ability to employ human relations’ skills in dealing with others.
3. Recognize the potential of productivity of group effort.

Specific Educational Objectives

The Athletic Training Education Program will assist students in attaining the program’s objectives by:

1. Ensuring that ATS are trained and knowledgeable in all aspects of athletic training
2. Ensuring that ATS are directly supervised by a BOC certified athletic trainer who will serve as a clinical instructor during the clinical education experience
3. Ensuring that ATS are taught all of the BOC Competencies in Athletic Training, given quality opportunities to practice these competencies with supervision, and evaluated on each competency
4. Practicing professional and ethical decision-making
5. Providing quality athletic health care to the physically active population
6. Assuring appropriate communication to all parties interested in the athlete’s well being
7. Assuring that our emergency procedures are safe, efficient, and expedient
8. Assuring that blood borne pathogen issues are properly addressed and OSHA guidelines observed
9. Encouraging continual interest and development of knowledge and skills
10. Providing a program that leads to a Bachelor of Science degree in the Athletic Training major.
11. Providing a curriculum and courses that are consistent with the core competencies recommended for Athletic Training by the BOC Educational Council and CAATE.
12. Recruiting students who are highly motivated to succeed in the Athletic Training Education Program.
13. Recruiting students who will be able to successfully complete the basic studies and core requirements of the Athletic Training Education Program.
14. Providing an environment that is consistent with excellence and conducive to the teaching and learning of Athletic Training knowledge and skills.
15. Providing Athletic Training students with a faculty and staff that is trained and knowledgeable in the skills required of Certified Athletic Trainers; and who have the ability to teach those skills to the students in the program.
16. Providing the Athletic Training Student with a quality, accessible counseling and advising program that will promote professional development as well as efficient progression through the program.
17. Graduating students with the skills and knowledge necessary to obtain BOC certification and have a reasonable opportunity to procure entry-level employment in the field of Athletic Training.

18. Preparing program graduates to performance satisfactorily in the courses and clinical experiences in the program, specifically:
   A. Recognize when presenting pathology requires management, treatment, and rehabilitation by the athletic trainer, and when professional attention from other than the athletic trainer is required.
   B. Initiate and complete appropriate evaluation, management, treatment, and rehabilitation when presenting pathology indicates the need for athletic training.
   C. Synthesize athletic training science through integration of the biological, physical, social, and behavioral sciences in providing athletic training focused on movement dysfunction.
   D. Demonstrate a personal value system that reflects appreciation of the worth of an individual, the recognition of the rights of others, and also that acknowledges the importance of self and others to be responsible for individual actions.
   E. Demonstrate professional competence that embodies professional ethics.
   F. Identify, organize, and utilize resources, both personal and material, to effectively develop and efficiently provide health care services for the physically active.
   G. Use the scientific approach to problem solving in carrying out professional responsibilities.
   H. Identify the athletic training or related health care needs of a community and develop and implement programs that lead toward meeting those needs.
   I. Communicate efficiently and effectively with correct usage of verbal (spoken and written) communication methods and nonverbal methods.
   J. Utilize both athletic training personnel resources and other health care personnel resources in such a way as to reflect an understanding of their complementary roles in working toward the common goal of providing the best possible services in athletic care and health promotion.
   K. Apply rational teaching/learning theories and methods in health care, academic and community environment.
   L. Continue self-development, personally and professionally, based on self-evaluation, individual needs, and on recognition of own strengths and limitations.
   M. Maintain identity as an athletic trainer and promote the development of the Athletic Training profession.
   N. Apply information management skills in the multifaceted role of the athletic trainer.
The Athletic Training Educational Program at Delta 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 Educational Program establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level certified athletic trainer, as well as meet the expectations of the program’s accrediting agency (Commission on Accreditation of Athletic Training Education [CAATE]). The following abilities and expectations must be met by all students admitted to the Athletic Training Educational 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 the program.

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

Candidates for selection to the Athletic Training Educational Program must demonstrate:

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

2. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients;

3. The ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively. Students must be able to understand and speak the English language at a level consistent with competent professional practice;

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

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

6. The perseverance, diligence and commitment to complete the athletic training education program as outlined and sequenced;

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

8. Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.
Candidates for selection to the athletic training educational program will be required to verify they understand and meet these technical standards or that they believe that, with certain accommodations, they can meet the standards.

Delta State University’s Counseling and Testing Center staff will evaluate a student who states he/she could meet the program’s technical standards with accommodation and confirm that the stated condition qualifies as a disability under applicable laws.

If a student states he/she can meet the technical standards with accommodation, then the University will determine whether it agrees that the student can meet the technical standards with reasonable accommodation; this includes a review whether the accommodations requested are reasonable, taking into account whether accommodation would jeopardize clinician/patient safety, or the educational process of the student or the institution, including all coursework, clinical experiences and internships deemed essential to graduation.

