Athletic Training Education Program
Student Handbook

Policies and Procedures
2014-2015
Union University Athletic Training Education Program
Athletic Training Student Handbook

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INTRODUCTION AND GENERAL INFORMATION
Introduction

Union University is proud to offer the educational foundation for an exciting and rewarding career as a Certified Athletic Trainer. The mission of Union University’s Athletic Training Education Program (ATEP) is to challenge its students to become highly effective health care professionals and leaders in the Christian community, incorporating both professional and spiritual growth in their life plans. Union incorporates into its foundation of education the equally important components of being Christ-centered, people focused, excellence driven, and future directed. The Union University Athletic Training Student (ATS) will study in a Christ-centered atmosphere that emphasizes spiritual, technical and intellectual development so that he/she can serve professionally in the community as a Certified Athletic Trainer and become a spiritual leader in life. The ATEP curriculum exposes athletic training students to a dynamic scholastic environment that fuses the medical sciences with Christian faith, ethics and accountability in a variety of clinical settings that include intercollegiate athletics, high school athletics, orthopedic and general medicine venues, and other allied health care communities.

“A Certified Athletic Trainer is a person, who, upon advice, consent and oral or written prescription or referrals of a physician carries out the practice of prevention, recognition, evaluation, management, disposition, treatment, or rehabilitation of athletic injuries.”

Tennessee Licensure Section 63:24:101 - Definitions

A career as a Certified Athletic Trainer (AT) offers a great working environment with a variety of work settings. Certified athletic trainers interact daily with patients, coaches, doctors, therapists and other medical professionals who are involved in the dynamic field of sports medicine. Athletic Trainers are healthcare professionals who collaborate with physicians to optimize activity and participation of patients and clients. Athletic training encompasses the prevention, diagnosis and intervention of emergency, acute and chronic medical conditions involving impairment, functional limitations and disabilities. Athletic Training is recognized by the American Medical Association (AMA) as a healthcare profession.

Union University offers an outstanding entry level opportunity to those who wish to explore the possibilities of a career in Athletic Training. This program offers a great opportunity to grow professionally in the medical, technical, and practical knowledge of the sports medicine industry. Union University’s Athletic Training Education Program is fully accredited by the Commission on Accreditation of Athletic Training Education (CAATE).

Union University does not discriminate on the basis of race, color, national origin, religion, gender, age, veteran status, political affiliation, or disability (in compliance with the Americans with Disabilities Act) with respect to employment or admissions. Inquiries or requests for reasonable accommodations may be directed to the activity coordinator or the Disability Services Office at Union University.
Athletic Training Education

The following is a brief overview of the education and credentialing process for entry-level athletic trainers. Athletic Training is an academic major or graduate equivalent major program that is accredited by the Commission on Accreditation of Athletic Training Education (CAATE). The minimum entry point into the profession of Athletic Training is at the baccalaureate level; by 2014-2015, all accredited education programs in Athletic Training will lead to a degree in Athletic Training. Upon completion of a CAATE-accredited Athletic Training Education Program, students become eligible to obtain national certification granted by the NATA Board of Certification, Inc. (BOC).

PROFESSIONAL EDUCATION
Professional athletic training education uses a competency-based approach in both the classroom and clinical settings. Using a medical-based education model, Athletic Training students are educated to provide comprehensive preventive services and care in eight content areas of clinical practice: evidence-based practice, prevention and health promotion, clinical examination and diagnosis, acute care of injury and illness, therapeutic interventions, psychosocial strategies and referral, healthcare administration, professional development and responsibility. The educational requirements for CAATE-accredited Athletic Training Education programs include not only cognitive (knowledge) and psychomotor (skill) content, but also a broad scope of foundational behaviors of professional practice, as well as a comprehensive clinical learning requirement that is embodied in the clinical proficiencies (professional, practice-oriented outcomes) as identified in the Athletic Training Educational Competencies (5th edition).

Students must receive formal instruction in the following specific subject matter areas:

<table>
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<tr>
<th>Basic and Applied Sciences</th>
<th>Professional Content</th>
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<tbody>
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<td>Human physiology</td>
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<td>Chemistry</td>
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<td>Biology Medical</td>
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<td>Physics</td>
<td>Acute Care of Injuries and Illnesses</td>
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<td>Exercise Physiology</td>
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<td>Kinesiology/Biomechanics</td>
<td>Psychosocial Intervention and Referral</td>
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<td>Nutritional Aspects of Injuries and Illnesses</td>
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<td>Health Care Administration</td>
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Clinical Education

Students are required to participate in a minimum of two years of academic clinical education. A segment of the clinical education experience must be directed toward a patient population having general medical ailments (e.g., cardiorespiratory, metabolic). Using an outcomes-based approach, students are instructed and evaluated by Clinical Preceptors or physicians in the venues listed below.
Union University’s Athletic Training Students will be qualified to competitively seek job positions in the following settings:

- Colleges/universities
- Secondary schools
- Professional sports
- Physical therapy/ sports medicine clinics
- Industrial settings
- Hospitals
- Olympic sports
- Performance organizations

The ATC® Credential

The ATC® credential and Athletic Trainers are recognized as healthcare professionals and regulated in 49 states and the District of Columbia to assure protection of the public. The credibility of the BOC program and the ATC® credential it awards are supported by three pillars: (1) the BOC certification examination; (2) the BOC Standards of Professional Practice, and Disciplinary Guidelines and Procedures; and (3) continuing competence (education) requirements. BOC certification is recognized by the National Commission for Certifying Agencies and is the only accredited certification program for athletic trainers. To be certified, an individual must demonstrate that he/she is an athletic trainer capable of performing the required duties without threat of harm to the public. The BOC traditionally conducts annual examination development meetings during which certified athletic trainers and recognized experts in the science of athletic training develop, review and validate examination items and problems. The knowledge, skills, and abilities required for competent performance as an entry-level athletic trainer fall into three categories:

Athletic Training Performance Categories and Practice Domains

Performance Categories

1. Understanding, applying, and analyzing
2. Knowledge and decision-making
3. Special performance abilities

The athletic trainer’s professional preparation is based on the development of the current knowledge, skills, and abilities, as determined by the Commission (currently the 5th Edition of the NATA Athletic Training Education Competencies). The knowledge and skills identified in the Competencies consist of 8 Content Areas:

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

For more information, visit the National Athletic Trainers’ Association at www.nata.org and the Board of Certification, Inc. at www.bocatc.org.

National Athletic Trainers’ Association Athletic Training Education Overview
www.nata.org; info@nata.org; 2952 Stemmons Freeway, Suite 200, Dallas, Texas 75247
Phone 214-637-6282, Fax 214-637-2206
UNION UNIVERSITY’S
ATHLETIC TRAINING EDUCATION PROGRAM
Union University’s Athletic Training Education Program

Union University’s Athletic Training Education Program (ATEP) is comprised of working and teaching professionals that promote excellence in workmanship, guidance and leadership. Each individual is responsible for representing and promoting the profession of athletic training/sports medicine and validating their current roles in health care. Each individual is also a working member of the sport medicine team. This group of people is responsible for providing health care to the active individuals and athletes of Union University and the West Tennessee community at large. This team of working professionals provides a teaching core for Union University’s Athletic Training Students, who have the opportunity to observe, emulate and develop skills alongside mentors in both traditional and non-traditional allied health care settings.

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The Union University Sports Medicine Team

Dr. Chris Lewis, M.D. – ATEP Medical Director  
Ms. Jennifer Farroll, M.S., ATC, LAT – Program Director of Athletic Training Education  
Mr. Jonathan Allen, M.A., ATC, LAT – ATEP Clinical Coordinator /Associate Athletic Trainer  
Mrs. Karen T. Sinclair, M.A., ATC, LAT, PES – Assistant Professor / Associate Athletic Trainer  
____________________ – Head Athletic Trainer/ Adjunct Instructor  
____________________ – Assistant Athletic Trainer/ Adjunct Instructor  
Mrs. Leigh Ann Gaines, M.S., ATC, LAT – Adjunct Instructor/ Clinical Preceptor  
Mrs. Tina Cole, M.A.Ed., ATC, LAT – Adjunct Instructor/ Clinical Preceptor

Orthopedic/ General Medicine Referral Sources

Dr. Chris Lewis, M.D. – Team Physician, The Jackson Clinic - Convenient Care  
Dr. David Johnson, M.D. – Orthopedic Physician, West Tennessee Bone and Joint Clinic  
Dr. Michael Cobb, M.D. – Orthopedic Physician, West Tennessee Bone and Joint Clinic  
Dr. Harold Antwine, M.D. – Orthopedic Physician, West Tennessee Bone and Joint Clinic  
Dr. David Pearce, M.D. – Orthopedic Physician, West Tennessee Bone and Joint Clinic  
Dr. Jason Hutchison, M.D. – Orthopedic Physician, West Tennessee Bone and Joint Clinic  
Dr. Adam Smith, M.D. – Orthopedic Physician, West Tennessee Bone and Joint Clinic  
Dr. Douglas Haltom Jr., M.D. – Orthopedic Physician, West Tennessee Bone and Joint Clinic  
Mr. Paul Mayer, M.S.N. – Union University Health Services
Admission Requirements

In order to be accepted in Union University’s Athletic Training Education Program, applicants must meet the criteria as described below. The program enrollment is limited by the Commission on Accreditation of Athletic Training Education (CAATE) standards; additionally, there is a self-imposed maximum of 45 positions for enrollment in this program with a maximum clinical instructor-to-student ratio of no more than 4:1 for each rotation of clinical field experience. Please understand that these maximums may change based on a needs assessment of availability of clinical field experiences afforded by affiliated clinical sites and Clinical Preceptors in the vicinity of Jackson. It is advantageous for the prospective students to submit their applications as soon as possible. In addition to this handbook, the admission requirements for Union University’s Athletic Training Education Program are posted on the Union’s ATEP web site at www.uu.edu/programs/atep, Union University’s Undergraduate Catalogue, and in program brochures that are printed for public distribution.

Acceptance in Union University’s Athletic Training Education Program (ATEP) involves a selective process of competitive program admission. Prospective students may declare their major to be athletic training upon entrance to Union University, but each student must still be formally admitted to the ATEP before entering into the clinical phases of the sequential curriculum. Candidates must meet all criteria for acceptance in the program. A student may complete all criteria for admission but that does not guarantee acceptance into the program. Prospective candidates must submit the formal application to the Program Director of athletic training education by April 1 of each year to be considered for fall enrollment. All applicants will be ranked in accordance with their performance in the following categories: (1) overall GPA, (2) success in pre-requisite coursework, (3) standardized scores (ACT, PSAT or equivalent), (4) recommendation/ references, and (5) a formal interview with the ATEP Selection Committee. During the interview, each member of the ATEP Selection Committee will complete a scoring scale. Candidates will be evaluated on intellectual, social and technical skills relative to the athletic training profession. All components of the application process are individually weighted and scored. Individual scores are incorporated into a cumulative score that determines the candidate’s rank. Enrollment in the ATEP is limited to a program capacity of forty-five (45). Final admission into the program rests with the decision of the ATEP Selection Committee. All student candidates will receive the admission decision in writing by May 1. Student candidates who were denied admission into the ATEP will have the opportunity to reapply for admission for future enrollment.

Union University makes every effort to accommodate applicants with disabilities in accordance with the Americans with Disabilities Act. Technical standards are published which identify the physical and mental capabilities that are necessary to succeed in this academic program and the athletic training profession and are enclosed in this document. The applicant’s ability to meet these standards will be evaluated as part of the Health History and Physical Examination as required below.
ATEP Admission Requirements

All applicants must apply, be accepted and admitted to Union University.  
• All applicants must complete or be currently enrolled in PEWS 240 Introduction to Sports Medicine or PEWS 218 Care and Prevention of Athletic Injuries and complete the course with a grade of B (3.0 on a 4.0 scale) or better to meet the retention standards of the Athletic Training Education Program. Applicants must also complete PEWS 113, 170 and 222.  
• All applicants must present a cumulative grade point average of 2.5 on a 4.0 scale.  
• All applicants must submit to the Program Director a completed application for admission to the Athletic Training Education Program by the deadline of April 1 for formal enrollment in the following fall semester. Applications that are received after this date will be considered based on the maximum enrollment space available in the Athletic Training Education Program.  
• All applicants must submit a current transcript from all institutions that they have previously attended.  
• Criminal background check and drug screening clearance is mandatory for program admission.  
• If the number of applicants outnumbers the program's spaces available, the prospective students will be asked to meet with the ATEP faculty for a formal interview. If the number of applications outnumbers the program spaces available, the prospective students will be asked to meet with the ATEP faculty to complete a formal interview process.

Retention Policies

Union University’s Athletic Training Education Program is a three year/six semester, sequential educational process. Each student must validate academic progress by (1) maintaining an aggregate grade point average of at least 2.5 on a 4.0 scale; (2) by receiving a grade of “C” or better in all Athletic Training (AT) courses within the instructional plan, (3) completing each clinical course with a grade of “C” or better, and (4) remaining in good academic standing at Union University by meeting all criteria as stated in the undergraduate catalogue. The sequential nature of Union’s ATEP must be considered in the stages of clinical education.
Retention in Union University’s Athletic Training Education Program

- All athletic training students must maintain a cumulative GPA of 2.5 on a 4.0 scale and must be registered as a full time student.
- In addition to earning a B or better in both PEWS 222 (First Aid and CPR) and either PEWS 240 (Introduction to Sports Medicine) or PEWS 218 (Care and Prevention of Athletic Injuries), all athletic training students must earn a C or better in all major courses including: AT265, AT275, AT365, AT375, AT465, AT475 (Clinical Courses), AT170, AT318, AT350, AT360, AT361, AT370, AT455, AT460, PEWS113, PEWS170, PEWS414, PEWS415, PEWS461, BIO221, BIO222, BIO300
- All athletic training students must complete a physical examination from a licensed medical practitioner and submit a complete health history as well as a record of all immunizations.
- All athletic training students must sign agreements in reference to the technical standards of the program, acknowledgment of the Union University Athletic Training Student Handbook, and the Hepatitis B Vaccination Election Form.
- All athletic training students must maintain CPR/First Aid Certification (professional rescuer with AED training) for the duration of the program. This certification is also mandatory to complete the application process for the Board of Certification Examination.
- All athletic training students must present behavioral characteristics that are consistent with the student expectations of Union University. Behavior that is outside of the Christian heritage of Union University will not be tolerated, nor condoned.

Transfer and Late Entry Students

Each transfer student will be evaluated on an individual basis according to the amount of college level athletic training course work and clinical field experience he/she has taken from the previous institution(s). A transfer student who has no athletic training clinical experience will be required to follow the entrance requirements for traditional students as documented. A transfer student with prior athletic training clinical experience from another institution must have their clinical experience and coursework validated by the Program Director of Athletic Training Education and the Director of Academic Services. A student may be admitted on a probationary basis if space is available in the Athletic Training Education Program.
Readmission to the Athletic Training Education Program

An athletic training student who wishes to re-enter the Athletic Training Education Program following a period of inactive status (e.g., due to academic suspension, withdrawing from the university, etc.) should submit a formal letter to the Program Director requesting readmission to the program well in advance of the semester in which he/she wishes to enroll. The request for readmission will be considered with all other applicants, and admission to the program will be based on the same guidelines as a new applicant who is seeking enrollment. Applicants who seek re-entry will have to contend for enrollment vacancies alongside all other applicants who are seeking admission to the Athletic Training Education Program.

Program Objectives

The objectives of Union University’s Athletic Training Education Program are clearly identified in the Athletic Training Educational Competencies, 5th Edition (2011), published by the National Athletic Trainers’ Association in accordance with the Joint Review Committee on Educational Programs and the Commission on Accreditation of Athletic Training Education (CAATE). These competencies serve as guidelines for the development of educational programs and learning experiences to a student’s eligibility to challenge the Board of Certification, Inc. (BOC) certification examination. The primary objective of this and any entry-level athletic training education curriculum is to fully prepare each student to achieve success on the certification examination that credentials Certified Athletic Trainers, creating an opportunity for success in the profession. The objectives embrace the following domains listed below as printed in the 2011 Board of Certification Role Delineation Study / Practice Analysis (6th Edition) for professional practice of Certified Athletic Trainers.

<table>
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<th>Role Delineation for the Certified Athletic Trainer</th>
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<tr>
<td>• Foundational behaviors of professional practice</td>
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<td>• Risk management and injury prevention</td>
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<tr>
<td>• Pathology of injury and illness</td>
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<td>• Orthopedic clinical examination and diagnosis</td>
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<td>• Pharmacology</td>
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<tr>
<td>• Psychosocial intervention and referral</td>
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<tr>
<td>• Nutritional aspects of injuries and illnesses</td>
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<tr>
<td>• Health care administration</td>
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<tr>
<td>• Professional development and responsibilities</td>
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In each of these domains, specific demands are placed on the athletic training student to define, interpret, synthesize, process, and demonstrate proficiency of the given competencies in each domain. These domains provide the objectives and competencies that guide the athletic training student to clinical proficiency in all cognitive and psychomotor domains of athletic training education.
INSTRUCTIONAL PLAN AND COURSE DESCRIPTIONS
### Athletic Training Education Program Curriculum/ Instructional Plan

#### Freshman – Fall Semester (18 hours)

- **UNI 195** Gateway to Christian Learning (2)
- **CHR 111** Old Testament Survey (3)
- **HIS 101** World Civilization I (3)
- **ENG 111** Written Composition I (3)
- **PEWS 222** First Aid/CPR (3)
- **PHY 111** Principles of Physical Science (4) or **PHY 213** Introduction to Physics (4)

#### Freshman – Spring Semester (15 hours)

- **ENG 112** Written Composition II (3)
- **MATH 111** College Algebra (3)
- **PEWS 113** Elementary Nutrition (3)
- **PEWS 170** Medical Terminology (2)
- **PEWS 240** Introduction to Sports Medicine (3)
- **PEWS 100** Fitness for Health (1)

#### Sophomore – Fall Semester: 1st Clinical Sequence (17 hours)

- **AT 265** Athletic Training Clinical I (3)
- **AT 170** Risk Management and Taping (1)
- **BIO 221** Anatomy and Physiology I (4)
- **ENG 201** World Literature I (3)
- **MATH 114** Introduction to Statistics (3)
- **PEWS 218** Care and Prevention of Athletic Injuries (3)

#### Sophomore – Spring Semester: 2nd Clinical Sequence (16 hours)

- **AT 275** Athletic Training Clinical II (3)
- **AT 318** Advanced Injury Management (3)
- **AT 360** Therapeutic Modalities (3)
- **BIO 222** Anatomy and Physiology II (4)
- **COM 112** Public Communication (3) or **COM 235** Interpersonal Communication (3)

#### Sophomore/ Junior - Summer Term (3 hours)

- **BIO 322** Human Gross Anatomy (3)

#### Junior – Fall Semester: 3rd Clinical Sequence (16 hours)

- **AT 365** Athletic Training Clinical III (3)
- **PEWS 103** Beginning Swimming/ PEWS Elective (1)
- **AT 361** Evaluation of the Upper Body, Spine and Extremities (3)
- **AT 370** Evaluation of the Lower Body, Lumbar Spine and Extremities (3)
- **PEWS 414** Kinesiology (3)
- **CHR 112** New Testament Survey (3)

#### Junior – Winter Term (3 hours)

- **BIO 300** Pathophysiology (3)

#### Junior – Spring Semester: 4th Clinical Sequence (16 hours)

- **AT 375** Athletic Training Clinical IV (3)
- **AT 455** General Medicine and Pharmacology in Athletic Training (4)
- **AT 460** Therapeutic Exercise and Rehabilitation (3)
- **PEWS 415** Physiology of Exercise (3)
- **PEWS 461** Exercise Testing and Prescription (3)
**Senior – Fall Semester: 5th Clinical Sequence (15 hours)**

- **AT 350** Administration and Management Strategies in Athletic Training (3)
- **AT 465** Athletic Training Clinical V (3)
- **ART 210** Arts in Western Civilization (3)
- **PSY 213** General Psychology (3)
- **AT461** Medical Ethics, Professional Practice, and Research and Sports Medicine (3)

**Senior – Spring Semester: 6th Clinical Sequence (15 hours)**

- **AT 475** Athletic Training Clinical VI (3)
- **HIS 102** World Civilization II (3)
- **PSY 330** Health Psychology/ Psychology Elective (3)
- **SOC 211** Principles of Sociology (3)
- **ENG 202** World Literature II (3)

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**Athletic Training Course Descriptions**

The following is a list of course offerings in the Athletic Training (AT) major according to Union University’s 2013-2014 Undergraduate Academic Catalogue.