I certify that I have read and understand the technical standards for selection listed above, and I believe to the best of my knowledge that I meet each of these standards without accommodation. I understand that if I am unable to meet these standards I will not be admitted into the program.

________________________________________________
Signature of Applicant

________________________________
Date

Alternative statement for students requesting accommodations.

I certify that I have read and understand the technical standards of selection listed above and I believe to the best of my knowledge that I can meet each of these standards with certain accommodations. I will contact the (insert name of institution’s students with disabilities department) to determine what accommodations may be available. I understand that if I am unable to meet these standards with or without accommodations, I will not be admitted into the program.

________________________________________________
Signature of Applicant

________________________________
Date
APPENDIX C. EMERGENCY ACTION PLANS

Introduction

Emergency situations may arise at anytime during athletic events. Expedient action must be taken to provide the best care possible to the athlete(s) suffering from emergency and/or life threatening conditions. The development and implementation of an emergency action plan will help insure the best care possible will be provided to the student-athlete.

Athletic organizations have an obligation to develop and implement an emergency plan and to provide appropriate standards of health care to all sports participants. The emergency action team must always be prepared, as athletic injuries may occur at any time during any activity. This preparation is to include: formulation of an emergency action plan, adequate coverage of all events, maintenance of emergency equipment and supplies, utilization of appropriate emergency medical personnel, and the continuing personal education in the area of emergency medicine. Some emergencies may be averted through thorough pre-participation physical screenings, adequate medical coverage of events, safe practice and training techniques and other safety avenues. However, accidents and injuries are inherent to participation in sports, and preparation by the emergency action team will insure each emergency situation will be managed appropriately.

Components of the Emergency Action Plan

There are five basic components to this plan:

1. Emergency personnel
2. Emergency communication
3. Emergency equipment
4. Role of the First Aid Providers
5. Transportation

Emergency Action Plan Personnel

With athletic practice and competition, the first person to respond to an emergency is usually a member of the athletic training staff. A team physician may not always be on site for practices and games. The type and degree of sports medicine coverage for an athletic event will vary widely, based on such factors as the sport or activity, the setting, and the type of training or competition. The first person to respond for some emergencies may be a coach or other institutional personnel. Certification in CPR, first aid, prevention of disease transmission, and emergency plan knowledge is mandatory for all athletics personnel associated with practices, competitions, skill instruction sessions, and strength and conditioning sessions.

The development of an emergency action plan will not be complete until the emergency action team has been formed. This team may consist of numerous individuals including physicians, EMT’s, certified athletic trainers, ATS’s, First Aid Providers, coaches, managers; and, possibly bystanders. Roles of each team member will vary depending on various factors such as the number of emergency team members, the athletic venue itself, or the preference of the head athletic trainer. There are four basic roles of the emergency team. The first and most important role is the immediate care of the student athlete. Acute care in an emergency situation should be provided by the most qualified individual on the scene. Individuals with lower credentials should yield to those with more appropriate training. The second role, equipment retrieval, may be done by anyone on the emergency team who is familiar with the types and location of the specific equipment needed. ATS’s, managers, and coaches are good choices for this role. The third, EMS activation, may be necessary in situations where emergency transportation is not already present at the sporting event. Time is the most crucial factor during emergency situations. Activating the EMS system may be done by anyone on the team. However, the person chosen for this duty should be someone who is calm under pressure and who communicates well over the telephone. This individual should also be familiar with the location and address of the activity taking place. After EMS has been activated, the fourth role in the emergency action plan is directing EMS to the scene. One
member of the team should be responsible for meeting emergency personnel as they arrive at the site of
the contest. Depending on ease of access, this person should have keys to any locked gates and/or doors
that may slow the arrival. An ATS, manager, or coach is appropriate for this role.

Roles within the Emergency Action Team
1. Immediate care of the injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of EMS
4. Direction of EMS to the scene

Activating the EMS System

9-911 must be dialed when using a campus telephone. The call is sent through the Bolivar County’s
Sheriff Dept. Be specific with information and directions.

Making the Call:
- 911 (if available)
- or appropriate telephone numbers for local police, fire department, and ambulance service

Providing Information
- name, address and telephone number of caller
- number of student-athletes involved
- condition of athlete(s)
- first aid treatment already given
- specific directions to emergency scene (as needed)
- other information as required

When forming the emergency action team it is important to adapt the team to each specific sport and
situation. It is also advantageous to have more than one person serving each role. This enables the
emergency action team to function in the absence of team members.

Emergency Communication

During emergency situations, communication is the key to quickly delivering emergency care to the
injured. Certified Athletic Trainers and emergency care personnel must work together to provide the
best care possible to injured student-athletes. Communicating prior to an emergency helps to establish
boundaries and to build rapport with all involved. If emergency medical transportation is not available
on site during the event, direct communication with the emergency medical system at the time of the
injury or illness is a necessity.

Access to a working telephone, whether fixed or mobile is a must. The communications system
should be checked prior to any and all activities to ensure proper working order. A back-up
communication plan should be in effect should the primary system fail. A CELLULAR TELEPHONE IS
THE PREFERRED METHOD OF COMMUNICATION. At all athletic venues, it is important to know
the location of working telephones. Pre-arranged access to the phone should be established prior to
initiating the contest.

Emergency Equipment

All emergency equipment should be on site and be quickly accessible. Each member of the emergency
medical team should be familiar with the function and operation of each piece of equipment. Equipment
should be in good operating condition, and personnel must be trained in advance in the proper use of
such equipment.
Equipment should be checked on a regular basis and its use rehearsed by emergency personnel. The equipment available should be appropriate for the level of training of the emergency action team members.

**Transportation**

An ambulance should be on site for all high risk events. Response time should be factored in when determining on site ambulance coverage. The athletic department coordinates on site ambulances for competition when required. In the event that an ambulance is on site, there should be a designated location with rapid access to the site and a clear route for entering/exiting the venue. In the emergency evaluation, the primary survey assists the emergency care provider in identifying emergencies requiring critical intervention and in determining an appropriate transportation method. In an emergency situation, the athlete should be transported by ambulance, with the necessary staff and equipment to deliver appropriate care. Emergency care providers should refrain from transporting unstable athletes in inappropriate vehicles. Care must be taken to ensure that the activity areas are supervised should the emergency care provider leave the site in transporting the athlete.

**Conclusion**

The importance of being properly prepared when athletic emergencies arise cannot be stressed enough. An athlete’s survival may hinge on how well trained and prepared athletic healthcare providers are. It is prudent to invest athletic department “ownership” in the emergency plan by involving the athletic administration and coaches, as well as sports medicine personnel. The emergency plan should be reviewed at least once a year with all personnel, along with CPR and first aid re-certification. Through development and implementation of the emergency plan, the athletic department helps ensure that the athlete will have the best care provided when an emergency situation does arise.
EMERGENCY ACTION PLAN: CHADWICK-DICKSON AND FOOTBALL PRACTICE FIELDS

Emergency Personnel:
Chadwick-Dickson: certified athletic trainers, First Aid Provider, and physicians (limited basis) on site in the athletic training room, located on the first floor
Football practice fields: certified athletic trainers and ATS on site for practice

Emergency Communication:
Chadwick-Dickson: fixed telephone line in athletic training room (662) 846-4280
Football practice fields: two-way radio communication from outside certified athletic trainer or ATS to athletic training room and staff certified athletic trainer’s cellular phone.

Emergency Equipment:
Chadwick-Dickson: emergency equipment (vacuum splints, spine board, and cervical collar) located in athletic training room on the first floor
Football practice fields: emergency equipment (vacuum splints, spine board, and cervical collar) located by Gator at East edge of practice field

Roles of First Aid Provider:
1. Immediate care of the injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of emergency medical system (EMS)
   A. 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as requested)
   B. notify campus police at 846-4155 (provide name, address, telephone number, number of individuals, condition of injured, first aid treatment, specific directions, other information as requested)
4. Direction of EMS to scene
   A. open appropriate gates/doors
   B. designate individual to “flag down” EMS and direct to scene
   C. scene control: limit scene to first aid providers and move bystanders away from area

Venue Directions:
Chadwick-Dickson is located on the corner of Shumate St. and McClain Ave. Five entrances provide access to the building’s first floor.
1. Main entrance(s) are two separate doors located on the South side of the building on opposite sides of the front stairwell.
2. Two doors on the building’s East side provide access to the first floor via the baseball and visitor’s locker room.
3. The fifth entrance allows access through the football locker room.

Football Practice Fields: are located on the West side of Chadwick-Dickson. Three fields lie in clear view from the building. They are located southwest of the home football stands. A fence and gates prohibit access to these fields.
EMERGENCY ACTION PLAN: PARKER FIELD FOOTBALL VENUE

Emergency Personnel: certified athletic trainer, First Aid Provider, physicians (during games only), on home sidelines (during games only), and EMS on site for games only. EMS crew stationed at ambulance parked at North endzone.

Emergency Communication: fixed telephone lines located in the press box on the home stands, radio communication will exist between the visitor’s sideline and the home sideline and staff certified athletic trainer will have cellular phone.

Emergency Equipment: spine board, splint kit, cervical collar located on the home sideline. Fully equipped and staffed ambulance located at the Southwest corner of the field.