Course Offerings in Athletic Training (AT)

( ) Hours credit; F–Fall; W–Winter; S–Spring; Su–Summer

- **170. Taping and Risk Management (1) F**
  An introduction to basic taping, preparation, wrapping and casting techniques that are common practice in athletic training and sports medicine. Content is based upon the 4th Edition Nation Athletic Trainer's Association Education Competencies/Risk Management and Injury Prevention domain.

- **318. Advanced Injury Management (3) S**
  Prerequisite: PEWS 218
  Advanced preparation for triaging, treating, managing and rehabilitating chronic and acute athletic injuries that occur in sport and physical activity. The course focuses on specific etiologies, sings, symptoms, immediate care, conservation management and surgical implications of injury and disease processes to the orthopedic anatomy. Course content is based on the 4th Edition Nation Athletic Trainer's Association Education Competencies in the categorical domain of Risk Management and Injury Prevention.

- **350. Administration and Management Strategies in Athletic Training (3) F**
  An introduction to the administrative and management strategies incorporated in professional, intercollegiate, secondary school and clinical athletic training professional settings. Topics include policies and procedures, legalities in sports medicine, health care code, ethical codes of conduct and standards of reasonable care, and compliance with OSHA and HIPAA in allied health care.

- **360. Therapeutic Modalities (3) S**
  Prerequisite: PEWS 218.
  This course introduces the student to the various thermal, mechanical and electrical agents/modalities that are used in athletic health care and physical therapy to promote healing and rehabilitation. The class consists of lecture and lab based instruction of the use the electrical stimulation, cryo/thermotherapy, hydrotherapy, ultrasound, traction, therapeutic massage, biofeedback, and compression therapy.
361. Evaluation I: Upper Body, Spine and Extremities (3) F
Prerequisite: PEWS 218. Corequisite: BIO 221
An introduction to the evaluation process which includes the identification, medical assessment, management, treatment and referral guidelines for athletic injuries of the upper body, cervical and thoracic spine and upper extremities. Topics include principles of injury recognition and classification to head and face, cervical spine, shoulder complex, elbow, wrist and hand.

370. Evaluation II: Lower Body, Lumbar Spine and Extremities (3) F
Prerequisite: PEWS 218. Corequisite: BIO 221
Introduces the student to the evaluation process which includes the identification, medical assessment, management, treatment and referral guidelines for athletic injuries of the lower body, lumbar spine and lower extremities. Topics of instruction include the principles of injury recognition and classification to the abdominal, thorax, lumbar spine, hip, knee, ankle and foot.

460. Therapeutic Exercise and Rehabilitation (3) S
Prerequisite: PEWS 218, BIO 221.
This course introduces the student to the clinical applications of therapeutic exercise and the rehabilitation process for athletic injuries in sports medicine and physical therapy professional settings. A lecture and lab that focuses on the use range of motion, strength, muscular endurance and muscular speed exercises, proprioceptive neuromuscular facilitation, and joint mobilization to promote health and wellness following injury. Off-campus physical therapy/rehabilitation clinics for instructional purposes.

461. Medical Ethics, Professional Practice, and Research and Sports Medicine (3) F (400 level)
This class introduces the student to the foundational behaviors of professional practice for the certified athletic trainer and other allied health care professionals. The course introduces the student to evidence based research models in regards to professionalism, medical ethics, legal considerations, and cultural competence.

462. Pharmacology in Athletic Training (2) S (400 level)
Prerequisites: AT 318, 361, 370; BIO 221 & 222
This course is designed to introduce the athletic training student to the pharmacological applications, organized by body systems, which are used to treat athletic injuries and conditions in the field of sport medicine.

463. General Medical Conditions in Athletic Training (2) S (400 level)
Prerequisites: AT 318, 361, 370; BIO 221 & 222
This course is designed to introduce the athletic training student to the various general medical conditions that effect the active and athletic population. The focus of the course is based on the prevention, recognition, clinical diagnosis, treatment interventions, and appropriate medical referral of pathological medical conditions which are encompassed in the field of sport medicine.
Clinical Courses
Each clinical course carries out a modular approach to the development of clinical skills for athletic training education per the NATA Athletic Training Education Competencies for Athletic Training Education Programs, Fifth Edition. The student is required to demonstrate clinical proficiency in cognitive and psycho motor competencies that are presented in the prerequisite coursework. Clinical education also requires an evaluation of the field experience.

265. Athletic Training Clinical I (3) F
Pre/Corequisite: PEWS 218, 240.
Basic Skills: the development of first year clinical skills and their assessment

Clinical Expectations: Athletic Training Clinical I.
Professional/Personal Attributes. Athletic Training Students in Union University’s ATEP are expected to exhibit the following personal qualities: promptness, professional appearance, ability to cooperate with peers, mentors and figures of authority, the ability to follow rules and guidelines, assertiveness and eagerness to learn, good communication skills, and a reflection of Christian behavior. These qualities are evaluated by the clinical preceptor to whom the student has been assigned. This course also assesses the student’s ability to utilize basic skills in the clinical setting.

Basic Skills. Clinical competencies that are assessed in Clinical I include knowledge of OSHA regulations and universal precautions, athletic training room rules and guidelines, policies and procedures, emergency action plans, basic first aid, basic nutrition, basic knowledge of human anatomy and medical terminology, equipment use and maintenance, and referral resources.

275. Athletic Training Clinical II (3) S
Pre/Corequisite: PEWS 218, 240.
Risk Management: the development of first year clinical skills and their assessment

Clinical Expectations: Athletic Training Clinical II.
Professional/Personal Attributes. Athletic Training Students in Union University’s ATEP are expected to exhibit the following personal qualities: promptness, professional appearance, ability to cooperate with peers, mentors and figures of authority, the ability to follow rules and guidelines, assertiveness and eagerness to learn, good communication skills, and a reflection of Christian behavior. These qualities are evaluated by the clinical preceptor to whom the student has been assigned. This course also assesses the student’s ability to utilize basic skills in the clinical setting.

Basic Skills. Clinical competencies that are assessed in Clinical II include basic knowledge of human anatomy and medical terminology; basic first aid; knowledge of immobilization, splinting, taping, and bandaging for specific injuries and injury prevention; and protective equipment utilization in collision sports.
365. Athletic Training Clinical III (3) F  
Prerequisite: AT 360.  
Therapeutic Modalities: the development of second year clinical skills and their assessment.  

**Clinical Expectations: Athletic Training Clinical III.**  
**Professional/Personal Attributes.** Athletic Training Students in Union University’s ATEP are expected to exhibit the following qualities: promptness, professional appearance, ability to cooperate with peers, mentors and figures of authority, the ability to follow rules and guidelines, assertiveness and eagerness to learn, good communication skills, and a reflection of Christian behavior. These qualities are evaluated by the clinical preceptor to whom the student has been assigned. This course also assesses the student’s ability to utilize intermediate skills in the clinical setting.  
**Intermediate Skills.** Clinical competencies that are assessed in Clinical III include knowledge and proper use of therapeutic modalities in treatment and rehabilitation protocols, including physiological effects, indications, contraindications, precautions and procedural application.

375. Athletic Training Clinical IV (3) S  
Prerequisites: AT 361, 370.  
Evaluation and General Medical Assessment: the development of second year clinical skills and their assessment.  

**Clinical Expectations: Athletic Training Clinical IV.**  
**Professional/Personal Attributes.** Athletic Training Students in Union University’s ATEP are expected to exhibit the following qualities: promptness, professional appearance, ability to cooperate with peers, mentors and figures of authority, the ability to follow rules and guidelines, assertiveness and eagerness to learn, good communication skills, and a reflection of Christian behavior. These qualities are evaluated by the clinical preceptor to whom the student has been assigned. This course also assesses the student’s ability to utilize intermediate skills in the clinical setting.  
**Intermediate Skills.** Clinical competencies that are assessed in Clinical IV include advanced knowledge of human anatomy, medical terminology, manual muscle testing, gait analysis, clinical assessment/evaluation of the upper and lower extremities, abdomen, thorax, and spine, and advanced injury management.
465. Athletic Training Clinical V (3) F
Prerequisite: AT 460.
General Medicine and Pharmacology/Therapeutic Exercise and Rehabilitation and Senior Practicum: the development of third year clinical skills and their assessment.

**Clinical Expectations: Athletic Training Clinical V.**

**Professional/Personal Attributes.** 3rd-year Athletic Training Students in Union University’s ATEP are expected to exhibit the following qualities: promptness, professional appearance, ability to cooperate with peers, mentors and figures of authority, the ability to follow rules and guidelines, good communication skills, the ability to peer teach students in the lower clinical levels, assertiveness and eagerness to better one’s knowledge and skills, the professional representation of Union University, and a reflection of Christian behavior. These qualities are evaluated by the clinical preceptor to whom the student has been assigned. This course also assesses the student’s ability to utilize advanced skills in the clinical setting.

**Advanced Skills.** Clinical competencies that are assessed in Clinical V include knowledge of and the ability to instruct and coordinate conditioning and rehabilitation exercises and protocols, and management of general medical conditions, including pharmaceutical intervention.

475. Athletic Training Clinical VI (3) S
Prerequisites: AT 350, 455.
Professional Preparation and Senior Seminar: the development of third year clinical skills and the assessment of clinical proficiencies

**Clinical Expectations: Athletic Training Clinical VI.**

**Professional/Personal Attributes.** 3rd-year Athletic Training Students in Union University’s ATEP are expected to exhibit the following qualities: promptness, professional appearance, ability to cooperate with peers, mentors and figures of authority, the ability to follow rules and guidelines, good communication skills, the ability to peer teach students in the lower clinical levels, assertiveness and eagerness to better one’s knowledge and skills, the professional representation of Union University, and a reflection of Christian behavior. These qualities are evaluated by the clinical preceptor to whom the student has been assigned. This course also assesses the student’s ability to utilize advanced skills in the clinical setting.

**Advanced Skills.** Clinical competencies and proficiencies that are assessed in Clinical VI include foundational behaviors of professional practice, procedures of athletic training administration, a professional presentation, job market search, and a comprehensive assessment of each of the clinical proficiencies that is listed in the NATA Educational Competencies.
CLINICAL EDUCATION
Clinical Education

Union University provides Athletic Training Students with opportunities for clinical education. The clinical education component is comprised of six clinical courses. Each course is given three hours academic credit and requires athletic training students to prove clinical skill proficiency prior to advancement to the next clinical level. Clinical education begins in the sophomore year and builds progressively for the following six semesters. Prior to beginning clinical experiences, each athletic training student must participate in an annual student safety seminar to review OSHA standards, the use of universal precautions and blood borne pathogen training, CPR/First-Aid Certification (professional rescuer with AED training), and a review of the guidelines in clinical education. The following chart demonstrates the appropriate didactic and clinical course matches for the 2014-2015 academic year.

The Athletic Training Education Program Clinical Sequence

<table>
<thead>
<tr>
<th>Didactic Courses</th>
<th>Clinical Courses</th>
</tr>
</thead>
<tbody>
<tr>
<td>PEWS 113 Elementary Nutrition</td>
<td>CLINICAL I (100 hours)</td>
</tr>
<tr>
<td>PEWS 170 Medical Terminology</td>
<td>Basic Skills, Introduction to the Athletic Training Room</td>
</tr>
<tr>
<td>PEWS 222 First Aid</td>
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<tr>
<td>PEWS 240 Introduction to Sports Medicine</td>
<td></td>
</tr>
<tr>
<td>AT 170 Taping and Risk Management</td>
<td>CLINICAL II (100 hours)</td>
</tr>
<tr>
<td>PEWS 218 Care and Prevention of Athletic Injuries</td>
<td>Risk Management</td>
</tr>
<tr>
<td>AT 360 Therapeutic Modalities</td>
<td>CLINICAL III (125 hours)</td>
</tr>
<tr>
<td>AT 318 Advanced Injury Management</td>
<td>Therapeutic Modalities</td>
</tr>
<tr>
<td>AT 361 Evaluation of the Upper Body, Spine and Extremities</td>
<td></td>
</tr>
<tr>
<td>AT 370 Evaluation of the Lower Body, Lumbar Spine and Extremities</td>
<td></td>
</tr>
<tr>
<td>AT 460 Therapeutic Exercise and Rehabilitation</td>
<td>CLINICAL IV (125 hours)</td>
</tr>
<tr>
<td>AT 462 Pharmacology in Athletic Training</td>
<td>Clinical Assessment and Injury Management</td>
</tr>
<tr>
<td>AT 463 General Medical Conditions in Athletic Training</td>
<td></td>
</tr>
<tr>
<td>AT 350 Administration and Management Strategies in Athletic Training</td>
<td>CLINICAL V (175 hours)</td>
</tr>
<tr>
<td>AT 461 Medical Ethics, Professional Practice, and Research and Sports Medicine</td>
<td>Senior Practicum</td>
</tr>
<tr>
<td></td>
<td>Therapeutic Exercise and Rehabilitation/ General Medicine and Pharmacology</td>
</tr>
<tr>
<td></td>
<td>CLINICAL VI (175 hours)</td>
</tr>
<tr>
<td></td>
<td>Senior Practicum</td>
</tr>
<tr>
<td></td>
<td>Administration and Professional Practice/ Capstone Experience</td>
</tr>
</tbody>
</table>
Clinical Education Requirements

- Prior to beginning clinical rotations in the fall, each student must submit the following: immunization records (on file in Student Health Services), updated TB skin test, a copy of CPR/AED certification (or become certified by the end of the first week of classes), and complete the student safety seminar for West Tennessee Healthcare.

- Students must complete a minimum of 800 hours prior to completion of the Athletic Training Education Program. This time requirement is divided according to the student’s clinical education level in the program:
  - 1st-year students must complete a minimum of 100 hours per semester
  - 2nd-year students must complete a minimum of 125 hours per semester
  - 3rd-year students must complete a minimum of 175 hours per semester

- Recording clinical hours:
  - Students should average 10-15 hours per week
  - Minimum 5 hours/week (the only exceptions to this rule will be Fall Break, Thanksgiving Break, Spring Break, and Finals Week)
  - Maximum 20 hours/week

- Students may not log more than 20 hours per week toward the semester minimum for grading purposes in the student’s clinical course.

- Students are responsible for logging clinical hours on the time recording forms provided by the ATEP and returning them to the Clinical Coordinator in a timely manner. Hour reporting sheets should be turned in approx. every two weeks.

- Student must have at least 4 completed reporting sheets turned in by the midterm of each semester.

- All hours recorded must clearly identify the date, the location or sport (i.e., Bone & Joint Physical Therapy or WBKB practice), and must be verified/initialed by the student’s supervising clinical preceptor.

- The supervising clinical preceptor must initial students’ time sheets on a weekly basis. Please do not ask a member of the ATEP faculty/staff to verify your time form if he/she was not your supervising clinical preceptor during that rotation. Only the individual(s) who the student is assigned to during that rotation may sign the time recording form.

- Hours that are not verified/initialed by the supervising clinical preceptor will not be included in the student’s semester total. **DO NOT** wait until the end of the semester to record hours and ask your clinical preceptor to verify them… You will not get credit for those hours!

- Recorded hours should be correct to the nearest quarter hour and utilize the “5-minute rule” (e.g., If you arrive at your clinical site at 2:25 PM, round to 2:30 PM; however, if you leave at 6:05 PM, record the time as 6:00 PM, not 6:15 PM). Hours must be recorded in quarter increments (e.g. .25 is used for 15 mins/.50 for 30 mins/.75 for 45 mins).

- It is the responsibility of the Athletic Training Student to provide the clinical preceptor with a weekly/bi-weekly plan of attendance for scheduled practices and events.

- It is acceptable to supplement your clinical hours at a site other than the one you are assigned, but only with permission of both your assigned clinical preceptor and the one with whom you will be working voluntarily. You may do no more than 25% of your clinical hours at a site other than the one to which you were originally assigned by the clinical education coordinator.

- Failure to report to a clinical assignment without prior notification to the Clinical Coordinator or supervising clinical preceptor will result in a 10-point grade penalty!
• In addition, clinical education field experiences will often require the student to travel off campus in order to utilize Certified Athletic Trainers and other healthcare professionals associated with the Union University ATEP throughout the community.

**Clinical Experience Reflection Paper**
All athletic training students are required to submit a 1-2 page reflection paper to the Clinical Coordinator at the conclusion of each clinical rotation experience.

The paper should consist of the following:
- Clinical setting/ location(s)
- Clinical preceptor and sport(s) you assisted with coverage
- Overview of the experience
- Positive outcomes of the experience
- Negative outcomes of the experience
- Most memorable experiences
- Recommendations for improved experience

Note: Your papers will be confidential between the Clinical Coordinator, Program Director, and Student.

**Attendance**
In addition to the attendance requirements outlined above for clinical education, attendance is required at weekly class meetings for all Athletic Training courses. Attendance is also required at monthly ATEP meetings/in-services which are scheduled on the 4th Monday of each month at 10:00 AM in the PAC, room A-11. Missing an ATEP meeting/in-service without an approved excuse will result in the student receiving a disciplinary notice and a 10-point deduction from his/her clinical course grade.

**Hands-On Experience**
Each student is expected to assist, within the limits of their skills, in the preparation of athletes for practice, and other aspects of athlete/patient health care. Students must not attempt any skill on an athlete or patient that he/she has not first demonstrated clinical proficiency.

**Dress Code**
Athletic training students are expected to dress appropriately according to the dress code stated in the policies and procedures section of the student handbook. Students doing observations must follow the dress code in place for all athletic training students. In addition, students must follow all rules and regulations pertaining to athletic training student conduct, professionalism, and confidentiality. Dress code violations will result in being sent home to change clothes, loss of clinical time for the day, and a disciplinary notice placed in the student’s file.

**Evaluations**
Each student will receive an evaluation by his/her clinical preceptor (midterm and end of semester) based on the student’s performance and behavior in the clinical education field experience.
Students will complete the following evaluations:
- Clinical preceptor evaluation (mid-term and end of semester)
- Clinical rotation evaluation (at the end of each rotation)

Note: Your evaluations will be confidential between the Clinical Coordinator, Program Director, and Student.

**Disciplinary Notices**

Disciplinary notice will be given to the student in the event of insubordination or violation of ATEP policies and procedures. These notices will remain in the student’s file and may result in the student being removed from clinical education field experiences and/or from the Athletic Training Education Program. In addition to receiving a notice in the student’s file, the following criteria will result in point deductions from the student’s clinical course grade:

- Insubordination toward ATEP or Athletic Department faculty/staff = 25 points
- Failure to attend required ATEP meetings/in-services = 10 points per incidence
- Failure to report to clinical assignment = 10 points per incidence
- Dress code violation = 5 points per incidence
- Failure to meet the 5 hours/week minimum = 5 points per hour below minimum
- Failure to complete and/or submit required ATEP documents/forms (i.e., evaluations, clinical experience reflection papers, etc.) = 5 points per incidence

**Clinical Supervision and Field Experience**

In accordance with the *Personnel Section of the 2012 CAATE Standards for Accreditation of Professional Athletic Training Programs*, the following standards apply to the supervision of each athletic training student while they are performing their clinical experiences and the responsibilities and qualification of clinical preceptors affiliated with the ATE Program.

37. Preceptor Responsibilities: A preceptor must function to:
   a. Supervise students during clinical education;
   b. Provide instruction and assessment of the current knowledge, skills, and clinical abilities designated by the Commission;
   c. Provide instruction and opportunities for the student to develop clinical integration proficiencies, communication skills and clinical decision making during actual patient/client care;
   d. Provide assessment of athletic training students’ clinical integration proficiencies, communication skills and clinical decision-making during actual patient/client care;
   e. Facilitate the clinical integration of skills, knowledge, and evidence regarding the practice of athletic training.

38. Preceptor Responsibilities: A preceptor must demonstrate understanding of and compliance with the program’s policies and procedures.

39. Preceptor Qualification: A preceptor must be credentialed by the state in a healthcare profession (see glossary).

40. Preceptor Qualification: A preceptor must not be currently enrolled in the professional athletic training program at the institution;

41. Preceptor Qualification: A preceptor must receive planned and ongoing education from the program designed to promote a constructive learning environment.
The primary settings for the students’ clinical education and field experiences should include Union University’s athletic training room, practices, and competitive events and other venues that are provided by affiliated sites that practice allied health care. The Union University athletic training rooms and the affiliated clinical sites that provide for clinical education are considered to be designated physical facilities where comprehensive health care services are provided. Field experiences will include practice and game preparation, injury/illness evaluation, first aid and emergency care, follow-up care, rehabilitation, and related services in allied health care settings. These experiences should also include opportunities for observation of, and involvement in, the immediate management and emergency care of a variety of acute athletic injuries and illnesses. Supervised clinical field experiences involve personal/verbal contact at the site of supervision between the Athletic Training Student and the Certified Athletic Trainer, who plans, directs, advises, and evaluates the Athletic Training Student’s athletic training field experience. The supervising certified athletic trainer/approved clinical preceptor must be onsite where the athletic training experience is being obtained.