Roles of First Aid Provider:
1. Immediate care of the injured or ill student-athlete.
2. Emergency equipment retrieval.
3. Activation of EMS
   A. signal EMS on site, verbally notify campus police on site
   B. campus police on site will assist as necessary
4. Direct EMS to scene
   A. open appropriate gates (for EMS exiting stadium)
   B. designate individual to “flag down” EMS to scene
   C. scene control: limit scene to first aid providers and move bystanders away from scene

Venue Directions: Parker Field is located north of Chadwick-Dickson Field House off of McClain Ave. Turn right on to McClain off of Hwy. 8 West. Four gates provide access to the playing surface.
   1. One gate is located on the South end of each set of stands (home and visitors).
   2. Gates are located on each side of Chadwick-Dickson’s North end.
EMERGENCY ACTION PLAN: FERRIS FIELD BASEBALL VENUE

Emergency Personnel: certified athletic trainer on site for competition, First Aid Provider on site for practice and competition. Additional sports medicine staff available in the athletic training room in Chadwick-Dickson 846-4280 (across street from stadium).

Emergency Communication: fixed telephone line in the press box (846-4588)

Emergency Equipment: splint kit, spine board, cervical collar on site for games, other times located in athletic training room in Chadwick-Dickson Field House.

Roles of First Aid Provider:
1. Immediate care of the injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of EMS
   A. 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid rendered, specific directions, other information as requested)
   B. notify campus police at 846-4155 (provide name, address, telephone number, number of individuals injured, condition of injured, first aid rendered, specific directions, other information as requested)
4. Direct EMS to scene
   A. open appropriate gates
   B. designate individual to “flag down” EMS
   C. scene control: limit scene to first aid providers and move bystanders away

Venue Directions: Ferris Field is located on McClain Ave. across from Chadwick-Dickson Field House. Three gates allow access to field.
1. Main gate is located at the concession stand on the South end of the venue.
2. Gate #2 is located on the left field line behind the 3rd base dugout.
3. Gate #3 is located near the foul pole in right field.
**EMERGENCY ACTION PLAN: BASEBALL BRYCE GRIFFIS INDOOR PRACTICE FACILITY**

Emergency Personnel: certified athletic trainer or First Aid Provider on duty or on call, additional sports medicine staff available through the athletic training room in Chadwick-Dickson (846-4280).


Emergency Equipment: spine board, splint kit and cervical collar available in athletic training room in Chadwick-Dickson Field House.

Roles of First Aid Provider:
1. Immediate care of the injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of EMS
   A. 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as requested)
   B. notify campus police 846-4155 (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as requested)
   C. notify certified athletic trainer in athletic training room in Chadwick-Dickson 846-4280
4. Direction of EMS to scene
   A. open appropriate gates/doors
   B. designate individual to “flag down” EMS and direct to scene
   C. scene control: limit scene to first aid providers and move bystanders away

Venue Directions: Bryce Griffis Indoor Practice Facility is located adjacent to Ferris Field on McClain Ave.
EMERGENCY PLAN: WALTER-SILLERS BASKETBALL VENUE

Emergency Personnel: certified athletic trainer and First Aid Provider on site for practice and competition. Additional sports medicine staff is available in Chadwick-Dickson Field House (846-4280).

Emergency Communication: fixed phone lines are located in the athletic training room (846-4467) and each coach’s office. During home basketball games a fixed phone line is located on press row (846-4460).

Emergency Equipment: spine board, splint kit, cervical collar located in athletic training room.

Roles of First Aid Provider:
1. Immediate care of the injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of emergency medical system (EMS)
   A. 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions (including which entrance EMS should use)
   B. notify campus police at 846-4155 (officers will be in attendance and at courtside)
4. Direct EMS to scene
   A. open appropriate doors
   B. designate individual to “flag down” EMS and direct them to scene
   C. scene control: limit scene to first aid providers and move bystanders away from scene

Venue Directions: Walter-Sillers Coliseum is located on Hwy. 8 West at the intersection of Hwy. 8 and 5th Ave. across the street from main campus
Three main entrances provide access to the playing floor.
   1. One main entrance is located on each side of the South end of the coliseum. These entrances provide access to the front lobby and then the playing floor.
   2. A third main entrance is located on the Northwest end of the coliseum and goes directly to the playing floor.
EMERGENCY ACTION PLAN: DELTA STATE UNIVERSITY AQUATICS CENTER SWIMMING AND DIVING VENUE

Emergency Personnel: certified athletic trainer and First Aid Provider on site for meets. Life guard on deck for all practices and meets. Additional sports medicine staff is available through Chadwick-Dickson Field House (846-4280).

Emergency Communication: fixed telephone line located in the swimming/diving coaches office at pool side (846-4730). An additional fixed telephone line located in the secretary’s office in Wyatt Gym (846-4555).

Emergency Equipment: spine board located on pool deck, additional supplies located in athletic training facility in Aquatics Center.

Roles of First Aid Provider:
1. Immediate care of the injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of emergency medical system (EMS)
   C. 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions (including which entrance EMS should use)
   D. notify campus police at 846-4155 (officers will be in attendance and at courtside)
4. Direct EMS to scene
   D. open appropriate doors
   E. designate individual to “flag down” EMS and direct them to scene
   F. scene control: limit scene to first aid providers and move bystanders away from scene

Venue Directions: Delta State University Aquatics Center is located adjacent to Wyatt Gym on the Campus of Delta State University. Two entrances provide access to the pool deck.
1. The main entrance is through the common area, which connects the Aquatics Center and Wyatt Gym. It is located on the North side of the Aquatics Center, directly across the street from Young-Mauldin Cafeteria.
2. The second entrance is located on the South side of the Aquatics Center.
EMERGENCY ACTION PLAN: SOFTBALL FIELD

Emergency Personnel: certified athletic trainer on site for competitions, First Aid Provider or GA on site for practice and competition.

Emergency Communication: fixed phone lines are located in Chadwick-Dickson Field House. ATS on site will have radio communication with a certified athletic trainer within the athletic training room in Chadwick-Dickson Field House and a cellular phone will be at the venue.

Emergency Equipment: spine board, splint kit and cervical collar on site. Other supplies located in the athletic training room in Chadwick-Dickson Field House.

Roles of First Aid Provider:
1. Immediate care of the injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of EMS
   A. either radio to inside athletic trainer to make call or have someone go to fixed telephone line to make call – 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as requested).
   B. notify campus police at 846-4155 (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as requested)
4. Direct EMS to scene
   A. open appropriate gates
   B. designate individual to “flag down” EMS and direct to scene
   C. scene control: limit scene to first aid providers and move bystanders away from scene

Venue Directions: Delta State University’s Softball Field is located west of the football field (behind the home stands) off McClain Ave. One gate is located by each dugout to provide access to the playing surface.
EMERGENCY ACTION PLAN: TENNIS
COLISEUM COURTS

Emergency Personnel: certified athletic trainer on duty or on call, First Aid Provider on site [at matches only], additional sports medicine staff available through the athletic training room in Chadwick-Dickson Field House (846-4280).

Emergency Communication: fixed telephone line in campus golf course clubhouse (846-4585), radio communication to certified athletic trainer.

Emergency Equipment: spine boards, splint kit, and cervical collar available in Chadwick-Dickson athletic training room.

Roles of First Aid Provider:
1. Immediate care of injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of EMS
   A. 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as required)
   B. notify campus police at 846-4155 (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as requested)
   C. notify certified athletic trainer in athletic training room
4. Direction of EMS to scene
   A. open appropriate gates
   B. designate individual to “flag down” EMS
   C. scene control: limit scene to first aid providers and move bystanders away from scene

Venue Directions: The coliseum tennis courts are located directly behind (North) Walter-Sillers Coliseum. Court access is obtained by turning off Hwy. 8 at Walter-Sillers Coliseum and proceeding around the coliseum and past the golf course maintenance shed until at the courts. Two gates provide access to the playing surface.
1. Gate #1 is located on the West side of the courts and provides easy access from the road.
2. Gate #2 is located on the East side of the courts adjacent to the golf course clubhouse.

COURT OF GOVERNORS COURTS

Emergency Personnel: certified athletic trainer on duty or on call, First Aid Provider on duty [matches only], additional sports medicine personnel available through the athletic training room in Chadwick-Dickson Field House (846-4280).

Emergency Communication: nearest accessible fixed telephone line in Young-Mauldin Cafeteria (846-4595), radio communication to certified athletic trainer.

Emergency Equipment: spine board, splint kit, and cervical collar located in Chadwick-Dickson athletic training room.

Roles of First Aid Provider:
1. Immediate care of injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of EMS
   A. 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as requested)
   B. notify campus police at 846-4155 (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as directed)
   C. notify certified athletic trainer in athletic training room
4. Direction of EMS to scene
   A. open appropriate gates
   B. designate individual to “flag down” EMS on direct to scene
   C. scene control: limit scene to first aid providers and move bystanders away from area

Venue Directions: The Court of Governors tennis court is located north of the Court of Governors male dormitory on campus. Turn South (right) on to 5th Ave. off Hwy. 8 (in front of Walter-Sillers Coliseum) and travel ¼ of a mile. Turn right on to Maple St. and continue until the Court of Governors Dormitory is on your right. The tennis courts lie directly behind the dormitory.

Court access is available through one gate located on the East side of the courts. This gate is directly behind Young-Mauldin Cafeteria.
EMERGENCY ACTION PLAN: DSU GOLF COURSE AND CROSS COUNTRY RACING VENUE

Emergency Personnel: DSU golf coach on site for practice and competition (current first aid and CPR certification). A certified athletic trainer will be on site for cross-country meets.

Emergency Communication: fixed telephone line in clubhouse (846-4585). For cross-country meets First Aid Providers will radio contact with a certified athletic trainer.