According to Tennessee regulation 63-24-103.b, “[n]othing…shall be construed to prevent any person from serving as a student-trainer (athletic training student), or any similar position if such service is not primarily for compensation and is carried out under the supervision of a physician.” These experiences should always be considered as educational for the Athletic Training Student involved. Athletic Training Students will not be utilized to replace licensed and certified personnel or staff.

Guidelines for Clinical Supervision

- A Clinical Preceptor shall supervise the students’ clinical education.
- The daily supervision of students by the Clinical Preceptor must include multiple opportunities for evaluation and feedback between the student and Clinical Preceptor. Supervision of students by the Clinical Preceptor shall be through “constant visual and auditory interaction between the student and the approved clinical instructor”.
- Students shall be assigned to a Clinical Preceptor not a sport, with exception to students that are completing their senior practicum.
- An athletic training student will not replace a certified athletic trainer in any means.
- Students assigned to doctors offices, clinics, or other settings will follow the rules and regulations of that setting under the supervision of a Clinical Instructor.
- The athletic training student will not cover a practice, competition, or the athletic training room unsupervised.
- If unsupervised in the athletic training room, the athletic training student will close the athletic training room until the Clinical Preceptor returns.
- If unsupervised at a practice or competition, the athletic training student will find his/her Clinical Preceptor, notify the Clinical Preceptor that he/she has been unsupervised, and remain with the Clinical Preceptor.
The Clinical Rotation Plan

The Clinical Rotation Plan for Union University’s Athletic Training Education Program meets the guidelines for clinical experiences as directed in the CAATE Standards for Athletic Training Education Programs. Each student will spend time in field experiences that are focused on upper extremity intensive (i.e., baseball or softball), lower body intensive (i.e., track and field or soccer), equipment intensive (i.e., football or lacrosse) and general medical/orthopedic (i.e., physician’s offices, emergency rooms, health clinics).

Grading the Clinical/Field Experience

Clinical education must be graded in components of time served, psychomotor demonstrations, and a student performance evaluation that is completed by the Clinical Preceptors. Each student’s clinical course grade will be calculated according to the percentages and grading scale specified below. An example of the student clinical performance evaluation is enclosed in the Appendices of this document on page 75.

<table>
<thead>
<tr>
<th>Required Coursework</th>
<th>Percentage of Grade</th>
<th>Grading Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Module Assessments/Competency Demonstrations</td>
<td>30%</td>
<td>A = 90-100</td>
</tr>
<tr>
<td>Clinical Hours Accumulated</td>
<td>20%</td>
<td>B = 80-89</td>
</tr>
<tr>
<td>Student Clinical Performance Evaluations</td>
<td>30%</td>
<td>C = 70-79</td>
</tr>
<tr>
<td>End of Rotation Paper</td>
<td>10%</td>
<td>F = 69 and less</td>
</tr>
<tr>
<td>Professionalism</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>= 100%</td>
<td></td>
</tr>
</tbody>
</table>
Union University Athletic Training Education Program
Clinical Preceptors for 2014-15**

**Union University**
Karen Sinclair – (731) 695-4885 / ksinclair@uu.edu
Jonathan Allen – (765) 730-1094 / jmallen@uu.edu
Kate Drewry – (615) 785-5008 / kaitlynn.drewry@my.uu.edu
Dionna Linn – (317) 775-2014 / dionna.linn@my.uu.edu
Oscar Orengo – (617) 543-4697 / oscar.orengo@my.uu.edu

**STAR Physical Therapy**
Sarah Todd @ Chester County HS – (731) 694-6090 / sarah.todd@starpt.org
Morgan Hays @ McNairy HS – (731) 549-7482 / morgan.hays@starpt.org
Keith Murray @ Lexington HS – (731) 414-4059 / keithm@starpt.org

**Sports Plus Rehab**
Leigh Ann Wright @ Northside HS – (731) 431-0356 / leigha.wright@gmail.com
Blake Butler @ JCS HS – (731) 928-3777 / blakeabutler99@aim.com
Jay Roberts @ Liberty HS/USJ HS – (573) 624-0961 / dhstennis22@yahoo.com
Kevin Hansen @ JCM/Madison Academic HS – (731) 267-9917 / kevin.hansen@wth.org
Tina Cole @ TCA / South Gibson HS – (731) 549-6067 / tina.cole1980@gmail.com
Travis Livingston @ South Side HS/Jackson State CC – (615) 390-3229 / travis.livingston@wth.org
Marchelle Bailey @ Milan HS
Mallory @ Haywood County HS
Christie Golden @ USJ Football – (731) 394-4077 / cgolden@usjbruins.org
Chelsea Dunn (Lift) – (270) 293-2960 / Chelsea.dunn@wth.org
Adam Raines @ Halls/Ripley HS – (615) 417-0448 / araines83@yahoo.com

**Dynamix Physical Therapy**
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Corey Scates – (901) 734-4491 /

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**Freed-Hardeman University**
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Gayle McDonald – (731) 989-6046 / gmcdonald@fhu.edu

**Campbell Clinic**
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Blake Mashour – (901) 258-3000 / bmashour@campbellclinic.com

**Physical Therapy Clinicians**
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Laura Crittendon (Sports Plus North) – (731) 234-8281 / lauracrittendon@gmail.com
Cheryl Murray (West TN Bone & Joint) – (731) 410-2357 / cmurray@eplus.net

* Please note that modifications (additions and/or deletions) may be made to this list of Clinical Preceptors during the academic year.
ATHLETIC TRAINING EDUCATION PROGRAM
ROLE DELINEATIONS
ATEP Role Delineation Overview

The Athletic Training Faculty will collaborate with the Department of Athletics in a formal, professional affiliation in which they will contribute their knowledge and expertise as a team member to care and provide for the student athletes at Union University. This responsibility parallels their duties and responsibilities to administration and classroom instruction. The affiliation with athletics is a formal staff assignment in which the Certified Athletic Trainer will coordinate all medical interventions for the student-athletes on the team in which they are assigned. This will include, but is not limited to, the coordination and implementation of pre-season physicals, in season and preseason practice and event coverage (including travel when warranted), referral to supplemental members of the sports medicine team (team physicians, physical therapists, nutritionists etc.), documentation and maintenance of all medical records for the team members, and supervision of all Athletic Training Students in a Clinical Preceptor role. This assignment will also require daily interaction with the coaching staff in which the player status, mode of treatment, injury prognosis, and rehabilitation progress should be discussed and disclosed. The Certified Athletic Trainer will be responsible for the prevention, evaluation, treatment, management, rehabilitation and referral of athletic injuries that occur during practice or competition. In order to meet the needs of the student-athletes at Union University and the demands of the Department of Athletics, the professional role specific members of the Athletic Training Faculty must be that of both faculty and staff. This means that the specific faculty members that are Certified Athletic Trainers must accept a “sports specific assignment” in conjunction with their current faculty duties and responsibilities.

The sports specific assignment is a necessary professional commitment for a variety of reasons. The sports assignment provides a means in which Athletic Training Faculty and Athletic Training Students collaborate and interact professionally. In an appropriate clinical environment formal supervision of Athletic Training Students is not only necessary, but mandatory. This commitment to direct supervision provides a professionally controlled, organized climate outside of the classroom that promotes interaction among the athletic training students and its teaching faculty. This is an opportunity to spend quality time with athletic training students that are currently enrolled in the program and it assures the administration that a certified professional is always available to intervene in the event that an athletic training student is confronted with an injury situation. This is also a great opportunity for working professionals to observe, evaluate and provide feedback to athletic training students as they study, practice, and master the clinical and social skills involved with success in the allied health care community. These clinical experiences can also be incorporated into real practical teaching applications in the classroom.

Athletic Training/Sports Medicine is just like any other health care profession in that it continually evolves in its policies, procedures and protocols. The medical community is continuously seeking new and better ways to provide health care to its constituents. Research and innovation are common threads in an ever changing environment. A practicing professional that is current in his/her development or maintenance of professional skills will have a great opportunity to provide teaching opportunities in the clinical environment and in the process maintain professional skills, certifications, and licensure. Involvement and formal affiliation with Union University’s team athletics and other teams in the community allows an opportunity for an element of public visibility for Union’s Athletic Training Education Program. There is no better opportunity to professionally represent Union University in the eyes of the public than in local intercollegiate and high school venues of sports participation. This is a critical element in the promotion of the athletic training profession and...
the affiliation in which it shares with Union University. This recognition is a key element in the promotional value of community involvement, one that will spark public interest, recognize professional necessity, and enhance student interest and retention. The athletic training faculty and professional staff should always take the opportunity to present themselves professionally when providing medical coverage for an athletic event. Professional attire, adherence to all professional standards and intervention protocols, and interaction with the coaches, student athletes, parents, boosters and support staff should always be encouraged. Athletic Training is a profession that encompasses servanthood and commitment to excellence. Union’s faculty and staff should always take pride in their ability and willingness to provide for those that are in need and set the standard for athletic health care.

This written justification sets a firm foundation for standards of excellence that should be demanded in the profession of athletic training and the educational processes therein. This goal of professionalism is attainable with a little direction and a solid commitment from the professionals and students involved. It’s appropriate in this circumstance to evaluate the needs and demands of both athletics and education, and then plan an appropriate response taking into consideration the assets and resources. The following is a list of the suggested role delineations and recommendation as to their given responsibilities. This listing is generalized and is not to be interpreted as exclusive; collaboration is always encouraged, and responsibilities will always be shared.
Athletic Training Education Program Faculty and Staff

Name: Jennifer Farroll, M.S., ATC, LAT  
Title: Athletic Training Education Program Director  
Current Faculty Rank: Assistant Professor, Dept. of Physical Education, Wellness and Sport

**Primary Duties:** The ATEP Program Director position is a full-time faculty appointment that requires a teaching load of 24 hours (6 hour release for administrative responsibilities). The ATEP Program Director's primary duties will include the multiple responsibilities of developing, evaluating, formatting and implementing the Athletic Training Education Program curriculum model. This will include, but is not limited to the following:

- The Program Director will purposefully plan, develop and define the instructional plan for Athletic Training Education.
- The Program Director will is responsible for ensuring compliance for CAATE accreditation and the Joint Review Committee for Athletic Training Educational standards.
- The Program Director will write, publish and submit all reports regarding accreditation to JRC-AT.
- The Program Director will be responsible for student recruitment, selection and retention.
- The Program Director will monitor, grade, evaluate and provide feedback to athletic training students regarding their progress in the program.
- The Program Director will be responsible for ensuring the teaching of all competencies in classroom instruction and clinical education. This may include the implementation of instructional technology.
- The Program Director will maintain and store all student files.
- The Program Director will ensure the safety of the athletic training students (Technical standards, OSHA compliance).
- The Program Director will maintain Union University Athletic Training Education webpage.
- The Program Director will provide guidance and empower the ATEP faculty and staff.
  - Weekly/ monthly meetings
  - Short and long term goals
- The Program Director will be share responsibility for the maintenance and upkeep of the athletic training laboratory.
- The Program Director will formulate and implement standards of professional behavior.

**Collateral Duties:** The Program Director will serve on standing committees, pursue community involvement that promotes Athletic Training education at Union University, pursue scholarly activities that include public speaking, professional presentations and professional development, and engagement in national and state associations related to Athletic Training.
Primary Duties: The ATEP Clinical Coordinator position is a full-time faculty appointment that requires a teaching load of 24 hours (12 hour release for coordination of clinical education and sports specific assignments). The Clinical Coordinator position will include, but is not limited to the following:

- The Clinical Coordinator will seek and secure formal clinical affiliation agreements with members of the allied health care community that will contribute to the education process.
- The Clinical Coordinator will write, implement, and document all assessment modules for Athletic Training clinical education.
- The Clinical Coordinator will assess, evaluate and pursue off-campus clinical contracts for student assignments in allied health care facilities.
- The Clinical Coordinator will be responsible for the training of all Clinical Preceptors that are providing instruction in Union University’s Athletic Training Education Program.
- The Clinical Coordinator will coordinate the Athletic Training Student clinical field experience assignments.
- The Clinical Coordinator will maintain documentation records for all field experience/clinical hours performed by Athletic Training Students.
- The Clinical Coordinator will evaluate and provide feedback to all Athletic Training Students and Clinical Preceptors.
- The Clinical Coordinator will also serve as a Clinical Preceptor for the ATEP, and will function as the primary liaison to Union University’s Head Athletic Trainer, the student-athletes, coaches and sports medicine team members.
- The Clinical Coordinator will assist the Head Athletic Trainer with the provision of practice and event coverage for both home and away games for each assigned sport. This responsibility is with the understanding that a team approach will be emphasized in the coordination and implementation of this service to our constituents.
- The Clinical Coordinator will assist the Head Athletic Trainer in maintaining and regulating the use of Union University’s athletic training room facilities, and assist with the documentation and security of student-athlete medical records.

Collateral Duties: The Athletic Training Clinical Education Coordinator will serve on standing committees, pursue community involvement that promotes Athletic Training education at Union University, will pursue professional development and scholarly activities, and engagement in national and state associations related to Athletic Training.

Sports Specific Assignment(s): Men’s Basketball
**Primary Duties:** The Assistant Professor of Athletic Training/Associate Athletic Trainer position is a full-time faculty appointment that requires a teaching load of 24 hours (3 hour release for administrative responsibilities and sports specific assignments). The position will include, but is not limited to the following:

- The Assistant Professor will design cognitive, affective and psychomotor strategies and techniques in both classroom and clinical areas to enhance student learning, and create activities to assist students to develop critical thinking skills.
- The Assistant Professor will facilitate/guide the progress of students toward achievement of their course and program outcomes.
- The Assistant Professor will maintain athletic training skills and knowledge through formal and informal instruction/continuing education.
- The Assistant Professor will develop, nurture, and maintain relationships with team physicians and other supplemental sports medicine team members, and serve as a liaison to clinical agencies and community organizations which are used for students' clinical field experiences.
- The Assistant Professor will serve as a Clinical Preceptor for the ATEP, and will function as a liaison to Union University’s Head Athletic Trainer, the student-athletes, coaches and sports medicine team members.
- The Assistant Professor will assist the Head Athletic Trainer in the coordination, preparation and the administration of pre-season physicals for all athletes, and overseeing the provision of health services to Union University’s student-athletes.
- The Assistant Professor will assist the Head Athletic Trainer with the provision of practice and event coverage for both home and away games for each assigned sport. This responsibility is with the understanding that a team approach will be emphasized in the coordination and implementation of this service to our constituents.
- The Assistant Professor will assist the Head Athletic Trainer in maintaining and regulating the use of Union University’s athletic training room facilities, and assist with the documentation and security of student-athlete medical records.

**Collateral Duties:** The Assistant Professor will serve on standing committees, pursue community involvement that promotes Athletic Training education at Union University, will pursue professional development and scholarly activities, and engagement in national and state associations related to Athletic Training.

**Sports Specific Assignment(s):** Volleyball
Primary Duties: The Head Athletic Trainer will serve as the primary liaison to Union University’s student-athletes, coaches and sports medicine team members. The Head Athletic Trainer’s primary responsibilities will include, but are not limited to:

- The Head Athletic Trainer will provide practice and event coverage for both home and away games for each team representing Union University. This responsibility is with the understanding that a team approach will be emphasized in the coordination and implementation of this service to our constituents.
- The Head Athletic Trainer is primarily responsible for overseeing the provision of health services to Union University’s student-athletes.
- The Head Athletic Trainer will coordinate, prepare, and help in the administration of pre-season physicals for all athletes.
- The Head Athletic Trainer will develop, nurture, and maintain relationships with team physicians and other supplemental sports medicine team members.
- The Head Athletic Trainer will coordinate, prepare, and help in the administration of pre-season physicals for all athletes.
- The Head Athletic Trainer will develop, nurture, and maintain relationships with team physicians and other supplemental sports medicine team members.
- The Head Athletic Trainer will maintain and regulate the use of Union University’s Athletic Training Room facilities.
- The Head Athletic Trainer will estimate, calculate and monitor the use of budgeted athletic training room supplies.
- The Head Athletic Trainer will be responsible for securing the annual budget for sports medicine/athletic training services.
- The Head Athletic Trainer will document and secure all medical records for Union University’s student-athletes and store them for a period of seven years.

Collateral Duties: The Head Athletic Trainer will teach as an adjunct instructor in Union University’s Athletic Training Education Program. The Head Athletic Trainer will pursue professional development and scholarly activities, and engage in professional associations related to the Athletic Training profession (standing committees, professional associations, etc).

Sports Specific Assignment(s):
**Name:**
**Title:** Assistant Athletic Trainer/ Certified
**Current Rank:** Adjunct Instructor, Department of Physical Education, Wellness and Sport

**Primary Duties:** The Assistant Athletic Trainer will serve as an assistant to the Head Athletic Trainer and will share in his/her responsibilities, including stocking, cleaning, and maintaining the athletic training room facilities. The Assistant Athletic Trainer’s primary responsibilities will include, but are not limited to:

- The Assistant Athletic Trainer will provide practice and event coverage for both home and away games for each assigned sport
- The Assistant Athletic Trainer will maintain and regulate the use of Union University’s Athletic Training Room facilities
- The Assistant Athletic Trainer will develop, nurture, and maintain relationships with team physicians and other supplemental sports medicine team members
- The Assistant Athletic Trainer will serve as an Approved Clinical Instructor and is responsible for supervising athletic training students as assigned by the Clinical Coordinator.
- The Assistant Athletic Trainer will assist the Head Athletic Trainer in overseeing the provision of health services to Union University’s student-athletes.
- The Assistant Athletic Trainer will maintain confidentiality of student-athlete medical/injury information.
- The Assistant Athletic Trainer will assist in the coordination, preparation and the administration of pre-season physicals for all student-athletes.
- The Assistant Athletic Trainer will assist in the estimation, calculation, and monitoring of budgeted athletic training room supplies.
- The Assistant Athletic Trainer will assist in the documentation and security of all medical records, and maintain injury data information in proper order and report within a timely manner.
- The Assistant Athletic Trainer will perform other duties as required by the department, and as assigned by the Head Athletic Trainer.

**Collateral Duties:** The Assistant Athletic Trainer will not be required to teach; however, he/she should pursue professional development and scholarly activities, and engage in professional associations related to the Athletic Training profession (standing committees, professional associations, etc).

**Sports Specific Assignment(s):**
Athletic training clinical education requires a strong commitment to the athletic training profession. A great deal of time is demanded of athletic training students. The student’s clinical education results from involvement in the overall operation of the athletic training program. Therefore, absence from one’s responsibilities is strongly discouraged. If a situation should arise where a student cannot attend the assigned clinical setting, he/she should contact the ATEP Clinical Coordinator as well as his/her Clinical Preceptor and notify them of the situation immediately.

**Outside Employment and Athletic Training Clinical Education**

Outside employment combined with athletic training responsibilities can be very difficult. Athletic training education requires many hours in the classroom as well as the clinical setting/field experiences. The athletic training student is expected to make athletic training a priority. The clinical requirements are clearly outlined in the ATEP Student Handbook as well as the clinical course syllabi and they are not negotiable. Failure to meet these clinical requirements will result in a significant reduction in the student’s clinical course grade.

**Sports Participation and Athletic Training Clinical Education**

Due to the time commitment required for athletic training, it is difficult to participate in intercollegiate athletics in conjunction with athletic training education…but not impossible. As an institution of higher education and an institution with an Athletic Trainer major, we understand the importance of students gaining additional knowledge and a greater understanding of the career field they have chosen for future employment. What two fields are better correlated than athletics and sports medicine? However, to be successful in both ventures requires effort and commitment to both. The student-athlete/athletic training student must meet the clinical requirements set forth by Union University’s Athletic Training Education Program as well as the demands of the chosen sport in which he/she is participating. The clinical requirements are clearly outlined in the ATEP Student Handbook as well as the clinical course syllabi and they are not negotiable. Failure to meet these clinical requirements will result in a significant reduction in the student’s clinical course grade.

**Conduct with Athletes**

Athletic training students should remember that they are filling two roles: (1) college students and (2) athletic training students representing the Athletic Training Education Program at Union University, and you should therefore act accordingly, whether inside or outside of the athletic training room. It is understood that while working closely with a sports team, friendships may develop between athletic training students and student-athletes. A professional demeanor should be exercised at all times. In the clinical setting, athletic training students are responsible for the care of the student-athletes. However, the clinical setting is primarily meant to provide a learning environment where the student can practice and further his/her athletic training skills.