Emergency Equipment: first aid kit with limited supplies. For cross-country meets a spine board, splint kit and cervical collar will be on site.

Roles of First Aid Provider:
1. Immediate care of the injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of EMS
   A. 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as required)
   B. notify campus police 846-4155 (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as requested)
4. Direction of EMS to scene
   A. open appropriate gates
   B. designate individual to “flag down” EMS and direct to scene
   C. scene control: limit scene to first aid providers and move bystanders away from area

Venue Directions: Darrell Foreman Golf Course is located behind Walter-Sillers Coliseum off Hwy. 8 West. Turn into the coliseum parking lot and travel around the coliseum until the golf course is reached, go through the gate by the tennis courts.
EMERGENCY ACTION PLAN: SOCCER FIELD (GAME & PRACTICE)

Emergency Personnel: certified athletic trainer on site for competitions, graduate assistant on site for practice and competition.

Emergency Communication: fixed phone lines are located in Chadwick-Dickson Field House. Member of athletic training staff on site will have radio communication with a staff certified athletic trainer and/or a cellular telephone.

Emergency Equipment: spine board, splint kit and cervical collar on site. AED when available. Other supplies located in the athletic training room in Chadwick-Dickson Field House.

Roles of First Responders:

1. Immediate care of the injured or ill student-athlete
2. Emergency equipment retrieval
3. Activation of EMS
   a. Either radio to certified athletic trainer to make call or have someone go to the fixed telephone line to make call – 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as requested).
   b. Notify campus police at 846-4155 (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific directions, other information as requested)
4. Direct EMS to scene
   a. Open appropriate gates
   b. Designate individual to “flag down” EMS and direct to scene
   c. Scene control: limit scene to first aid providers and move bystanders away from scene

Venue Directions: Delta State University’s soccer game and practice fields are located immediately adjacent to the softball field. One gate is located adjacent to the end of the fence boarding the softball field and the other is located facing the south end of the practice field.
APPENDIX D. AUTOMATED EXTERNAL DEFIBRILLATOR POLICY

Facts Necessitating the Need for AED’s

Sudden cardiac arrest (SCA) is documented as being the leading cause of death in the United States, claiming approximately 350,000 lives each year (Ginsburg, 1998; Petersen, 2001). Some may place sudden cardiac arrest/death in the same category as a heart attack. However, these two medical emergencies are drastically different. A heart attack or a myocardial infarction (MI) is caused by a blockage of a coronary artery, and may not occur suddenly. Sudden cardiac arrest may stem from an electrical conduction problem where one of the electrical pathways of the heart is suddenly altered, thus needing immediate medical attention. Furthermore, there may also be some underlying abnormality in the hearts structure. The altered electrical current is more often than not ventricular fibrillation. Another mechanism of injury for SCA is commotio cordis, a non-penetrating blow to the anterior chest wall that can be fatal, in which if the blow strikes the chest wall at a certain time in the hearts conduction cycle the blow can send the heart into ventricular fibrillation. According to the American Heart Association (AHA) as many as 20,000 lives could be saved each year if an AED was readily available (Hernandez, 2001), and that the survival rate can range from 80%-90% if defibrillated with in the first few minutes (Ginsburg, 1998). Studies conducted with AED programs in Las Vegas Casinos revealed a 74% survival rate when defibrillation was initiated within 3 minutes. Furthermore, the survival rate decreased by approximately 10% with each minute that the heart is not defibrillated (Ginsburg, 1998). CPR alone is said to only produce a 3% survival rate.

Functions of an AED

DSU utilizes the ZOLL AED Plus.
The AED can (taken from ZOLL Administrators Guide);
1) Perform periodic self tests to ensure its continual readiness.
2) Use a one-piece electrode assembly that facilitates proper electrode placement and that is easy to apply to the patient (NOT on ALL DSU units).
3) Analyze heart rhythm and inform the rescuer of the rhythm and if it is shockable/non-shockable.
4) Deliver defibrillation treatment to victims of cardiac arrest who exhibit shockable ECG rhythm.
5) Provide voice prompts and graphics to guide the rescuer regarding what to do and when to do it during a cardiac emergency, such as calling for help or giving CPR to the patient.
6) Provide audible beeps to encourage rescuers to provide CPR compression at 100 CPM (requires CPR-D padz).
7) Monitors the depth of chest compression during CPR and provides voice prompts if compression depth is inadequate (requires CPR-D padz).
8) Provide a unit cover that functions as a Passive Airway Support System (PASS). (Note the PASS feature is standard with some versions of the product and optional with others).
9) Upload data from the defibrillator to a PC to store events or print event reports.
10) Uses commercially available batteries.

Indications and Contraindications for Use.