**Dating Student-Athletes**

Dating a student-athlete can result in compromising situations and it is therefore highly discouraged. If, however, a situation arises where an athletic training student is dating a student-athlete, this relationship should not be evident in the athletic training room or when assigned to work with his/her sports team. A professional demeanor should be exercised at all times. If the
situation becomes a problem and the athletic training student cannot perform his/her duties, the student may be reprimanded or removed from assigned duties.

**OSHA Training and Awareness**

In compliance with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard 1910.1030 and in reference to Union University’s Exposure Control Plan regarding Bloodborne Pathogens, employees and allied health care students (including nursing students and athletic training students) must complete an annual training and education session regarding exposure to, and handling of blood, blood products and other potentially infectious materials. The purpose of this training is to ensure that employees and students are aware of potential risk factors involving the handling of body fluids in the sports medicine environment, to educate each individual on methodology of how to protect oneself in an environment that poses a risk of exposure and to incorporate a plan of action in the instance that an exposure occurs. Each student participating in the Union University’s Athletic Training Education Program must comply with the following precautionary measures:

**Bloodborne Pathogen Education Training**

Each student must complete a two-hour in-service presentation addressing the potential exposure to bloodborne pathogens in the sports medicine environment. The course is a video-based and instructor guided course that is referenced to SmithKline Beecham Pharmaceuticals OSHA Compliance Kit for Healthcare Administrators. This course focuses on universal precautions, bloodborne diseases (HIV and Hepatitis B) the proper use of personal protective equipment and the requirements of an exposure control plan. Following completion of the course, students are required to pass a written exam (80%) on the given material. This course of instruction is mandatory for both students and employees participating at Union University in the Athletic Trainer Education Program and must be updated annually.

**Hepatitis B Vaccination**

All employees and students are offered a vaccination for the hepatitis B virus (HBV). This virus is highly contagious and spreads primarily through blood contact with infected individuals. HBV is also very resilient; in a dried state the hepatitis B virus can remain viable on surfaces for up to one week, and possibly longer. The vaccination is offered at Student Health Services on the Union University Campus for the cost of $150.00. It is highly recommended that people working in any healthcare industry where there is a risk of HBV exposure take this necessary precaution. In the instance that you decline the vaccination, you will be required to complete Union University’s Hepatitis B Vaccination Declination Form.

**TB Skin Test**

The individual must have an annual TB skin test. The TB skin test is mandatory for individuals working in Union University’s Athletic Training Education Program. It is offered at Union University’s Student Health Service for a cost of $5.00. Compliance to the above precautionary criteria is mandatory for individuals wishing to participate in Union University’s Athletic Training Education Program. Those who are not compliant with these precautionary measures will be authorized to continue with the curriculum course of study, but may not be authorized to participate in the clinical application of skills in Union University’s Department of Athletics or other clinical education sites (e.g., West Tennessee Healthcare affiliates).
If you have any questions regarding Union University’s position on OSHA’s Bloodborne Pathogens Standard or the Student Awareness Program, please contact Jennifer Farroll, PEWS Liaison to Union University’s Safety Control Officer at 731-661-5024.

Union University Athletic Training Program’s Exposure Control Plan

While participating in clinical education field experiences, Athletic Training Students may be at risk of exposure to bloodborne pathogens and other infectious diseases, therefore the Athletic Training Program has developed an Exposure Control Plan to help eliminate or minimize that risk. The Exposure Control Plan includes educational material on Bloodborne Pathogens and Universal Precautions, safety policies and procedures for proper cleaning techniques, handling of potentially infectious material, etc., information on vaccinization, as well as procedures for reporting an exposure. The athletic training student should read through the entire Exposure Control Plan in order to be familiar with these policies and procedures. A copy of the Union University Athletic Training Program Exposure Control Plan is located in each of the athletic training rooms on campus.

Athletic Training Student Financial Responsibilities

Students are responsible for all tuition, fees, and other expenses associated with the Athletic Training Education Program at Union University.

Tuition

A list of the current undergraduate tuition and fees can be found on the student resources page of Union’s website (www.uu.edu/resources/currentstudents/) under Financial Information.

Liability Insurance Statement

Liability insurance is required of all athletic training students involved in the clinical courses. You will automatically be billed $25.00 by the business office for liability coverage under Union University’s group plan unless you provide evidence of personal malpractice/liability insurance before the first day of class each term. The amount of personal liability insurance coverage must be at least $1,000,000 each claim/$3,000,000 aggregate.

West Tennessee Healthcare Student Orientation

All athletic training students are responsible for completing the West Tennessee Healthcare (WTH) allied healthcare student orientation process at the start of the fall semester in order to utilize clinical sites such as the Jackson-Madison County General Hospital and its affiliates (e.g., Sports Plus Rehabilitation Centers). The orientation process includes a series of online training modules/lessons that must be completed within the first two weeks of the fall semester and verified by printing off the transcript and submitting it to the WTH Human Resources Department. The athletic training student must submit documentation of current immunization records (including a negative TB skin test within the last year), a negative 11-panel drug screening, and a negative background check to the ATEP Clinical Coordinator before he/she can begin the online orientation. (Note: the student is responsible for the cost of the background check.) A hospital ID badge will be issued upon completion of this process that must be worn whenever the athletic training student participates in a clinical education field experience at any
of West Tennessee Healthcare’s affiliated sites (e.g., when observing the physicians from West Tennessee Bone and Joint perform orthopedic surgery at the hospital, as well as the Physical Therapists and/or Athletic Trainers working at Sports Plus Rehab and the local high schools).

Additional Fees and Fair Practice

Effective fall 2007, all athletic training students will be billed a $50.00 laboratory fee per semester for clinical courses (AT 265, AT 275, AT 365, AT 375, AT 465, and AT 475). These monies will be used to help supplement the costs of providing CPR/first aid certification, OSHA training, TB skin tests, drug screenings, etc., the purchasing and maintaining of equipment and supplies for the ATEP student laboratory, and providing the students with Union University Athletic Training attire (i.e., t-shirts and polo shirts). Please note that each student will also be required to invest in professional attire (i.e., khaki pants, khaki shorts, dress pants, etc.) in order to meet the standards of professional practice in clinical education.

Transportation

All athletic training students will be assigned to off-campus clinical field experience sites as well as on-campus assignments during the course of this program. Athletic training students are required to provide their own transportation (and any costs incurred) to and from clinical field experience sites. Car pooling, whenever possible, is encouraged. Please note that due to the increased number of students in the ATEP and the limited number of Clinical Preceptors working on-campus and/or within close proximity to campus, students may be required to drive to clinical sites that are 15 minutes up to 1 hour away from Union University for their off-campus clinical assignments. All athletic training students must maintain their own auto insurance policy (according to state law). Union University and the ATEP are not liable for any accident that may occur to the student or the student’s vehicle while traveling to and from the clinical field experience sites. Furthermore, no athletic training student shall be required to transport a patient or student-athlete (high school or collegiate) to or from a medical appointment, athletic practice, athletic event or other related affair in their personal vehicle.

Athletic Training Student Code of Conduct

Dress Code and Personal Conduct

Dress code is in effect for all aspects of clinical education, including the Union University athletic training rooms during practice as well as competition, and when assigned to a clinic or physician’s office. Any appearance codes set forth for specific teams/clinical sites are to be followed by the athletic training student assigned to that team/site. Athletic training students are to present themselves in a manner that promotes a professional physical appearance. Males and females should wear their hair in a manner that prevents it from coming in contact with the athletes/patients or therapeutic modalities that may be in use. Hands should be washed often to prevent the spread of germs/contamination.

The American Medical Association recognizes the profession of Athletic Training as an Allied Health Care profession. Each athletic training student is expected to present him/herself in appropriate professional attire and be neatly groomed. Clothes will always be clean, pressed and in good repair. Any article of clothing with holes will NOT be permitted. The athletic training student is to dress appropriately for all clinical assignments. At no time may an athletic training
student wear blue jeans, torn, tattered, restrictive, or inappropriate clothing when representing Union University and the Athletic Training Education Program. Athletic training students may be sent away from their clinical assignment if he or she fails to adhere to the dress code.

While participating in clinical education, the acceptable dress is as follows:

- **Shirts/Sweatshirts:**
  - Union University Athletic Training t-shirts, sweatshirts, or collared shirts.
  - A Union University t-shirt or sweatshirt that does NOT advertise a fraternity, sorority, or any other university organization not affiliated with athletic training.
  - Union University athletic team t-shirts or sweatshirts when working with that team.
  - Any solid colored t-shirt, sweatshirt, or collared shirt.
  - Collared shirts must be tucked in and a belt should be worn.
  - Ladies must dress in a manner so as not to show any cleavage, midriff or the lower back, including when sitting down or bending over to perform athletic training duties.
  - NO shirt advertising any alcohol or tobacco products or the like will be allowed. In addition, Union University Athletic Training attire must not be worn in establishments that promote the use of alcohol or tobacco products.

- **Shorts/Pants/Skirts:**
  - Solid-colored shorts or pants only (i.e., khaki, navy blue, black, red, or grey).
  - NO blue jeans or blue jean shorts will be allowed.
  - NO unhemmed cut-off shorts, torn or tattered shorts or pants will be allowed.
  - Shorts must be of at least mid-thigh length.
  - Skirts must be below the knee in length.
  - Dress for clinical assignments will be appropriate in accordance with the facility.

- **Shoes/Socks:**
  - Shoes must be kept clean, without holes, and they should be flat bottomed (i.e. tennis shoes, loafers, etc.)
  - Dress shoes may be worn for indoor events, but heels must be kept to a minimum. (Rule of thumb – If shoes are not suitable for running to aid an athlete, DO NOT wear them.)
  - Socks must also be worn and color-coded with uniforms.
  - NO open-toed shoes, sandals, or flip-flops will be allowed.
  - Sport sandals are allowed during pre-season practices only.

- **Hats/Visors:**
  - No hats/visors may be worn at an indoor sporting event.
  - No hats/visors may be worn to a non-athletic clinical assignment.
  - Only Union University or solid colored hats/visors may be worn.

- **Jewelry:**
  - Must be kept to a minimum.
  - Should not interfere with athletic training duties.
• **Jackets and Parkas:**
  - May be worn during appropriate weather.

• **Game Day Attire:**
  - Collared Union University Athletic Training shirts with khaki pants or shorts.
  - Athletic training students assigned to indoor events may wear dress clothes as approved by their clinical instructor.
  - Athletic training students assigned to high school settings may wear shirts provided by the school or clinic, as deemed appropriate by their clinical preceptor, with khaki pants or shorts for events.

**General Guidelines**

- There will be no bearing of weapons, including knives, while participating in athletic training education or clinical field experiences.
- The athletic training student is responsible for wearing his/her ID badge whenever performing athletic training duties outside of the UU athletic training room.
- The athletic training student is expected to meet all university, academic and student-athlete appointments and obligations promptly and regularly.
- Athletic training students are not to miss classes due to their clinical assignments unless previously approved by the athletic training student’s individual professor/instructor.
- Athletic training students will only perform those duties and skills they are qualified to perform based upon their successful completion of the athletic training courses and the discretion of their clinical preceptor.
- All athletic training students will be prompt to their clinical assignment. If an athletic training student is going to be late for a practice or event, he/she should telephone the clinical preceptor.
- All athletic training students will be expected to follow the rules and regulations of the Athletic Training Education Program, athletic training room(s), and those of the clinics, schools, or other facilities to which the students are assigned.
- If a situation should arise where an athletic training student cannot attend an assigned clinical setting, he/she should contact the head athletic trainer/clinical preceptor and notify them of the situation immediately.

**Academic Guidelines**

- The athletic training student is expected to work toward obtaining a baccalaureate degree in the following ways:
  - Attend classes on a regular basis. On occasion, traveling with an athletic team for competition may result in the athletic training student missing classes. Arrangements should be made by the student to contact his/her instructor and schedule any “make-ups” prior to the absence.
  - Complete all classroom assignments.
  - Seek academic advising/counseling when needed.
  - Attend tutoring sessions as needed.
- The athletic training student is expected to maintain a minimum semester grade point average of 2.5 at all times.
• The athletic training student is expected to attain a minimum grade of “C” in all athletic training courses.

Team Guidelines

• The athletic training student is expected to properly care for equipment that is issued in order to perform his/her athletic training duties and to return all equipment after its use. The athletic training student is financially responsible for all equipment that is not returned to the athletic training room.
• Athletic training students are expected to conduct themselves in a manner that will reflect positively on Union University, the Athletic Training Education Program, the athletic team(s), and the individual.
• The athletic training student must maintain proper conduct with the game officials, opponents, and fans at all times.
• The athletic training student is expected to follow all rules established by the university, and the Department of Athletics, NCAA, and each team pertaining to alcohol, drugs, gambling and curfews.
• When traveling to an athletic event and representing Union University, the athletic training student is expected to follow the dress code as established by the coach of the assigned team.
• If an athletic training student plans to travel either to or from an athletic event apart from the team, he/she is expected to receive advance clearance from the coach and Certified Athletic Trainer for his/her plans.

Rules When Traveling

When traveling with a team, the athletic training student must:

• Be accompanied and supervised by a Certified Athletic Trainer who is an approved clinical preceptor for Union’s Athletic Training Education Program.
• Assist with pre-event preparations, including stocking the medical kit, packing equipment and supplies for the trip, collecting all necessary student-athlete information and documentation (i.e., consent forms, insurance information, and emergency contact information), and perform additional duties as requested by the clinical preceptor.
• Assist the Certified Athletic Trainer with the assessment, treatment, and documentation of all injuries and interventions for the student-athletes on your assigned team.
• Obey all rules of travel in accordance with your assigned team as stated by the head coach or approved clinical preceptor.

Special Events

Athletic training students who volunteer or who are assigned to special events (e.g., high school jamborees, conference or national tournaments, etc) outside those hosted by Union athletics will:

• Follow all procedures developed by the medical staff of the special event.
• Represent Union University and the Athletic Training Education Program in the utmost professional manner.
• Be on time for scheduled events.
• Wear Union University Athletic Training attire unless the medical staff of the event provides uniforms/alternative clothing.

**Restocking and Inventory**

Athletic Training Students are responsible for checking and restocking each sport’s medical kits, taping tables, and other expendable supplies before events, practices, or travel dates. In the event that supplies are running low, report this to the Athletic Training staff.

**Treatments**

• Athletic training students should only use therapeutic modalities when under the direct supervision of a Certified Athletic Trainer.
• Standard treatment protocols should be followed when applying therapeutic modalities.
• Briefly evaluate the athlete’s progress before and after each treatment.
• If there is any doubt as to how to proceed with treatment, seek help from a Certified Athletic Trainer or your Clinical Preceptor.
• Student-athletes are **not** allowed to treat themselves in the athletic training room. They must be treated by a member of the university’s athletic training staff or an athletic training student under direct supervision of a Certified Athletic Trainer.
• All athletic training students should supervise the treatments of their athletes/patients.
• All treatments rendered in the athletic training room are to be properly documented.
• Athletic training students should use only those therapeutic modalities with which they are familiar and competent.
• Athletic training students **must not** attempt any skill on an athlete/patient that he/she has not first demonstrated clinical proficiency.

**Medications**

The Athletic Training staff members are directed by the Team Physician to administer over-the-counter medications only. This includes, but is not limited to, Tylenol, Ibuprofen, Pepto-Bismol, Chloraseptic, Heat Aid, etc. All over-the-counter medications that are administered must be properly documented in the student-athlete’s file using Injury Monitoring Software.

Before administering any medication, it is standard procedure to ask the athlete if he/she has any allergies, or if he/she is taking any other medications. If there are any questions regarding the use of medication, consult the PDR in the athletic training room or the team physician.

Any medications other than the over-the-counter medicine are to be obtained by a prescription issued/signed by a team physician. Prescription medications are to be handled directly by the team physician and athlete to whom they are prescribed.

**Record Keeping**

The Athletic Training Student is responsible for recording treatments and interventions as directed by their clinical instructor. Daily documentation of medical information is required and must include the treatment parameters and rehabilitation program for each student-athlete/patient. Athletic Training Students who evaluate athletic injuries should also document this information in a SOAP/progress note to be placed in the student-athlete’s file.
Confidentiality

- Confidentiality of the student-athlete’s medical records must be maintained. No medical records are to be removed from the athletic training rooms or Head Athletic Trainer’s office by an Athletic Training Student.
- Athletic Training Students must not discuss an athlete’s injury with anyone other than the athlete and the Athletic Training staff. Never discuss the injury of one player with another player. If anyone (i.e., students, teammates, coaches, fans) asks about an athlete’s injury, refer them to the appropriate Athletic Training staff member.
- **WHAT YOU SEE AND HEAR IN THE ATHLETIC TRAINING ROOM… STAYS IN THE ATHLETIC TRAINING ROOM!!!**
- Never question or criticize team physicians, staff certified athletic trainers, or other athletic training students in front of an athlete/patient. If you have questions, choose a more appropriate time and manner in which to ask the physician or staff athletic trainer.

Communication

The Athletic Training Student should practice effective communication skills (written and verbal) in a manner that separates him/her from the student-athlete. One must always use common courtesy. Any communication problems between the Athletic Training Student and the student-athlete or the coach should be directed to the Head Athletic Trainer or one of the staff Certified Athletic Trainers. Professional language and mannerisms are to be practiced at all times. Vulgar language by the Athletic Training Student(s) and/or student-athlete(s) is not appropriate in the athletic training room or in any other Union University venue or affiliated clinical site.

Disciplinary Actions

The Athletic Training Education Program (ATEP) adheres to the policies and procedures of Union University as described in the Campus Life Handbook. In addition, athletic training students must also adhere to the policies and procedures outlined in the Athletic Training Student Handbook. Failure to do so will result in disciplinary action against the student.

The athletic training student will first receive a disciplinary notice that will be issued in writing to the student and a meeting will take place with the ATEP faculty/staff in order to address the infraction. Further infractions will result in the reduction of the clinical course grade, removal from clinical assignment for a specified duration of time, and possible expulsion from the Athletic Training Education Program.

The faculty/staff of Union University’s ATEP strongly believe in forgiveness, and college students often deserve a second chance… therefore, after meeting with the faculty/staff regarding an infraction, the student may be given the opportunity to make necessary changes. However, the Program Director and Clinical Coordinator reserve the right to remove any student from clinical education for failure to adhere to the established rules and guidelines of the Athletic Training Education Program.
Student Conduct Guidelines

Alcohol and Substance Abuse

The use of illicit and/or illegal substances is grounds for immediate dismissal from the program. All students are expected to comply with substance use/abuse policies as outlined in Union University’s Undergraduate Catalogue. Students taking any substance (illegal, legal, or medically prescribed) that has the potential to impair judgment, alertness, mental status, physical capacities, or otherwise reduce professional performance, should report this use to the Athletic Training Staff/ATEP faculty immediately. This will assist the staff in ensuring a safe environment for the athletes and clients receiving healthcare services. The university has also recently adopted a “Student Alcohol and Drug Testing Policy to Maintain Wellness,” which applies to all students enrolled in health related academic programs at Union University (see Appendix C of this handbook).

HARASSMENT

It is the policy of Union University that bullying, abuse, molestation, discrimination and harassment within our community, in any form, is prohibited. For the purposes of this policy, harassment is defined as unwelcome conduct, whether verbal or physical, based upon a person’s protected status (race, color, gender, age, religion, marital status, national origin, veteran status or disability as defined by applicable federal and state laws and regulations) and which affects tangible job benefits or opportunities; interferes with work performance, or creates an intimidating, hostile, or offensive work environment. In most instances, harassment involves an abuse of power or authority by an individual who has control over the employment or academic status of another. However, harassment can occur between peers (e.g., student-against-student harassment). One form of harassment, sexual harassment, merits a more detailed discussion. Special provisions relating to sexual harassment are included in the following section. All members of the University community are urged to immediately report all incidents of harassment whenever they occur. The following sections address the Requirement to Report, Complaint Procedure, and Protection from Retaliation for all instances of harassment.

PERSONAL ABUSE. Personal abuse is defined as any behavior that results in bullying, harassment, coercion, threat, disrespect and/or intimidation of another person, or any unwanted sexual attention towards another person. This action may include any action or statements that cause damage or threaten the personal and/or psychological wellbeing of a person. Inappropriate narrative or cyber-bullying on social media (e.g. Twitter, Facebook, blog, or texting) may be considered personal abuse.

Sexual Harassment

Union University is committed to providing its faculty, staff, and students with an environment free from explicit and implicit coercive sexual behavior used to control, influence, or affect the well-being of any member of the University community. No student or employee, male or female, should be subjected to unsolicited and unwelcome sexual overtures or conduct, whether verbal, written, or physical. This includes inappropriate behavior from a member of the same sex. Sexual harassment of any type will not be tolerated and is expressly prohibited. Those who engage in sexual harassment may be subject to civil and criminal penalties. Sexual harassment is grounds for disciplinary action, which may include reprimand, demotion, dismissal, or other appropriate action, depending upon the nature of the harassment. Sexual harassment is especially destructive when it threatens relationships between teachers and students, or supervisors and subordinates. Through control over grades, salary decisions, changes in duties or workloads, recommendations for graduate study, promotion, etc., a teacher or supervisor can have a
decisive influence on a student, staff, or faculty member's career at the university. Sexual harassment in such situations constitutes an abuse of the power inherent in a faculty member’s or supervisor's position. Faculty and staff are asked to be especially sensitive to the fact that they are in a position of authority over students and that authority carries with it a responsibility to be mindful of situations in which they are dealing with students in private, one-on-one associations both on and off campus.

**Sexual Harassment Defined:** Sexual harassment does not refer to occasional compliments of a socially accepted nature. It refers to behavior that is not welcome; is offensive; harms morale; creates a hostile, intimidating, or offensive work environment; and which consequently interferes with work effectiveness. Normal, courteous, mutually respectful, pleasant, or non-coercive interactions acceptable to both parties are not considered to be sexual harassment.

Sexual harassment is unwanted sexual attention of a persistent or offensive nature made by a person who knows, or reasonably should know, that such attention is unwanted. Sexual harassment includes sexually oriented conduct that is sufficiently pervasive or severe to unreasonably interfere with an employee's job performance or create an intimidating, hostile or offensive working environment. Sexual harassment can be physical and/or psychological in nature. An aggregation of a series of incidents can constitute sexual harassment even if one of the incidents considered on its own would not be harassing. Students and employees are prohibited from harassing other students and employees whether or not the incidents of harassment occur on the University premises and whether or not the incidents occur during working hours. Sexual harassment encompasses a wide range of conduct. The examples listed below are not intended as an exhaustive list of prohibited conduct.

A. Physical assaults of a sexual nature, such as rape, sexual battery, molestation or attempts to commit these assaults, and intentional physical conduct that is sexual in nature (e.g. pinching, patting, touching the body, brushing up against, tickling, hugging, kissing, or other similar physical conduct).

B. Continued or repeated unwelcome offensive behavior including sexual flirtations, advances, propositions or other sexual comments (e.g. whistling, leering/ogling, lewd gestures, noises, off-color or suggestive language; lewd remarks, innuendoes, sexual jokes, or comments about a person's body, appearance, sexuality or sexual experience). This includes behavior directed at or made in the presence of any individual who indicates, or has indicated in any way, that such conduct in his or her presence is unwelcome.

C. Preferential treatment or promises of preferential treatment to a student or employee for submitting to sexual conduct, including soliciting or attempting to solicit any individual to engage in sexual activity for compensation or reward.

D. Displaying or distributing any written or graphic material, including calendars, posters, drawings and cartoons that are sexually suggestive, sexually demeaning or pornographic.

E. Threats and demands to submit to sexual requests as a condition of employment or academic status (e.g. assignment, compensation, advancement, career development), as well as offers of job benefits, or academic opportunity in return for sexual favors.

Sexual harassment may result from an intentional or unintentional action and can be subtle or blatant. The context of events and the totality of the circumstances surrounding those events are important in determining whether a particular act or series of events constitutes sexual harassment.

**Requirement to Report:** In order for the University to take appropriate corrective action, it must be aware of any instance of harassment or related retaliation. Therefore, the University requires anyone who believes that he or she has experienced or witnessed sexual or other form of harassment, including prohibited activities against minors visiting Union campuses for university sponsored events or related
retaliation to seek assistance from the appropriate campus resource (as outlined in the next section) by coming forward promptly with concerns or complaints. Supervisors must deal expeditiously and fairly with allegations of sexual harassment within their department, taking all complaints or concerns of alleged or possible harassment seriously. They are to ensure that harassment or inappropriate sexually oriented conduct is reported to the Office of Human Resources immediately so that a prompt investigation can occur. Supervisors should take any appropriate action to prevent retaliation or prohibited conduct from reoccurring during and after any investigations or complaints. Supervisors who knowingly allow or tolerate sexual harassment or retaliation are in violation of this policy and subject to discipline.

**Complaint Procedure:** If a student or employee believes that he or she has been subject to sexual harassment or any unwanted sexual attention, they should make their unease and/or disapproval directly and immediately known to the harasser whenever possible. If the situation is not immediately resolved, or if the employee is unable to or uncomfortable to address the alleged harasser directly, he or she should report the incident to the appropriate authority as outline below.
A student with a complaint of harassment against a faculty member, staff member, a member of the administration, or another student should make initial contact with Dr. Cynthia Jayne, Associate Provost for Intercultural and International Studies, and Acting Title IX Coordinator (cjayne@uu.edu; (731)661-5358.) Alternate contacts include the Associate VP of Human Resources, the Provost and the President. The contact person will complete a written incident report and forward to John Carbonell, Associate VP of Human Resources.

To ensure the prompt and thorough investigation of a sexual harassment complaint, the complainant should provide a written record of the date, time and nature of the incident(s) and the names of any witnesses.

The University will handle the matter with as much confidentiality as possible. The University will conduct an immediate investigation in an attempt to determine all of the facts concerning the alleged harassment. The investigation will be directed by the Associate VP of Human Resources. However, if someone from that office is the subject of the investigation, the Office of the Provost (faculty) or the Dean of Students (staff or student) will direct the investigation.

The Associate VP of Human Resources, or the leader of the investigation, is responsible for ensuring that both the individual filing the complaint and the respondent are aware of the University’s sexual harassment policy and investigation. He or she is to explore informal means of resolving sexual harassment complaints and notify the police if criminal activities are alleged.

As a part of the investigation of the claim of sexual harassment, the contact person, the complainant, and the respondent will be asked to provide statements regarding the incident. Once the report is reviewed and investigation is concluded, a finding may be that sexual harassment did occur, and corrective action (reprimand, demotion, dismissal, or other appropriate action) will be communicated in writing to the complainant and respondent. Appeals to this process may be conducted in accordance to the most recent revision of the faculty and staff handbooks under the section(s) entitled “Violation of Standards of Conduct” or “Grievance Procedures.”

All documents, except disciplinary action documents, related to an incident will remain in a file other than the employee’s personnel file. Although filed separately, all personnel related files will be kept in the Office of Human Resources. In cases involving students, all documents will be maintained by the Office of the Dean of Students.

**Protection Against Retaliation:** There will be no retaliation of any kind against individuals who, in good faith, report instances of sexual or other form of harassment, or who participate in or are witness to a procedure to redress a complaint of sexual or other form of harassment is prohibited not only by University policy but also by state and federal law. Retaliation is a serious violation which can subject the offender to sanctions independent of the merits of the harassment allegation. Any individual found to have violated this provision will be subject to disciplinary action, up to and including dismissal.

**The Judicial Process**

The purpose of the Values Violation Process is to give fundamental fairness and consistency to a student who has potentially violated a Union University Core Value. An athletic training student who has been charged with a value violation and thus alleged to be involved in an inappropriate behavior will be granted these rights in the judicial process.
Outline of the Judicial Process

A. Any student, faculty, staff, parent or guest may present a written report (incident report form) of the facts as they know them regarding the alleged violation.
B. This report is referred to the Dean of Students. If there is substantial evidence to support the alleged violation, the Dean of Students, or his designee, will arrange a meeting with the student.
C. The athletic training student will receive written or verbal notification of the alleged violation and meeting. Failure by the athletic training student to appear for a scheduled hearing of which he/she has been officially notified will necessitate a decision be made by the university without the athletic training student’s input. A summons to a judicial hearing listing takes precedence over any university class or activity.
D. After the hearing takes place, the degree of involvement will be established and a sanction will be given.
E. The athletic training student will receive written notification of the outcome of the judicial hearing listing any assigned sanctions.
F. Any athletic training student has the right to appeal the decision of any disciplinary hearing if the athletic training student believes the treatment received is unjust; all the facts in the situation were not taken into consideration or the action taken was too severe for the behavior involved.

Student Rights

A. Procedures. The athletic training student will be informed verbally or in writing of the judicial process.
B. Hearing. The athletic training student may request a hearing before the Judicial Council, Assistant Dean of Students or Dean of Students, or the Provost.
C. Evidence. The athletic training student will be informed of all the evidence connecting him/her to the alleged value violation.
D. Counsel. The athletic training student may bring a Union University faculty, staff or student to the hearing in the role of friend, advisor and counselor.

The Appeal Process

The University offers an Appeal Process to all students who feel the facts surrounding their judicial hearing merit an appeal. This is a student’s right to appeal any sanction issued if it is not fairly match to the value violation.
Instructions for Processing an Appeal

- The student must fill out an Appeal Form available in the Dean of Student’s Office. This must be completed and returned within 48 hours after receiving notice of disciplinary sanctions.
- The student may appeal a decision based on one of the following reasons:
  - The treatment received was unjust.
  - All the facts in the situation were not considered.
  - The action taken was too severe for the behavior involved.
- The Appeal Form must be complete and detailed. Students are not guaranteed an interview with the judicial council hearing the appeal. All judgments on an appeal may be made solely on the information written in the appeal. This information must also be typed and stapled to the Appeal Form.
- The student will be provided an official written notification detailing the decision to accept or deny the appeal.

Re-admittance after Expulsion

Any student once having been admitted to Union University and then missing one or more semesters (fall or spring) must be re-admitted by the following process:
1. Complete a new application (fee is not required).
2. Clear all previous academic, social, and financial obligations. This includes written permission from the Dean of Students for re-admittance.
3. Submit official transcripts from any undergraduate institutions attended since leaving Union University.
4. Submit a student transfer form from the last institution attended if it was a college other than Union.
ATHLETIC TRAINING ROOM GUIDELINES
Athletic Training Room Rules and Regulations

- The supervising Certified Athletic Trainer is always in charge.
- Report all injuries/illnesses to the clinical instructor/head certified athletic trainer.
- Answer the telephone in a professional manner by saying “Hello, Union University Athletic Training Room…Can I help you?”
- Do not attempt to use any equipment unless you have successfully completed the competency and have been instructed to do so by the supervising clinical instructor.
- Keep the athletic training rooms clean at all times.
- If after looking in supply room, supplies are needed, report it to an athletic training staff member.
- There will be no eating or drinking in the athletic training room.
- Athletic training students assigned to high schools, clinics, and other settings will follow the rules and regulations of those settings.

Athletic Training Room Procedures

Injury Prevention

- Make sure coolers and water bottles are thoroughly cleaned after each use.
- Make sure to maintain a clean and orderly athletic training room at all times.
- Inspect all courts and fields for wet spots and irregular surfaces.
- Inspect the area around all courts or fields for any object which may cause harm should an athlete collide with said object in the midst of practice or competition.
- Inspect all fields for glass, bottle tops, rocks, holes, wood, or other hazardous conditions.
- Keep non-participating personnel in their area far away from sidelines and competition.
- Always strive to improve methods, techniques, treatments, and knowledge.
- Make sure athletes are kept in properly fitting, safe equipment.
- Watch out for individuals who may be more prone to heat illness.

Daily Athletic Training Room Schedule

The Fesmire Field house athletic training room will be open by appointment only Monday through Friday before 12 pm. The Field house athletic training room will open at 12:00 PM and remain open until the last scheduled practice or athletic event ends (approx. 7:30 PM, unless there is an evening game).

The Penick athletic training room will be open by appointment only Monday through Friday mornings for student-athlete rehabilitation and treatment. Whenever possible, the Certified Athletic Trainer should try to coordinate student-athlete appointment times with the ATEP instructors who use the Penick athletic training room as a classroom/lab for Athletic Training and PEWS courses. The Penick athletic training room will regularly open 1 hour before the first practice of the day and remain open until the last scheduled practice or athletic event ends.

Both the field house and Penick athletic training rooms will only be open on the weekends when there are scheduled team practices or games.
Areas To Be Cleaned

Make sure the athletic training room is clean at all times. The appearance of the athletic training rooms on this campus makes a statement about Union University’s Athlete Training Education Program and its staff.

- All tables should be wiped down after each treatment.
- All modality carts should be arranged neatly, wiped off, and all equipment put away.
- All whirlpools should be cleaned following each use.
- Floors should be swept and/or mopped daily.
- Taping areas/drawers should be straightened and restocked daily.
- Storage cabinets should be neat and orderly.
- Dirty laundry should be washed, folded, and put away every day.

Supplies, Materials, & Equipment Policy

- The use of all supplies, materials, and equipment in the athletic training room is a privilege.
- Students may not take any supplies, materials, or equipment from the athletic training room unless they have received permission from a staff certified athletic trainer.
- Any removal of supplies, materials, or equipment from the athletic training rooms and/or ATEP laboratory for educational purposes must be approved by the athletic training staff or ATEP administration and should be returned to the appropriate location as soon as possible.
- It is the student’s responsibility to take care of the supplies, materials, and equipment from the athletic training rooms and the ATEP laboratory.
- For practice purposes only, athletic training students may take practice tape and pre-wrap from the ATEP laboratory without permission.
Therapeutic Modalities

General Guidelines and Procedures

The therapeutic modalities that are listed below are taken from Therapeutic Modalities 3rd Edition (Starkey, 2004). This information provides general guidelines for the modalities that are commonly used in our athletic training facilities. Other textbooks may provide additional information and should be utilized as deemed professionally appropriate.

Cold Packs

The local and systemic effects of cold application are vasoconstriction, decreased rate of cell metabolism resulting in a decreased need for oxygen, decreased production of cellular waste, reduced inflammation, decreased pain, decreased muscle spasm, decreased respiratory rate, decreased heart rate, increased muscle tone, and decreased temperature. The indications, contraindications, and setup are listed below.

Indications:
- Acute injury or inflammation
- Acute or chronic pain
- 1st degree burn
- Post surgical pain and edema
- Spasticity accompanying CNS disorders
- Acute and chronic muscle spasm
- Neuralgia

Contraindications:
- Cardiac or respiratory involvement
- Uncovered open wounds
- Circulatory insufficiency
- Cold allergy
- Anesthetic skin
- Advanced diabetics
- Reynaud’s phenomenon

Suggested Setup:
- Establish that there are no contraindications.
- Fill the bag with enough ice to last for the duration of the treatment, but do not overfill. If the bag is too full, it cannot be molded to the body part.
- Remove excess air from the bag to allow the ice to conform to the body part being treated.
- Many body parts will require more than one bag to fully cover the area.
- In acute injuries, or when compression is desired, wet an elastic wrap and apply one layer around the injured area.
- Apply ice bag over the injured area. Secure it in place with an elastic wrap or flex wrap.
- Do not leave ice pack on longer than 30 minutes.
Hot Packs

The systemic effects of heat application are increased body temperature, increased pulse rate, increased respiratory rate, and decreased blood pressure. The indications, contraindications, and setup are listed below.

Indications:
- Sub-acute or chronic inflammatory condition
- Reduction of sub-acute or chronic pain
- Decrease ROM
- Hematoma resolution
- Reduction of joint contractures
- Superficial (Dermal) Infection
- Subacute or chronic muscle spasm

Contraindications:
- Acute conditions
- Peripheral vascular disease
- Impaired circulation
- Poor thermal regulation
- Anesthetic areas
- Neoplasms

Suggested Setup:
- Make sure the patient is in a comfortable position.
- Cover the hot pack with a terry cloth covering and place a towel between the terry cloth and patient.
- Place the pack on the patient in a comfortable manner. If lying on the pack is unavoidable, place additional toweling between the patient and the hot pack.
- When treating an infected area, completely cover the skin with sterile gauze. After the treatment, dispose of the gauze in a biohazard waste container and wash the hot pack’s covering according to the universal precautions.
- Check the patient after the first five minutes for comfort and mottling. Recheck the patient regularly, and adjust toweling if needed.
- Apply the hot pack for 20 to 30 minutes, but do not leave it on longer than 30 minutes.
- After the treatment, return moist heat pack to the heating unit and allow it to reheat for a minimum of 30 to 45 minutes before reuse.
Ultrasound

The therapeutic effects of ultrasound are increased cell membrane permeability, altered rates of diffusion across the cell membrane, increased vascular permeability, secretion of chemotactics, increased blood flow, increased fibroblastic activity, stimulation of phagocytosis, synthesis of collagen and protein, diffusion of ions, tissue regeneration, increased sensory nerve conduction velocity, reduction of muscle spasm, and increased motor nerve conduction velocity. The indications, contraindications, and setup are listed below.

Indications:
- Joint contractures
- Muscle spasm
- Neuroma
- Scar tissue
- Sympathetic nervous system disorders
- Trigger points
- Warts
- Spasticity
- Post acute reduction of myositis ossifications
- Acute inflammatory condition (pulsed output)
- Chronic inflammatory condition

Contraindications:
- Areas of poor circulation
- Acute condition (thermal tx)
- Ischemic areas
- Areas around eyes, heart, skull, and genitals
- Over cancerous tumors
- Spinal cord or large nerve complexes
- Anesthetic areas
- Stress fracture sites
- Pelvic or lumbar area in menstruation female patients

Suggested Setup:
- Establish that no contraindications are present.
- Determine the method and mode of ultrasound application to be used during treatment.
- Clean the area to be treated to remove any body oils, dirt, or grime.
- Determine the coupling method to be used (e.g., direct coupling, bladder, underwater).
- If the direct coupling method is used, spread the ultrasound gel over the area to be treated. Use the sound head to evenly distribute the gel.
- Explain the sensations to be expected during the treatment. During the application of thermal ultrasound, a sensation of mild to moderate warmth (but no pain or burning) should be expected. No subcutaneous sensations should be felt during the application of non-thermal ultrasound. Tell the patient to inform you of any unexpected sensations.
**Electrical Stimulation**

Some of the therapeutic uses of electrical currents are controlling acute and chronic pain, reducing edema, reducing muscle spasm, reducing joint contractures, inhibiting muscle spasm, minimizing disuse atrophy, facilitating tissue healing, facilitating muscle reeducation, and strengthening muscle. The indications, contraindications, and basic setup are listed below.

**Indications:**
- Acute pain
- Chronic pain
- Muscle spasm
- Muscle reeducation

**Contraindications:**
- Cardiac disability
- Demand-type pacemakers
- Pregnancy
- Menstruation
- Cancerous lesions
- Sites of infections
- Carotid sinus, esophagus, larynx, pharynx, around the eyes, upper thorax, temporal region, and severe obesity

**Suggested Setup:**
- Turn on the unit by activating the POWER switch.
- *Select application mode:* Determine the MODE of application and electrode placement, e.g., quadripolar (TENS, IFC), bipolar, or Russian stimulation.
- *Adjust frequency:* Select the appropriate frequency based on the goals of the treatment and treatment protocol.
- *Adjust treatment duration:* Set the duration of the treatment by adjusting the TIMER.
- *Begin treatment:* Press the START button to close the circuit between the generator and the patient’s tissues.
- *Increase output intensity:* Slowly increase the INTENSITY control until the appropriate current level is obtained.
- *Adjust balance:* If necessary, adjust the BALANCE control to obtain maximal treatment comfort.
EMERGENCY POLICIES AND PROCEDURES
**AED Policy**

The automated external defibrillator (AED) is very user friendly and can be used by any staff certified athletic trainer, athletic training student, first responder, coach, or athletic department administrator certified in the usage of an AED by either the American Red Cross or the American Heart Association. EMT or higher certification also meets the criteria for usage.

The following is the guidelines for AED usage by a CPR/AED certified individual:

- The AEDs are located in the Fred Delay Gymnasium and the Fesmire Fieldhouse.
- When an emergency arises and the AED is on site, it should be easily attainable from the emergency equipment location.
- When it is determined by following the primary survey of standard first aid (responsiveness, breathing, circulation) that a cardiac emergency is taking place, the AED should be used only after enacting EMS (calling 911). Another athletic training staff member, coach, athlete or bystander can perform this action.
- After EMS is enacted, position the athlete/patient supine, open the airway, begin rescue breathing, and perform chest compressions in the correct sequence until the AED is in place.
- Apply the pads to the bare, dry chest of the athlete/patient in the fashion described on the pads or on the cover of the AED.
- Turn the AED on by pressing the “ON” button.
- Clear everyone from touching the victim to allow the AED to monitor the heart rhythm. Make sure the victim is not lying in water.
- After rhythm analysis is completed, follow instructions of the AED to deliver shock, begin CPR, or monitor vitals until EMS arrives (again make sure nobody is touching the victim when shock is to be delivered).

**Concussion Policy and Management Protocol**

The following *Concussion Policy* and *Concussion Management Protocol* have been adopted by the UU Sports Medicine staff and should be followed by all athletic teams for managing student-athletes suspected of sustaining a concussion.