Indications:
- Use the ZOLL AED Plus when a suspected cardiac arrest victim has an apparent LACK OF CIRCULATION as indicated by:
* Unconsciousness; and
* Absence of normal breathing; and
* Absence of a pulse or signs of circulation.

- When the victim is less than 8 years of age or weighs less than 55 pounds (25 kg), the ZOLL AED Plus should be used with the ZOLL AED Plus Pediatric Electrodes. Therapy should not be delayed to determine the patient’s exact age or weight.
- DSU DOES NOT utilize the ZOLL AED Plus Pediatric Electrodes on any of their units.

Contraindications:
- DO NOT use the ZOLL AED Plus when the patient;
  * Is conscious; or
  * Is breathing; or
  * Has a detectable pulse or other signs of circulation.

**Steps to Use**

1) Verify the patient is in cardiac arrest.
2) Activate EMS.
3) Turn AED on.
4) Prepare the patient.
   * Expose the patient’s chest.
   * Dry electrode placement area.
   * Shave and clean electrode placement area if necessary to ensure adequate circulation.
5) Place electrodes
6) Follow voice prompted messages.

**Training**

All athletic training staff, including staff AT’s, graduate assistants, and athletic training students will be instructed at the beginning of each academic year on Adult CPR, First Aid and AED usage in accordance with the standards set forth by the American Red Cross. Additionally a member of each sports coaching staff who is involved with the weight training and conditioning will be required to maintain Adult CPR/AED certification as well.

**Location**

DSU Sports Medicine Department has (2) units. One is housed in a wall mounted cabinet on the first floor of the Billy Dorgan Jr. Student Performance Center in the corridor between the Dorgan Center and Chadwick-Dickson Field house. The second will be used as a mobile unit and housed in the athletic training room when not at an event site. Below is a guideline on how the AED will be used at practices and competitions.

- Competition/Scrimmage over practice, depending on the sports participating at that time.
  - Home games over Away games.
* DSU Campus Police will have an AED at ALL home football, men’s/women’s basketball games and other large sporting events on campus such as regional tournaments.

* The mobile AED will never be taken to away contests unless no other sporting events, weather practice or competition are being held at DSU.

- The athletic training staff will decide on what sport will have priority usage over another depending on the sporting events occurring each day. While keeping in mind that the sports with higher risks of sudden blows to the chest and sport teams with populations that are of a higher risk for having a heart abnormality is given priority.

- The AED housed in the Dorgan Center may also be used during a sudden cardiac arrest incident at a practice field in which the mobile unit cannot be retrieved first.

- The AED located in Forest Wyatt Building will serve to cover the Men’s and Women’s Swimming and Diving Teams which are located in the connected natatorium building.

**Reporting Incidents**

Following an incident involving the usage of an AED, the rescuer will be required to fill out an incident report form that will be sent to the risk management officer for the university and an additional copy will be kept on file in the athletic training office. A sample report form can be found at the end of this protocol.

**Maintenance**

Bi-weekly checks will be performed to verify the integrity of the unit including battery status, supplies, and over-all condition of the unit and its storage facility. The maintenance checklist is included at the end of this protocol.

- After use;
  - Clean with a soft, damp cloth with 90% isopropyl alcohol.
  - Do not immerse in water.
    - Do not use ketones.
    - Do not use abrasives.
    - Do not sterilize the device.
  - Replace pads.
  - Replace razor.
  - Replace towel.
  - Replace alcohol prep pads.

**Registration**

Both AEDs are registered with the Mississippi Department of Health, Emergency Planning and Response Division, and the Bolivar County Medical Center EMS.
AED Incident Report

Effective September, 2004
Delta State University
AED Incident Report Form

Date/Time of Incident_____________________ Location: __________________________
Model Number of AED Used/AED Location: ________________________________
Name of AED Operator:_______________________ Time Arrived on Scene:_________
Name of additional rescuer(s):_____________________________________________
Name of person whom AED was used on: ________________________________
Description of the event:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
Time of EMS Arrival:______________________________________________________
Hospital that person was transported to:______________________________________

Print Name of Person Making Report:_________________________________________
Signature of Person:________________________________________________________
Contact Information (Phone/Address):_________________________________________
Print Name of Additional Rescuers:___________________________________________
Signature of Additional Rescuers:_____________________________________________
Contact Information (Phone/Address):_________________________________________


APPENDIX E. SICKLE CELL TRAIT POLICY

Introduction
Sickle cell trait is the inheritance of one gene for sickle hemoglobin and one for normal hemoglobin. During intense or extensive exertion, the sickle hemoglobin can change the shape of red cells from round to quarter-moon, or “sickle.” This change, exertional sickling, can pose a grave risk for some athletes. Research shows how and why sickle red cells can accumulate in the bloodstream during intense exercise. Sickle cells can “logjam” blood vessels and lead to collapse. We recommend confirming sickle cell trait status in all athletes’ preparticipation physical examinations. Knowledge of sickle cell trait status can be a gateway to education and simple precautions that may prevent sickling collapse and enable athletes with sickle cell trait to thrive in sport.