1.) All UU student-athletes must read and sign the attached student-athlete statement acknowledging that:
   a. They have read and understand the Union University Athletic Training Concussion Policy and the NCAA Concussion Fact Sheet.
   b. They accept the responsibility for reporting their injuries and illnesses to the institutional medical staff, including signs and symptoms of concussions.

2.) All UU coaches (head coaches and assistant coaches) must read and sign the attached coaches statement acknowledging that they:
   a. Have read and understand the Union University Athletic Training Concussion Policy and the NCAA Concussion Fact Sheet.
   b. Will encourage their athletes to report any suspected injuries and illnesses to the institutional medical staff, including signs and symptoms of concussions; and that they accept the responsibility of referring any student-athlete who is suspected of sustaining a concussion to the medical staff.

3.) The UU Team Physician and Certified Athletic Trainers must sign the attached medical provider statement acknowledging that they:
a. Will provide student-athletes with the NCAA Concussion Fact Sheet and encourage their student-athletes to report any suspected injuries and illnesses to the institutional medical staff, including signs and symptoms of concussions.

b. Have read, understand and will follow the Union University Athletic Training Concussion Policy.

4.) The Head Athletic Trainer will coordinate the distribution, educational session, signing, and collection of the necessary documents. The signed documents will be kept either in the student-athlete’s medical file (SA forms) or in designated files (coaches and medical provider forms) in the Head Athletic Trainer’s office.

5.) The Director of Athletics and the Head Athletic Trainer will coordinate the signing of the aforementioned documents on an annual basis for the medical personnel and coaches. The signed documents, along with the established UU Concussion Policy will be kept on file in the main athletic training room. Copies of the UU Concussion Policy and the NCAA concussion fact sheet for coaches will be distributed to every coach during the athletic department in-service day, which is held at the beginning of the fall semester.

6.) The Head Athletic Trainer will coordinate an annual meeting to review and update the UU Concussion Policy with the Sports Medicine staff.

Concussion management

1.) Concussion management begins with pre-season baseline testing. Every student-athlete must complete pre-season baseline tests for concussion:

a. Prior to the competitive season, the UU Athletic Training staff will conduct baseline testing for each student-athlete using the following: Graded Symptom Checklist (GSC); Standard Assessment of Concussion (SAC); Balance Error Scoring System (BESS) and the on-line neurocognitive test, ImPACT*.

b. The student-athlete’s scores on these baseline tests will determine the student-athlete’s “normal and asymptomatic” values.

c. The respective team’s athletic trainer will keep a copy of baseline assessments on file so they can have easy access to them at all times.

d. In the event of a suspected concussion, the student-athlete will be re-tested on each of the aforementioned tests. The student-athlete’s post-injury scores will be compared to his/her pre-season baseline scores.

2.) NO STUDENT-ATHLETE SUSPECTED OF HAVING A CONCUSSION IS PERMITTED TO RETURN TO PLAY THE SAME DAY (per TN law) AND NO STUDENT-ATHLETE IS PERMITTED TO RETURN TO PLAY WHILE SYMPTOMATIC FOLLOWING A CONCUSSION.

a) A student-athlete suspected of sustaining a concussion will be evaluated by the team’s Certified Athletic Trainer who will conduct a “Mild Traumatic Brain Injury Initial Evaluation” and will re-test the student-athlete using the GSC, SAC and BESS (SAC and BESS are conducted if student-athlete is able). The Certified Athletic Trainer will notify the UU Team Physician, Chris Lewis, about the student-athlete’s concussion. Dr. Lewis and the Certified Athletic Trainer will then develop an evaluation and treatment plan.

b) Based on the student-athlete’s presence and progression of concussive signs and symptoms and post-injury scores, Dr. Lewis may see the student-athlete for evaluation and will then determine if the student-athlete’s condition warrants further testing, i.e. MRI, CT scans, or appointment with a neurologist.
c) Student-athletes will be provided with written home instructions upon discharge; preferably with a roommate, guardian, or someone that can follow the instructions.

d) An assessment of signs and symptoms will be performed at the time of the injury and then serially thereafter (i.e. 2-3 hours post injury, 24 hours, 48 hours etc). The presence or absence of signs and symptoms will dictate the inclusion of additional neurocognitive and balance testing. (SAC, BESS, ImPACT**).

e) The student-athlete will perform serial post-injury concussion testing using GSC, SAC and BESS. The serial test scores will then be compared to the student-athlete’s baseline scores and to scores from post-injury testing in previous days, in order to determine the discrepancy between baseline normal and post-injury and to track the progression/behavior of the signs and symptoms throughout the recovery process.

f) Student-athletes who sustain a concussion outside of their sport will be managed in the same manner as those student-athletes who sustain a concussion during UU athletics.

3.) If a student-athlete is diagnosed with a concussion and has symptoms that interfere with his or her ability to concentrate and participate in class and schoolwork, the Certified Athletic Trainer should contact Jon Abernathy, Director of Disability and Student Services, to inform him of the student-athlete’s concussion and the need to miss class. The Certified Athletic Trainer should also include Katie Woodruff, Associate Athletic Director, on the email to Jon Abernathy. Union University faculty and staff should have received the Office of Disability Services (ODS) Concussion Policy, which delineates the accommodations to be made for student-athletes who suffer from concussive symptoms.

a. Faculty and staff are instructed to make accommodations for student-athletes suffering from concussive symptoms for five class days. If the student-athlete continues to suffer from concussive symptoms that preclude him/her from participating normally in class, beyond the five class-day period, the student-athlete will be re-evaluated by Dr. Lewis. Dr. Lewis may refer the student-athlete to a neurologist for more specific testing and evaluation. The Certified Athletic Trainer will notify Jon Abernathy in ODS who in turn will notify the UU Faculty members. Please refer to Jon Abernathy and the ODS Concussion Policy for more detail.

b. In order for academic accommodations to be made, the Certified Athletic Trainer MUST provide Jon Abernathy with hard copies of the concussion evaluation and testing that was conducted for the student-athlete. The following paperwork should be included: MTBI Initial Evaluation form; Graded Symptom Checklist (GSC); Standard Assessment of Concussion (SAC, if able to perform); Balance Error Scoring System (BESS, if able to perform) and any other notes from physician exam, ER visit, etc. (if applicable).

c. The Certified Athletic Trainer should update Jon Abernathy daily about the student-athlete’s recovery process so that he may update the faculty and arrange accommodations.

4.) During the recovery period, The Certified Athletic Trainer will meet or speak to the student-athlete daily to track the progression of concussive signs and symptoms. The Certified Athletic Trainer will instruct the student-athlete to rest physically and also to allow for “brain rest.” To allow for “brain rest” means not engaging in anything that may stimulate the brain to the point of making concussive symptoms worsen (i.e. class attendance, socializing, homework, job, computer, television, cell phone, etc). It is imperative that the student-athlete refrain from such activities in order to allow the brain to recover. Dr. Lewis may recommend that the student-athlete return to classes once he/she is asymptomatic during activities of daily living.

5.) Once the student-athlete meets the following requirements, he/she should be ready to begin the Extertional Return to Play Protocol:

a) Asymptomatic for at least 24 hours

b) Able to perform activities of daily living and attend classes with no recurrence of symptoms (function as a regular college student with no signs or symptoms).

c) Post-concussion scores have returned to 95 % of the baseline scores.
6.) The Certified Athletic Trainer reports the above findings to Dr. Lewis. He would then give the student-athlete clearance to begin the *Exertional Return to Play Protocol (ERTPP)* (see below)

**Five-Step Graduated Exertional Return to Play Protocol**

This exertional protocol allows a gradual increase in volume and intensity during the return to play process. The athlete is monitored for any concussion-like signs/symptoms during and after each exertional activity. The following steps are to be performed **one step per day**, for instance: step 1 on the first day the athlete is asymptomatic, step 2 on second day, step 3 on third day, etc. **This protocol should be implemented, administered and monitored by a Certified Athletic Trainer.**

**Exertion Step 1:** 20 minute stationary bike ride (10---14 MPH)

**Exertion Step 2:** Interval bike ride: 30 sec sprint (18-20 MPH) / 30 sec recovery (10--14 MPH) x 10 reps; and bodyweight circuit: Squats/Push Ups/Sit-ups x 20 sec each x 3

**Exertion Step 3:** 60 yard shuttle run x 10 (40 sec rest between reps); and plyometric workout: 10 yard bounding/10 medicine ball throws/10 vertical jumps x 3; and non-contact, sports-specific drills for approximately 15 minutes

**Exertion Step 4:** Limited, controlled return to non-contact practice and monitoring for symptoms

**Exertion Step 5:** Full sport participation in a practice

If at any time during the Exertional Return to Play Protocol the athlete begins experiencing concussive-like symptoms, the athlete will stop performing the exercise and will wait 24 hours before attempting the protocol again. After the 24 hour period, the athlete must be asymptomatic before attempting the exertional return to play protocol steps again. The medical staff (Athletic Trainers and Team Physician) will decide, based on the athlete’s signs and symptoms, at which step in the protocol, the athlete will resume activity. The athlete must be able to complete all five exertional steps, without any recurrence of symptoms, before receiving clearance to return to full participation by the Team Physician.

*No student-athlete can return to full activity or participation in practice or competitions until he/she is asymptomatic at rest and during school and exercise, has completed the ERTPP with no recurrence of concussive sign or symptoms and he/she is cleared to return to play by Team Physician, Dr. Lewis.*

**Environmental Safety Policies and Procedures**

**HEAT ILLNESS PREVENTION, RECOGNITION AND MANAGEMENT**

**FACTORS AFFECTING TEMPERATURE REGULATION**

- Air temperature, humidity and wind
- Clothing
- Activity Intensity
• Fluid Intake
• Adaptability of the body

HIGH RISK STUDENT ATHLETES
• Athletes with a prior history of cramping and/or heat illnesses (e.g. “crampers”)
• Athletes with certain medical conditions (e.g. Sickle Cell)
  poorly conditioned and/or un-acclimatized athletes
• Overweight athletes / athletes with a high body-mass index (BMI)
• Athletes who constantly compete at a high capacity / intensity
• Athletes with very low body-mass index / low body-fat (e.g. lean & fit)
• Athletes with a lower “heat tolerance”
• Athletes who are ill (e.g. infection, fever, diarrhea, vomiting, etc.)
• Athletes who are taking certain medications (e.g. diuretics)
• Athletes who are taking certain supplements and/or ergogenic aids (e.g. creatine, steroids, etc.)
• Athletes with poor dietary / nutrition habits (e.g. caffeine, high-fat foods)
• Athletes with high core temperatures
• Athletes who have greater than 3% body weight loss
• Athletes who are on restricted and/or low-salt diets
• Athletes who are heavy sweaters (e.g. “Salty Sweaters”)

PREVENTION STRATEGIES AND RECOMMENDATIONS

PRE-SEASON
• Thorough & complete medical history and pre-participation physical examination
  • Supplement Notification Form
  • Medical Alert List (heat illness “watch” / “crampers”; Sickle Cell, etc.)
  • Type & duration of training activities within the past 1-2 months
  • Extent of training done in heat
  • Medical examination
• Strength & conditioning / Acclimatization program
• Education initiatives with coaching staff
  • Open lines of communication
  • Physical examination review / Medical Alert List
  • WBGT (practice modification guidelines)
  • Fluid replacement
  • Heat Illness recognition
• Education initiatives with student-athletes
  • Open lines of communication
  • Diet / Nutrition (low-fat; no caffeine or alcohol; fruits & vegetables; no fast food, etc.)
  • Hydration / Fluid replacement
  • Proper clothing
  • Supplements (STOP taking) / Supplement Notification Form
  • Rest
• Education/Training of Sports Medicine Staff & Student Athletic Trainers
• Recognition & management of heat illnesses
  o WBGT
  o Emergency planning
  o CPR / AED certification / re-certification
• Communication

• Preparation of Sports Medicine Facilities & Practice Facilities
  o Ice / water and ice towels
  o Coolers / water bottles
  o Electrolyte supplements (Heat Guard, Medilyte)
  o Powerade / water
  o Tents / “Cool Area” on practice field
  o Ice tubs
  o WBGT / Temperature Sensor
  o John Deere Gators
  o Review / Revision of Emergency Plans

• Team meeting-
  o Rest
  o Diet / nutrition
  o Supplements
  o Weight charts
  o Proper hydration / fluid replacement
  o Proper clothing / uniforms (avoid rubberized clothing, excessive clothing, dark clothing)
  o Urine color chart
  o Communicate with Athletic Training Department personnel

**PRE-PRACTICE**

• Monitor weather radar & Wet Bulb Globe Temperature (re-take every 20-25 minutes if initial reading is greater than 78).
• Communicate with student-athletes-
  o Diet / nutrition
  o Hydration (12-20 oz of cold water / Gatorade every 10-20 minutes)
  o Importance of weight charts
  o Medi-Lyte
• Communicate with coaches (adjust practice times, uniforms, breaks, intensity, etc. as needed)
• Weight charts-
  o Student athletic trainer monitor (if available)
  o 3% weight loss chart
  o highlight (yellow = did not weigh in; pink / orange = > 3% weight loss)
• Urine Color Chart (posted over urinals & on back of stall doors)
• How Much Water To Drink Chart (posted over urinals & on back of stall doors)
• Availability of MediLyte
• Field preparation-
  o Ice / water / ice towels
  o Dry towels
  o “Cool Area” / Shaded area
  o ice tubs in athletic training room
  o Emergency equipment (AED, thermometer, gator, etc)

**DURING PRACTICE**

• Athletic Training Staff availability at each practice
• Monitor Wet Bulb Globe Temperature every 20-25 minutes as needed
• Communication with coaching staff-
• Wet bulb globe temperature
• Practice modification (extra breaks, equipment, time, intensity, etc.)
• Heat Illness recognition

• Communication with student-athletes
  • Heat illness recognition, signs and symptoms
  • Drink 8-12oz cold water every 10-15 minutes throughout practice
  • “sips” not “gulps”
  • Use of ice towels
  • Dry off as much as possible

• Ice / water / ice towel availability
• Powerade availability
• Tent / “Cool Area”
• Cold tubs in athletic training room

POST PRACTICE

• Communicate with student-athletes-
  • Weight charts
  • Urine Color Chart
  • How Much Water To Drink Chart
  • Diet / nutrition (lots of fluids; low-fat meal; no caffeine or alcohol; lightly salt foods; no fast food; drink with meal)
  • Hydration-
    ▪ Water bottles
    ▪ Replace 150% of volume lost (24oz of cold water / Gatorade for every pound lost)
    ▪ Fulfill thirst --> eat good, nutritious meal --> DRINK
  • Electrolyte supplement (Heat Guard, Medilyte)
  • Importance of REST and STAY OUT of the SUN!!
• Communicate with coaches (injury report; weather forecast, etc.)
Weight charts-
  - Student athletic trainer monitor (if available)
  - 3% weight loss chart
    - highlight (yellow = did not weigh in; pink/orange = > 3% weight loss)
- Urine Color Chart (posted over urinals & on back of stall doors)
- How Much Water To Drink Chart (posted over urinals & on back of stall doors)
- Availability of water & Powerade
- Availability of cold tubs in athletic training room

DURING MEALS AND TEAM MEETINGS
- **Drink enough to quench thirst post-practice** --> **eat a good, nutritious meal & drink with your meal** --> **continue to DRINK**
- Low-fat foods
- Fruits & vegetables
- Water, Powerade (no carbonated beverages, fruit juices/punch)
- No caffeine and/or alcoholic drinks
- Lightly salt foods to taste
- No fast food
- No supplements
- Water bottles (have a water bottle with you at all times!)
- Cool clothing

TIPS FOR ENSURING SAFETY
- Continuously communicate and educate all parties involved
- Be prepared
- Encourage & practice good fluid replacement and dietary habits
- Recognize heat illnesses and follow established emergency plan
- Get REST!

RECOGNITION AND MANAGEMENT OF HEAT ILLNESSES

HEAT CRAMPS
- **signs & symptoms**
  - severe cramps, frequently in the calf and/or abdomen
  - pale and wet skin
- **treatment**
  - place the athlete in a cool, shaded environment
  - stretch the affected muscle(s) / contract the antagonist muscle
  - remove equipment and/or constrictive clothing, etc.
  - push fluids
  - place ice towels on athlete
  - place ice bags, ice towels, cold water on athlete’s neck, wrists, ankles, groin, back of knees
  - give athlete electrolyte supplement (Heat Guard, Medilyte)

HEAT EXHAUSTION
- **signs & symptoms**
  - body temperature may be normal or elevated to 102-104 degrees F (39-40 degrees C);
  - normal blood pressure
  - tachycardia (rapid heart rate)
• apprehensiveness
• cold, damp, & ashen skin
• nausea and/or vomiting
• headache, dizziness, and/or faintness
• profuse sweating
• rapid & shallow breathing; weak pulse
• muscle spasms/cramps
• thirst
• decreasing consciousness

• treatment
  • transport athlete into the athletic training room / remove from the environment
  • remove equipment and/or constrictive clothing, etc.
  • monitor vital signs (blood pressure, pulse, respirations, body temperature, etc.)
  • push fluids
  • ice tub / cold whirlpool
  • place ice towels on athlete
  • place ice bags, ice towels, cold water on athlete’s neck, wrists, ankles, groin, back of knees
  • give athlete electrolyte supplement (Heat Guard, Medilyte)

HEAT STROKE
• a SERIOUS, LIFE-THREATENING condition requiring IMMEDIATE medical attention;
• signs & symptoms
  • sudden onset
  • high body temperature (104 degrees F or higher)
  • pulse rate of 160 BPM or greater
  • rapid respirations (20-30 respirations per minute)
  • red, hot, dry, & flushed skin (may not be hot & dry in a well-trained athlete)
  • nausea and/or vomiting
  • lack of perspiration
  • dry mouth and/or intense thirst
  • headache, dizziness, confusion, and/or lethargy
  • staggering body control, poor judgment, and/or bizarre behavior
  • convulsions / muscle twitching
  • decreasing consciousness

• treatment
  • activate EMS immediately
  • transport into the athletic training room / remove from the environment
  • remove equipment and/or constrictive clothing, etc.
  • maintain airway, breathing and circulation (ABCs)
  • monitor vital signs (blood pressure, pulse, respirations, body temperature, etc.)
  • cool the athlete rapidly with full body immersion using ice tub / cold whirlpool
  • place ice towels, ice bags, or cold water on athlete’s neck, wrists, ankles, groin and back of knees

SICKLE CELL TRAIT/SICKLE CELL ANEMIA
• Can sickle during exertion in heat --> MIMICS CRAMPING
• Sickling triggered by heat stress, dehydration, and/or lactic acidosis
• Common sickling settings = sprints, timed miles, uphill repeats, ramp running, stadium stairs, mat drills, weight training
• Cramping type pain is actually ischemic pain-
  o **Sickler = COLLAPSE EARLY IN EXERCISE; hyperventilating; die of arrhythmia from hyperkalemia in < 1 hour**
  o Cramper = cramp late in exercise or after

• **Treatment**
  o Remove from the environment / transport into the athletic training room
  o Remove equipment and/or constrictive clothing
  o Oxygen
  o Maintain ABCs
  o Monitor vital signs (pulse, blood pressure, respirations, body temperature, etc.)
  o Push fluids
  o Evaluation by Team Physician
  o Activate EMS if needed

• **Recommendations**
  o Medical history screen --> blood test screen
  o The Union University Athletic Training Department and the NCAA encourage student-athlete’s to be tested for the presence of Sickle Cell Trait. Please refer to Union University’s Sickle Cell Trait Testing Policy for more information.
  o No Day 1 fitness run, timed miles, etc.
  o HYDRATE / FLUIDS
  o **STOP at first cramp**
  o Education of the student-athlete, coaching staff, sports medicine staff, etc.

**MONITORING HEAT CONDITIONS**

**WET BULB GLOBE TEMPERATURE**

The Wet Bulb Globe Temperature (WBGT) reading is an accurate method of determining environmental conditions, which would predispose athletes to heat illnesses. The dry bulb and wet bulb temperatures are measured using a digital psychrometer. Operation of the psychrometer depends upon the comparative readings of two similar thermometers, with the bulb of one being kept wet so that it is cooled as a result of evaporation. It always shows a temperature equal to or lower than that of the dry bulb thermometer. The difference between the thermometer readings constitutes a measure of the dryness or wetness of the surrounding air. One should follow these guidelines when calculating the WBGT:

- measure the WBGT at the specific playing site, not just outside of the athletic training room;
- measure the WBGT before practice;
- measure the WBGT in the middle of the practice field, not in a shaded area or next to buildings;
- measure and record the WBGT every 45-60 minutes during a practice session (*every 20-25 minutes if the reading is greater than 78*);
<table>
<thead>
<tr>
<th>Heat Category</th>
<th>WBGT * F</th>
<th>Work/Rest</th>
<th>Water/Hour</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>78-81.9</td>
<td>40/20 min</td>
<td>24 oz</td>
</tr>
<tr>
<td>2</td>
<td>82-84.9</td>
<td>30/30 min</td>
<td>32 oz</td>
</tr>
<tr>
<td>3</td>
<td>85-87.9</td>
<td>30/30 min</td>
<td>32 oz</td>
</tr>
<tr>
<td>4</td>
<td>88-89.9</td>
<td>20/40 min</td>
<td>32 oz</td>
</tr>
<tr>
<td>5</td>
<td>&gt;90</td>
<td>10/50 min</td>
<td>32 oz</td>
</tr>
</tbody>
</table>

* Rest means minimal physical activity (sitting or standing) accomplished in the shade.