Background
One in 12 African-Americans (versus one in 2,000 to one in 10,000 white Americans) have the sickle cell trait. The sickle gene is also present in those of Mediterranean, Middle Eastern, Indian, Caribbean and South and Central American ancestry.

The Delta State University Sports Medicine Department highly RECOMMENDS getting this test done. This test only needs to be performed once in your lifetime.

If you have already been tested, please provide the Sports Medicine Department a copy of the test results.

Please mark and sign:

___ I would like to be tested for the Sickle Cell Trait.

___ I DO NOT want to be tested for the Sickle Cell Trait.

________________________________________  ________________
Signature  Date

________________________________________________________
Print Name
APPENDIX F. INFECTIOUS CONTROL POLICY

1. Assemble supplies for cleaning and disinfecting of hard surfaces contaminated by blood or other potentially infectious materials.
   Items Include:
   - Disposable gloves
   - Goggles*
   - Mask*
   - Fluid resistant gown*
   - Absorbent paper towels or disposable cloths
   - Red plastic biohazard bag
   - 1:10 Bleach Solution or Tuberculocidal disinfectant

* If chance of splash or splatter

2. Put on disposable gloves. Put on goggles, mask, and gown if applicable.

3. Cover spill with paper towels or disposable cloths.

4. Wipe spill up using additional paper towels or disposable cloths as necessary.

5. Spray surface with either a 1:10 bleach solution or a tuberculocidal disinfectant and wipe surface with paper towels or disposable cloths.

6. Repeat step 5 as necessary

7. Dispose of paper towels or disposable cloths in a red plastic biohazard bag.

8. Remove and dispose of gloves, gown,* and mask*. Place goggles in appropriate bag for cleaning and sterilization.
   * If applicable

9. Dispose of waste according to ATEP protocol.
SOCIAL NETWORKING POLICY
DELTA STATE UNIVERSITY

Student-athletes should be concerned with any behavior that might embarrass themselves, their families, their teams, and/or Delta State University. This includes any activities conducted online.

As a student-athlete participating in intercollegiate sports at Delta State University, you are a representative of the university and are always in the public eye. Please keep the following guidelines in mind as you participate on social networking web sites.

- Before participating in any online community, understand that anything posted online is available to anyone in the world. Any text or photo placed online is completely out of your control the moment it is placed online – even if you limit access to your site.

- You should not post information, photos, or other items online that could embarrass you, your family, and your team, the athletic department or Delta State University. This includes information, photos and items that may be posted by others on your page.

- You should not post your home address, local address, phone number(s), birth date or other personal information. You could be opening yourself up to predators.

- Exercise caution as to what information you post on your website about your whereabouts or plans. You could be opening yourself up to predators.

- Be aware of who you add as a friend to your site – many people are looking to take advantage of student-athletes or to seek connection with student-athletes to give them a sense of membership on a team.

- Coaches and athletic department administrators can and do monitor these web sites.

- Student-athletes could face discipline and even dismissal for violation of team policies, athletic department policies, and NCAA policies.

The DSU Police Department and other local police and sheriff's offices check these websites regularly. In addition to the unfortunate reality of online predators, potential employers and internship supervisors also use these sites to screen candidates. Many graduate programs and scholarship committees now search these sites to screen applications. The athletic department advises DSU student-athletes to exercise extreme caution in their use of social networking websites.

Student-Athlete Name (Printed)  Jeremy McClain – Director of Athletics  Delta State University

Student-Athlete Signature  Date
DELTA STATE UNIVERSITY
ATHLETIC TRAINING EDUCATION PROGRAM

RECEIPT OF HANDBOOK

I have received a copy of the Delta State University Athletic Training Education Program Handbook and understand that I am required to read and become familiar with its policies and procedures. I also understand that the DSU ATEP retains the right to rescind, change, or modify any or all of the policies and procedures contained in this Handbook without prior notice. While I may receive awards and/or commendations during my education such recognition does not change the nature of my relationship within the Program. I am aware that I am a student and will respect my superiors, as I know I will be respected. I agree to abide by all the rules and regulations and am aware that failure to follow these guidelines may result in my dismissal from the DSU ATEP. I am aware of the appeals process and agree to use this channel of communication as a way of voicing my disagreements as opposed to employing outside resources.

Student Signature__________________________________ Date____________________
Witness/Staff AT____________________________________ Date____________________

I have been notified of any and all changes within the Handbook policies and procedures. I agree to abide by all the rules and regulations and am aware that failure to follow these guidelines may result in my dismissal from the DSU ATEP. I am aware of the appeals process and agree to use this channel of communication as a way of voicing my disagreements as opposed to employing outside resources.

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Witness/Staff AT____________________________________ Date____________________

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