The Union University Athletic Training staff will use a digital psychrometer to determine the wet bulb globe temperature before each outdoor activity when heat is a threatening factor to safe practice. The information in the chart listed above is based on the latest evidence-based medicine in Athletic Training and Sports Medicine and is compliant with all NCAA recommendations surrounding heat safety.

MODIFICATION OF ATHLETIC ACTIVITIES

CHAIN OF COMMAND

The decision to modify and/or terminate a Union University intercollegiate athletic practice or competition in the event of excessive heat should be made by a member of the Union University Athletic Training staff in consultation with the Union University Director of Athletics, the Team Physician and/or the head coach or his/her designee.

CRITERIA FOR MODIFICATION OR TERMINATION OF A PRACTICE OR EVENT

The policy of the Union University Department of Intercollegiate Athletics with regards to the modification and/or termination of an Athletics practice due to excessive heat will be as follows:

a) A member of the Union University Athletic Training staff will monitor the Wet Bulb Globe Temperature as measured on the practice field and weather conditions reported by the National Weather Service and/or National Oceanic & Atmospheric Administration (NOAA) local weather radar (www.noaa.gov or www.weather.com).

b) A member of the Union University Athletic Training staff will continually communicate with the Head Coach and/or his/her designee regarding the WBGT.

c) When the WBGT is greater than 78, (heat category 1 on the chart) a member of the Union University Athletic Training staff will communicate with the Head Coach and/or his/her designee and make recommendations for activity modification and/or termination, if applicable.

d) Possible modifications include moving practice to an inside facility; re-scheduling practice for late evening or early morning sessions; continue practice but organize a scrimmage-type scenario in which half of the student-athletes are actively exercising for 20-30 minutes while the other half hydrates and rests in a shaded area. After 20-30 minutes, the two groups switch allowing those just exercising to rest and recover in the shade.

e) During athletic practice or competition in extreme heat, a Certified Athletic Trainer must be present on the sidelines to promote hydration, rest, and shaded recovery, and to recognize and treat any student-athletes displaying symptoms of heat illness.
LIGHTNING AND SEVERE WEATHER POLICY

Lightning is a dangerous phenomenon. Athletic teams that practice and compete outdoors are at risk when the weather is inclement. The Union University Athletic Training staff has developed a lightning safety policy to minimize the risk of injury from a lightning strike to Union University student-athletes, coaches, support staff and the fans. To monitor lightning the Athletic Training staff will utilize both the Flash-Bang method and a Lightning Detection system. Our policy is in accordance to the NCAA recommendations regarding lightning safety.

CHAIN OF COMMAND

The decision to terminate an Union University intercollegiate athletic activity in the event of lightning, and/or severe weather will be made by a member of the Union University Athletic Training staff present at a practice or the Union University Game Administrator present at a game in consultation with Union University staff, Union University Athletic Training personnel, the head coach and/or his/her designee, and game official(s). In the absence of a member of the Athletic Training staff, the coaching staff is responsible for monitoring weather conditions and terminating practice due to severe weather.

CRITERIA FOR MONITORING LIGHTNING AND EVACUATION OF PRACTICE / GAME AREA:

The policy of the Union University Department of Intercollegiate Athletics will be as follows:

f) A member of the Union University Athletic Department will inform the visiting team’s athletic trainer and/or coach and game official(s) / umpire(s) of the Union University policy with regards to lightning, severe weather, and/or storms during pre-game warm-ups.

g) A member of the Union University Athletic Department and/or a member of the Union University Game Administration will monitor one or more of the following for lightning, severe weather, and/or storms:
  - National Weather Service and/or National Oceanic & Atmospheric Administration (NOAA) local weather radar [www.noaa.gov or www.weather.com];
  - Location-based electronic lightning alerts via WeatherBug or SmartCoach apps
  - The “Flash to Bang” count (see page 5 for this method)

h) When the “flash/bang” count reaches 75 seconds, when the commercial lightning detector signals lightning within 15 miles and/or a severe weather warning has been issued for the immediate Jackson, TN area, a member of the Union University Athletic Training Staff will notify the following persons
  - A Union University game administrator
  - The Union University head coach and/or his/her designee;
  - The visiting team’s athletic trainer and/or coach
  - The game official / umpire (at a break in the action);

i) A lightning strike within a 10 mile radius (flash to bang of 50 or less) will suspend activity for ALL SPORTS. (per the Gulf South Conference lightning policy)

j) Once it is determined that play must be suspended, the Athletic Trainer will notify the coaches, game officials, game administrator and PA announcer. These personnel will assist the Athletic Trainer in summoning the athletes from the playing field to the designated shelter.

k) The PA announcer will deliver the message over the loud speakers for the spectators to seek shelter in an enclosed ground structure, such as the designated safe areas (refer to chart in this document)

l) Immediately following the announcement for suspension of activity, all athletes, coaches, game officials and support personnel are to evacuate to an enclosed ground structure, such as the designated safe areas.
m) Remember: an automobile, golf cart or open structure may not protect you from a lightning strike; so these are not adequate structures.

**BASEBALL and SOFTBALL**

- If a storm is approaching, the Certified Athletic Trainer will notify the coaches and/or umpire when lightning is at the 30 mile mark warning range. This provides both parties time to decide if they would need to tarp the field.
- If the decision is made to tarp the field, tarping must be started when lightning is 15 miles away. This allows the baseball and softball teams enough time to tarp the fields before the lightning becomes too dangerously close. Once the decision is made to tarp the fields, the PA announcer will deliver the message over the loud speakers for the spectators to seek shelter either in the designated safe place or in their vehicles. The student-athletes, coaches and athletic training staff will seek shelter immediately once the tarp is on. Tarping must be completed prior to the lightning reaching the 10 mile mark.

**GOLF and CROSS COUNTRY**

- Locate a safe structure by the time lightning reaches the 15 mile mark. Evacuate to the shelter when lightning reaches the 10 mile mark.

**Designated Safe Shelters for Union University Athletic Events**

<table>
<thead>
<tr>
<th>Union University Venue</th>
<th>Evacuate to: Safe Location</th>
<th>NOT SAFE structures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smith Memorial Soccer Complex</td>
<td>Fesmire Fieldhouse</td>
<td>Convertible/“soft-top” vehicles, dugouts, golf carts, utility vehicles, storage sheds, canopy, awning, and/or tents</td>
</tr>
<tr>
<td>Fesmire Baseball/Softball Fields</td>
<td>Fesmire Fieldhouse</td>
<td></td>
</tr>
<tr>
<td>UU Cross Country Trail</td>
<td>Fesmire Fieldhouse or Fred Delay Gymnasium</td>
<td></td>
</tr>
<tr>
<td>UU Golf (at Country Club)</td>
<td>Clubhouse, restroom</td>
<td></td>
</tr>
</tbody>
</table>

A safe structure or location is defined as “any sturdy, fully enclosed, substantial, and frequently inhabited building that has plumbing and/or electrical wiring that acts to electrically ground the structure”.
CRITERIA FOR EVACUATION TO SAFE SHELTER AND LIGHTNING MANAGEMENT

a) In the absence of a sturdy, fully enclosed, substantial, and frequently inhabited location as described above, a secondary structure such as a fully enclosed vehicle with a hard metal roof, rubber tires, and completely closed windows can provide a measure of safety. Persons should not touch the sides of the vehicle! **Convertible and “soft-top” vehicles, and golf carts do not provide a high level of protection and cannot be considered safe from lightning.**

b) Persons should avoid taking showers and using plumbing facilities (including indoor and outdoor pools, whirlpools, Jacuzzis, and hot tubs) and land-line telephones during a thunderstorm.

c) If no safe structure or location is within a reasonable distance, personnel should find a thick grove of small trees surrounded by taller trees or a dry ditch. Do not choose an open area where you will be the tallest object. Everyone should assume the “lightning-safe” position - a crouched position on the ground with the feet together, weight on the balls of the feet, head lowered, and ears covered. **DO NOT LIE FLAT!** Minimize the body’s surface area and minimize contact with the ground.

d) In situations where thunder and/or lightning may or may not be present, yet someone feels his/her hair stand on end and skin tingle, **LIGHTNING IS IMMINENT!** Therefore, all persons should assume the “lightning-safe” position as described above.

e) A cellular and/or portable remote phone is a safe alternative to land-line phones, if the person and the antenna are located within a safe structure or location, and if all other precautions are followed.

f) If the Union University administration has cancelled classes at the university due to severe weather, Union University Department of Intercollegiate Athletics strongly recommends the cancellation of all games, practices, and other activities.

g) **All individuals should have the right to leave a site or activity, without fear of repercussion or penalty, in order to seek a safe structure or location if they feel that they are in danger from impending lightning activity.**

The head coach and/or his/her designee is not permitted to override the decision to stop an outdoor game / practice in the event of lightning and/or severe weather. If a coach and/or game official(s) / umpire(s) make the decision to continue to practice and/or continue with a game or other activity despite a National Weather Service Severe Weather Warning, the cancellation of classes, and/or the verbal instruction by a Union University Game Administrator, and/or a member of the Union University Athletic Training Staff, they will be doing so against the recommendations of the Union University Department of Intercollegiate Athletics and of the NCAA.

CRITERIA FOR SAFE RETURN TO THE PRACTICE/GAME AREA:
The decision to return to a Union University intercollegiate athletic activity after a period of evacuation will be made by a member of the Union University Athletic Training Staff present at a practice or Union University Game Administrator present at a game in consultation with Union University Athletic Training personnel, the head coach and/or his/her designee, and game official(s) / umpire(s),
Personnel should not return to the practice/game area until:

- Thirty (30) minutes have passed since the last lightning flash or the last sound of thunder.
- Each time lightning is observed and/or thunder is heard, the “30-minute clock” is to be reset.
- It has been determined that the immediate threat for lightning / severe weather has passed.

LIGHTNING SAFETY INFORMATION

- Prior to practice or competition, monitor weather forecast to include calling local agencies for up to date information.
- Monitor the weather for the following: sudden decrease in temperature, increase in air movement, sudden increase in humidity, visible dark clouds.
- There should be no contact with metal objects (bleachers, fences, golf clubs, bats)
- If there is no other shelter you may seek refuge in a hardtop vehicle. It is not the rubber tires that protect from lightning; it is the hard top metal roof that dissipates the lightning around the vehicle. (NCAA, 1999).
- The existence of blue skies and/or absence of rain are not protection from lightning.
- Lightning can strike 10 miles from the rain shaft. (NCAA, 1999)
- DO NOT LIE FLAT ON THE GROUND
- Avoid using a land line telephone.
- Persons who have been struck by lightning do not carry an electrical charge. Therefore, you can provide care. CPR is most often required. Be sure to move the victim to a safe location.
- If in a forest, seek shelter in a low area under a thick grove of small trees.
- The rule of thirds: \( \frac{1}{3} \) rule: \( \frac{1}{3} \) of strikes occur before the storm, \( \frac{1}{3} \) during the storm, \( \frac{1}{3} \) after the storm.
- Eighty percent of lightning victims are male.
- Two-thirds of strikes occur between 12 p.m and 6 p.m., and the months of June through August.
- An inadequate shelter (not grounded) is worse than being out in the open

PRE-HOSPITAL CARE OF VICTIMS OF A LIGHTNING STRIKE

a) Because lightning-strike victims do not remain connected to a power source, they do not carry an electric charge. Therefore, it is safe to touch the victim to move him/her to a safe location and to render medical treatment.

b) During an on-going thunderstorm, lightning activity in the local area still poses a deadly hazard for personnel responding to the victim. Personnel should consider his/her own personal safety before venturing into a dangerous situation to render care.

c) The first priority of personnel is to move the lightning strike victim to a safe location.

d) Prompt, aggressive CPR has been highly effective for the survival of victims of lightning strikes. Therefore, it is critical that CPR and AED use is initiated as soon as safely possible.

e) The basic triage principle of “treat the living first” should be reversed in cases involving casualties from a lightning strike. It is imperative to treat those persons who are “apparently dead” first.

f) Lightning strike victims should be evaluated and treated for hypothermia, shock, fractures, and burns as well.
FLASH TO BANG LIGHTNING DETECTION METHOD
This method of lightning detection should be used in conjunction with the lightning detector.
1. Prior to practice or competition, monitor weather forecast to include calling local agencies for up to date information.
2. Watch for the flash of lightning.
3. Immediately after seeing the flash of lightning, begin to count (one, one thousand, two one thousand....)
4. Stop counting when you hear the bang of thunder.
5. Take this number and divide by 5. This will give you an approximation of how far away the lightning is (5 seconds = 1 mile). EXAMPLE: You see a flash of lightning and you begin to count. You reach 45 before you hear the bang of thunder. 45/5 = 9. The lightning would be approximately 9 miles away. Using this method you would suspend activity with lightning at or within 10 miles.
6. All athletic activity will be suspended when lightning is at or within 10 miles of the venue.

UNION UNIVERSITY DEPARTMENT OF INTERCOLLEGIATE ATHLETICS
Lightning / Severe Weather Statement to be Read at Outside Events

“May I have your attention? We have been notified of approaching inclement weather. It is the policy of Union University’s Department of Intercollegiate Athletics that all spectators, student-athletes, coaches, support staff and game officials immediately evacuate to safe, enclosed ground structure. Activity will cease until we have determined that the risk of lightning has diminished and the athletic venue is safe. We advise you to seek shelter in the following areas”

<table>
<thead>
<tr>
<th>Union University Venue</th>
<th>Evacuate to: Safe Location</th>
<th>NOT SAFE structures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smith Memorial Soccer Complex</td>
<td>Fesmire Fieldhouse</td>
<td>Convertible / “soft-top” vehicles,</td>
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<tr>
<td></td>
<td></td>
<td>dugouts, golf carts, utility vehicles,</td>
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<tr>
<td></td>
<td></td>
<td>storage sheds, canopy, awning, and/or tents</td>
</tr>
<tr>
<td>Fesmire Baseball/Softball Fields</td>
<td>Fesmire Fieldhouse</td>
<td></td>
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<tr>
<td>UU Cross Country Trail</td>
<td>Fesmire Fieldhouse or Fred Delay Gymnasium</td>
<td></td>
</tr>
<tr>
<td>UU Golf (at Country Club)</td>
<td>Clubhouse, restroom</td>
<td></td>
</tr>
</tbody>
</table>

Location of Emergency Telephones
Phones for emergency actions are available in the following locations:

1. Fred Delay Gymnasium: access to a phone is located in the lobby by the concessions stand or in the Penick athletic training room.
2. Softball Complex: access to a phone is located in both the home and visitor dugouts or in the concessions stand.
3. Baseball Complex: access to a phone is located in both the home and visitor dugouts or in the concessions stand.
4. Soccer Fields: the Certified Athletic Trainer is responsible for carrying a cell phone to the field; however, access to a phone is located in the fieldhouse athletic training room.
<table>
<thead>
<tr>
<th>Emergency Phone Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance Service</td>
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<tr>
<td>Police Department</td>
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<tr>
<td>Campus Safety and Security</td>
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<tr>
<td>Director of Athletics</td>
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<tr>
<td>Head Athletic Trainer</td>
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<tr>
<td>ATEP Program Director</td>
</tr>
<tr>
<td>ATEP Clinical Coordinator</td>
</tr>
<tr>
<td>Pennick Athletic Training Room</td>
</tr>
<tr>
<td>Fieldhouse Athletic Training Room</td>
</tr>
<tr>
<td>Student Health/Nurse’s Office</td>
</tr>
<tr>
<td>Gym Foyer</td>
</tr>
<tr>
<td>Athletic Department</td>
</tr>
</tbody>
</table>
GENERAL INFORMATION

- Before practices and games, make sure the appropriate athletic department staff have keys to unlock all gates and doors.
- Immediate care of the 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.
- Certification in cardiopulmonary resuscitation (CPR) techniques, first aid, and prevention of disease transmission should be required for all athletics personnel associated with practices and competitions.

EMERGENCY PERSONNEL

- The emergency team may consist of physicians, certified athletic trainers, emergency medical services (EMS) personnel, athletic training students, coaches, and managers.
- Roles within the emergency team will be defined by their level of expertise. Not all practices and competitions will have a physician on-site but roles will be established by the most qualified individual.

EMERGENCY PROCEDURES

- Establish a safe scene and provide immediate care to the athlete
  1. Done by the most qualified individual on-site.
- In-line stabilization for head or cervical spine injuries
  1. If a cervical spine and/or head injury is suspected, in-line stabilization must be maintained. A member of the emergency team should call 911 for EMS assistance and transport.
  2. Stabilization should be performed by Union University Athletic Training personnel and/or by the team physician.
  3. Stabilization must be maintained until EMS personnel arrive.
- Cardiorespiratory emergency
  1. Any personnel certified in CPR and AED usage may administer appropriate life saving techniques.

ACTIVATION OF EMERGENCY MEDICAL SERVICES (EMS)

1. The decision to activate EMS is done by the most qualified individual on-site.
2. All visiting teams should not deny the activation of EMS if a member of the Union University emergency team deems it necessary.
3. Once the decision is made to activate EMS, a member of the emergency team (preferably an athletic training student, coach or manager) or an athletics administrator may make the call to 911.
   - Inform EMS of an emergency at Union University and give the street address:
   - 1050 Union University Drive, Jackson, TN 38305
   - Instruct EMS to come to the Country Club entrance (cross street Pleasant Plains) and inform them that someone will meet them at the entrance and direct them to the injury site.
   - Provide information
     - Who you are
     - Where you are (soccer field, softball field, gymnasium, etc.)
     - Your telephone number
     - Number of injured individuals and nature of the emergency
     - Age, gender and mental status of the individuals
     - First aid or treatment being done
   - Other information as needed by dispatcher
   - **BE THE LAST TO HANG UP**
After hanging up with EMS, the emergency team personnel should call the following Union University personnel to inform them that EMS has been activated and an ambulance will arrive on-campus:

1. Campus Security: 731-394-2922
2. Director of Athletics: Tommy Sadler - 731-267-8010; or Senior Women’s Administrator: Katie Woodruff - 731-394-0125
3. If necessary, notify the Union University Athletic Training Staff
   a. Head Athletic Trainer: Karen Sinclair - 731-695-4885
4. Given athlete’s permission (as noted on HIPPA paperwork), contact the athlete’s parents.

EMERGENCY TEAM ROLES

- Emergency equipment will be retrieved by anyone familiar with the types and location of equipment (athletic training student, coach, or athletics department staff).
- A member of the emergency team will have keys to open all gates and doors and will direct the ambulance to the emergency site.
- The emergency team will provide appropriate emergency care until EMS arrives. Once EMS arrives, the team will provide pertinent information (method of injury, vital signs, treatment rendered, and medical history) and will assist with emergency care as needed.
- Obtain the athlete’s medical history and insurance information, which is located in the athletic training bag and/or in the team’s red folder in the Athletic Directors office.
- A member of the emergency team should accompany the student-athlete to hospital (Athletic training staff member, coach or family member).
- The Certified Athletic Trainer will complete the appropriate injury reports and forms.

AUTOMATED EXTERNAL DEFRIBRILLATOR (AED) USAGE

- Union University currently uses the Philips Heartstart AED. The Heartstart should always be stored with the battery and defibrillation pads (Smart Pads) connected to the unit. The Heartstart should be check periodically and should have a visible blinking green ready light. If the light is red or the unit is beeping, it must be reported to the Head Athletic Trainer for replacement of the battery. The pads should be check periodically for replacement.

**AED Operation:** Use if you suspect that a victim has sudden cardiac arrest: not responsive and not breathing normally. Do not use near flammable gases.

Steps to operation:
1. Heartstart FRx:
   a. Press the on/off button
   b. Follow the voice instructions
   c. Press the flashing orange button if instructed

**AED Locations:**
1. Fesmire Fieldhouse Athletic Training Room: when entering from the main front entrance, walk through the turf room to the back of the building. Once in back hallway, turn left and walk to the end of the hall. The AED is mounted on the right-side wall just as you approach the double-doors.
2. Fred Delay Gymnasium (Pennick Building): when entering through front glass doors, walk through the foyer to the left gym entrance and double doors. Once through the double doors, AED is mounted on the wall to the left.
EMERGENCY EQUIPMENT

- Emergency Bag:
  - Vacuum Splints (Leg, arm and pump) and Knee immobilizers (Regular and long)
  - Cervical Collars (Universal)
- Emergency Equipment:
  - AED, Crutches (Regular and tall) and Spine board
- Biohazard/First Aid Kit:
  - Band aids (steri-strips, knuckle, 4-wing), Gauze and Non sterile gloves
  - Red biohazard bag
  - CPR Pocket mask
  - Hand sanitizer and Spray bottle with disinfectant

EMERGENCY EQUIPMENT LOCATIONS

- Soccer fields, Baseball field, Softball field
  - Located either on the field with the Certified Athletic Trainer or in the Fesmire Field house Athletic Training Room.
- Gym
  - Emergency Bag and other Equipment located on the sideline with the Certified Athletic Trainer or in the Pennick Athletic Training Room.
  - Biohazard/First Aid kit is located on the water cart on the home sideline.

EMERGENCY PHONE NUMBERS

- Ambulance: 911
- Hospital: Jackson Madison County General Hospital - (731) 541-5000
  Regional Hospital of Jackson - (731) 661-2000
- Campus Security: 731-394-2922 cell phone, 24 hours
Catastrophic Emergency Action Plan

DEFINITION OF A CATASTROPHIC EMERGENCY
The sudden death of a student-athlete, coach, or staff member at any time (includes accidents and illnesses); and the disabling and/or quality of life altering injuries such as spinal cord injuries or loss of a paired organ.

CATASTROPHIC INCIDENT MANAGEMENT TEAM
Team members will be responsible for disseminating all information. Pertinent information will be given to family members and the media as permitted under HIPPA. Team members include:

- Head Athletic Trainer or supervising Certified Athletic Trainer
- Team Physician
- Director of Athletics
- Senior Vice President for University Relations
- In emergencies in which the above individuals were harmed or not available, the coaching staff and/or student-athletes should be prepared to take action.

CATASTROPHIC EMERGENCY PROCEDURES
1) Follow regular Emergency Medical Plan
   - The Athletic Trainer will remain with individual until relieved by member of the incident management team or by Emergency Medical Services personnel.
   - Head coach or other person designated by the head coach will act as university representative if Athletic Trainer is not available.
2) Notify Law Enforcement if necessary
3) Notify Incident Management Team.
4) Family members will be notified by Incident Management Team
5) Head coach and team members notified, if not involved
6) Provide assistance to family members, teammates and other team personnel as necessary
7) In the event that the Head Athletic Trainer, supervising Certified Athletic Trainer or Director of Athletics is physically unable or not present to implement the Catastrophic Emergency Procedures, the head coach, assistant coach and/or selected student-athletes will be responsible for engaging the Emergency Procedures. Prior to the competitive seasons, these individuals will be given instructions on how to respond in a catastrophic emergency and will know where critical personnel information (including emergency contact phone numbers and insurance information) is kept while traveling. These individuals will have access to all information that is necessary for engaging EMS, calling family members and communicating insurance information for immediate medical care of injured persons.
SUPPLEMENTAL INFORMATION
AND
ATEP FORMS
NATA Code of Ethics

Preamble

The National Athletic Trainers’ Association Code of Ethics states the principles of ethical behavior that should be followed in the practice of athletic training. It is intended to establish and maintain high standards and professionalism for the athletic training profession.

The principles do not cover every situation encountered by the practicing athletic trainer, but are representative of the spirit with which athletic trainers should make decisions. The principles are written generally; the circumstances of a situation will determine the interpretation and application of a given principle and of the Code as a whole. When a conflict exists between the Code and the law, the law prevails.

Principle 1:

Members shall respect the rights, welfare and dignity of all.

1.1 Members shall not discriminate against any legally protected class.

1.2 Members shall be committed to providing competent care.

1.3 Members shall preserve the confidentiality of privileged information and shall not release such information to a third party not involved in the patient’s care without a release unless required by law.

Principle 2:

Members shall comply with the laws and regulations governing the practice of athletic training.

2.1 Members shall comply with applicable local, state, and federal laws and institutional guidelines.

2.2 Members shall be familiar with and abide by all National Athletic Trainers’ Association standards, rules and regulations.

2.3 Members shall report illegal or unethical practices related to athletic training to the appropriate person or authority.

2.4 Members shall avoid substance abuse and, when necessary, seek rehabilitation for chemical dependency.
**Principle 3:**

Members shall maintain and promote high standards in their provision of services.

3.1 Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity or services.

3.2 Members shall provide only those services for which they are qualified through education or experience and which are allowed by their practice acts and other pertinent regulation.

3.3 Members shall provide services, make referrals, and seek compensation only for those services that are necessary.

3.4 Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge.

3.5 Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.

3.6 Members who are researchers or educators should maintain and promote ethical conduct in research and educational activities.

**Principle 4:**

Members shall not engage in conduct that could be construed as a conflict of interest or that reflects negatively on the profession.

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

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

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

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

*(NATA Code of Ethics updated 9/05)*
Athletic Training Profession Technical Standards

The Department of Athletic Training at Union University in accordance with the National Athletic Trainers Association has adopted the following guidelines of technical standards for entry-level athletic training education.

Americans with Disabilities Act of 1990, P.L.101-336, provides comprehensive civil rights protections to qualified individuals with disabilities.

Section 504 of the Rehabilitation Act of 1973 “prohibits all programs or activities receiving federal financial assistance from discrimination against individuals with disabilities who are ‘otherwise qualified’ to participate in those programs.” With respect to post-secondary educational services, an “otherwise qualified” individual is a person with a disability “who meets the academic and technical standards requisite to admission or participation in the recipient’s education program or activity.”

Given the intent of Section 504 and the ADA, the development of standards of practice for a profession, and the establishment of essential requirements to the student’s program of study, or directly related to licensing requirements, is allowable under these laws. In applying Section 504 regulations, which require individuals to meet the “academic and technical standards for admission,” the Supreme Court has stated that physical qualifications could lawfully be considered “technical standard(s) for admission.”

If an institution can reasonably modify its program or facilities to accommodate the applicant or student with a disability, the “otherwise qualified” applicant or student shall not be excluded. However, an institution need not provide accommodations or modify its program of study or facilities such that (a) would “fundamentally alter” and/or (b) place an “undue burden on” the educational program or academic requirements and technical standards which are essential to the program of study.

The following guidelines embody the physical, cognitive, and attitudinal abilities an entry-level athletic trainer must be able to demonstrate in order to function in a broad variety of clinical situations; and to render a wide spectrum of care to athletes and individuals engaged in physical activity. The guidelines serve to recognize abilities essential to the development of these entry-level abilities.
TECHNICAL STANDARDS FOR ADMISSION

The Athletic Training Education Program at Union 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 Education Program established qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program’s accrediting agency (Commission on Accreditation for Athletic Training Education [CAATE]). The following abilities and expectations must be met by all students admitted to the Athletic Training Education 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 NATA BOC certification exam.

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

1. The mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and 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 Education Program will be required to verify that they understand and meet technical standards or that they believe that, with certain accommodations, they can meet these standards.

Union University (the institution’s disabilities department) will evaluate any student who states he/she could meet the program’s technical standards with accommodations, confirm that the stated condition qualifies as a disability under applicable laws.

If a student states he/she can meet the technical standards with accommodations, then the University will determine whether it agrees that the student can meet the technical standards with reasonable accommodations; this includes a review at whether the accommodations requested are reasonable, taking into account whether accommodations would jeopardize clinician/patient safety, or the educational process of the student or the institution, including all coursework, clinical experience and internship 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 accommodations. I understand that if I am unable to meet these standards I will not be admitted into the program.

_______________________________  ________________________
Signature of Applicant            Date

_______________________________
Print Name

Alternative statement for students requesting accommodations

I certify that I have read the technical standards of selection listed above and I believe to the best of my knowledge that I meet each of these standards WITH certain accommodations. I will contact Union University (the institution’s disabilities department) to determine what accommodation 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

_______________________________
Print Name

The Americans with Disabilities Act, Title II and Title III are applicable to students with disabilities and their requests for accommodations. Title II covers state colleges and universities. Title III pertains to private educational institutions; it prohibits discrimination based on disability in places of “public accommodation,” including undergraduate and postgraduate schools.
UNION UNIVERSITY
ATHLETIC TRAINING STUDENT AGREEMENT

I, (print name) ________________________________________, being an Athletic Training Student at Union University, declare that I have carefully read and/or reviewed all of the information contained within the Union University Athletic Training Student Handbook. In addition, I have been given an opportunity to ask questions and discuss all of the information contained in the handbook, and I fully understand the policies and procedures described therein.

My signature below indicates that I agree to fully comply with all of the policies and procedures outlined within the Union University Athletic Training Student Handbook and with the university-wide students’ rights and responsibilities as outlined in the Academic Planner and Campus Life Handbook. I further understand that failure to adhere to program policies and procedures may result in disciplinary actions and/or dismissal from the Athletic Training Education Program at Union University.

___________________________________                          ______________________
Athletic Training Student Signature                                                  Date
UNION UNIVERSITY
HEPATITIS B VACCINATION ACCEPTANCE OR DECLINATION

I have attended a training session on bloodborne pathogens and have received information about the hepatitis B virus. I understand that in my clinical education field experiences there is a potential for bloodborne pathogen exposure, and that I could contract hepatitis B from such exposure.

I have received written educational material about hepatitis B and the vaccination and have been given the opportunity to ask questions related to each. I understand the risks and benefits of taking this vaccination series. I understand that I must have all three doses of vaccine to protect me from becoming infected should I be exposed to the hepatitis B virus.

I understand that, as with all medical treatment, there is no guarantee that I will become immune, that the vaccine will prevent me from developing hepatitis B, or that I will not experience an adverse effect from the vaccine. I understand that my decision to accept or decline the vaccination series will have no effect on my work or student status at Union University.

ACCEPT: I accept the opportunity to have the hepatitis B vaccination series.

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<tr>
<td>Printed name</td>
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<td>Witness signature and position</td>
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DECLINE: I decline the hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B. If I decide at a later date, while still attending Union University, to have the hepatitis B vaccination series, I can still receive the vaccine at Student Health Services for the sum of $150.00.

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<td>Witness signature and position</td>
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I HAVE ALREADY BEEN VACCINATED for hepatitis B. I will provide written documentation verifying vaccination to the Athletic Training Education Program Directory and PEWS liaison to the Safety Control Officer at Union University.

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<th>Signature</th>
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<tr>
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</table>
Athletic Training Professional Conduct and Confidentiality Agreement

I, (print name) _________________________________, have been advised by the faculty, staff, and administration of Union University’s Athletic Training Education Program of the legal and ethical necessity of protecting the privacy and confidentiality of each patient’s medical record, including personal health information, injury status, and financial information.

I agree not to disclose any patient or chart information to third parties or persons outside of the offices of each facility stated in this agreement, including family and friends, unless I am specifically authorized to do so by the patient or athlete in writing. I understand that this restriction extends to revealing any information over the phone or by other electronic media.

Any significant or material breach of this confidentiality agreement shall constitute good cause for discharge from any affiliated site that participates in clinical education in the Athletic Training Education Program. In addition, it may subject me to liability and responsibility for any legal damages resulting from my unauthorized disclosure.

This agreement is presented for compliance with the standards of Health Insurance Portability and Accountability Act (HIPAA), Family Educational Rights and Privacy Act (FERPA), and the NATA Code of Ethics, and it applies to the host institution (Union University) and all affiliated clinical sites in Union University’s Athletic Training Education Program, including but not limited to: Student Health Services, West Tennessee Bone and Joint Clinic, Jackson-Madison County General Hospital, Sports Plus Rehabilitation Centers, The Jackson Clinic, STAR Physical Therapy, Physicians Quality Care, the office of Dr. John B. Woods, UT Family Practice, University of Tennessee-Martin, Bethel University, Jackson State Community College, Dyersburg State Community College, Jackson-Madison County Schools, Humboldt High School, Lexington High School, Gibson County High School, Huntingdon High School, University School of Jackson, Jackson Christian School, and Trinity Christian Academy.

__________________________________________
Athletic Training Student Signature

Date

__________________________________________
Program Director of Athletic Training Signature

Date
APPENDICES
APPENDIX A: SAMPLE DISCIPLINARY NOTICE

Union University
Athletic Training Education Program

Disciplinary Notice

This disciplinary notice is being issued to ______________________________ for the following infraction of the Athletic Training Student Handbook for Union University:

☐ Insubordination to Athletic Training and/or Athletic Department Faculty/Staff
☐ Failure to Report to an Assigned Clinical Rotation
☐ Missed Event (Practice/Game) Without Prior Approval from clinical preceptor
☐ Dress Code Violation
☐ Frequent Tardiness
☐ Incomplete/Untimely Completion of ATEP Records/Forms
☐ Unexcused Absence at Required ATEP Meeting/In-Service
☐ Inappropriate Professional Behavior and/or Relations with Student-Athletes
☐ Other (Explain):
__________________________________________________________________

One of the following disciplinary actions will occur as a result of this notice:

☐ Meet with the Program Director and Clinical Coordinator (and clinical preceptor if necessary) to discuss infraction – this disciplinary notice remains in the student’s file.
☐ Meet with the Program Director and Clinical Coordinator (and clinical preceptor if necessary) to discuss infraction and removal from clinical responsibilities for _______ days.
☐ Meet with the Program Director and Clinical Coordinator (and clinical preceptor if necessary) to discuss infraction and removal from clinical responsibilities for _______ days and/or removal from the Athletic Training Education Program.

Summary of Action Taken:

I understand and agree that the aforementioned infraction did occur and I also understand the ramifications of my actions. By signing this notice, I agree to rectify the situation as prescribed by the Athletic Training Staff effective immediately. I understand that additional notices may result in termination from the Athletic Training Education Program.

ATEP Student’s Signature: _______________________________ Date: __________

Program Director’s Signature: _______________________________ Date: __________

Clinical Coordinator’s Signature: ____________________________ Date: __________

Clinical preceptor’s Signature (if necessary): ___________________ Date: __________

APPENDIX B: SAMPLE STUDENT EVALUATION FORM
This is a sample of the evaluation form that will be given to your clinical preceptor (as an online survey) at both mid-term and at the end of the semester. The two assessments (mid-term and final) will combine for twenty-five percent (20%) of the students’ semester clinical course grade.

**Athletic Training Education Program**

Student’s Name: ____________________________

Clinical Preceptor: ____________________________  Clinical Setting: ____________________________

**Purpose**

This student evaluation is provided for the purpose of assessing the professional/personal performance of the Athletic Training Student in the clinical setting. The assessment provided below is based on the expectations of an Athletic Training Student participating in Union University’s Athletic Training Education Program (ATEP).

**Method of Assessment**

The assessment of the student’s clinical field experiences will be based on a scale of 1-5. Each numerical value represents the given assessment of the students’ performance as rated by your Clinical Preceptor. The Clinical Preceptor will rate the student’s performance as the following: (5) **Excellent** – the student performs duties and exhibits these qualities all of the time; (4) **Good** – the student performs duties and exhibits these qualities the majority of the time, but not always; (3) **Average** – the student performs duties and exhibits these qualities at a satisfactory level, but he/she should be more attentive; (2) **Poor** – the student performs duties and exhibits these qualities occasionally, but often needs prompted; (1) **Unacceptable** – the student rarely performs duties or exhibits these qualities/has little or no pride in personal performance or the ATEP; or (0) **Insufficient Data** – the Clinical Preceptor does not have enough data on the student to support an evaluation.

Athletic Training Students in Union University’s Athletic Training Education Program are expected to exhibit the following personal qualities: promptness, professional appearance, ability to cooperate with peers, mentors, and figures of authority, the ability to follow rules and guidelines, assertiveness and eagerness to learn, good communication skills, and a reflection of Christian behavior. This evaluation also measures the Clinical Preceptor’s assessment of the student’s ability to perform athletic training skills in the clinical setting. Each of these qualities is evaluated by the Clinical Preceptor’s who is supervising the student’s clinical rotation/field experience.

**Grading Policy**

This evaluation will represent 25% of the total grade as applied to the student’s Athletic Training clinical course.

Using the scale provided below, please answer the following criteria questions based on the Athletic Training Student’s performance as demonstrated to you during this clinical rotation/field experience.

| (5) = Excellent | the student performs duties/exhibits qualities at the highest level all of the time |
| (4) = Good | above average; the student’s performance exceeds an acceptable level the majority of the time, but not always |
| (3) = Average | the student performs duties/exhibits qualities at an acceptable/satisfactory level |

Insufficient
**Criteria to be graded:**

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<thead>
<tr>
<th></th>
<th>Excellent (5)</th>
<th>Good (4)</th>
<th>Average (3)</th>
<th>Poor (2)</th>
<th>Unacceptable (1)</th>
<th>Data (0)</th>
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<tr>
<td>1) Respects and follows established rules/guidelines</td>
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<tr>
<td>2) Professional attire and appearance</td>
<td>□</td>
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<td>3) Punctuality/on time for clinical assignments</td>
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<td>4) Dependable, reliable, responsible</td>
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<tr>
<td>5) Rapport/relationship with staff and team members</td>
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<td>6) Professional curiosity/ inquisitiveness</td>
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<td>7) Eagerness, willingness to be involved</td>
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<td>8) Displays initiative/ work ethic</td>
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<td>9) Remains attentive/ pays attention to details</td>
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<td>10) Maintains professional clinical demeanor</td>
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<td>11) Effective communication skills (written &amp; verbal)</td>
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<td>12) Listens to instruction and accept constructive criticism</td>
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<td>13) Maintains confidentiality of medical information</td>
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<td>14) Uses equipment and resources appropriately</td>
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<td>15) Maintains a clean, organized clinical environment</td>
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<td>16) Demonstrates confidence in athletic training skills</td>
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<td>17) Demonstrates critical thinking/problem solving skills</td>
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<td>18) Takes responsibility for his/her actions and decisions</td>
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<td>19) Adheres to ethical practice standards</td>
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<td>20) Assertiveness/ takes ownership in clinical assignment</td>
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**Total score:** _______/100

Note to Clinical Preceptor(s): Please provide specific comments, or details, for any score of 0, 1 or 2, and provide any additional feedback that you think might be helpful to the student (i.e., strengths/weaknesses, concerns, suggestions for improvement, etc).

**Comments/Feedback:**

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

**Signature of clinical preceptor:** ___________________________ **Date:** _____________

**Signature of Student:** ___________________________ **Date:** _____________
APPENDIX C: STUDENT ALCOHOL AND DRUG TESTING POLICY

Union University
Student Alcohol and Drug Testing Policy
to Maintain Wellness

Introduction

All students enrolled in Union University are expected to have the responsibility, accountability, and competence to make positive choices that maintain and improve their physical, mental and spiritual well-being.

“Or do you not know that your body is the temple of the Holy Spirit who is in you, whom you have from God, and you are not your own? For you were bought at a price, therefore glorify God in your body and in your spirit, which are God’s.”

1 Corinthians 7:19-20

Union University firmly believes that the use of alcohol and drugs can have a negative effect on the performance of the student’s intellectual and spiritual development. The potential for alcohol and drug abuse threatens the viability of the student’s professional development, the public’s confidence in Union’s programs and its academic reputation among colleges and universities. Most importantly, alcohol and drug abuse affects individual wellness which is imperative in maintaining a healthy mind and body to serve within God’s kingdom and be productive for His purposes.

In furtherance of these beliefs, Union University has instituted an alcohol and drug testing policy to maintain wellness for students with the following goals:

- To encourage students to develop and engage in healthy, responsible lifestyles.
- To promote the health, academic and professional progress of each student at Union University.
- To deter alcohol and drug use and abuse.
- To provide early detection and treatment of alcohol and drug abuse.
- To reduce the risk and threat of injury to students and the public.

Applicability

This policy applies to:

- All students enrolled in health related academic programs at Union University.

Confidentiality

All alcohol and drug test results, evaluation and counseling reports, and other related information obtained as a result of this policy will be treated in a confidential matter. Access to this information will be limited to those who have a need to know and will be kept separately from a student’s academic record.
Definitions

“Alcohol” means any product of distillation of any fermented liquid or any beverage that contains ethyl alcohol (ethanol), including but not limited to beer, wine and distilled spirits, and alcohol used in the manufacture of denatured alcohol, flavoring extracts, syrups, or medicinal, mechanical, scientific or culinary preparations.

“Assistance program” means an established and approved program capable of providing expert assessment of alcohol or drug abuse; confidential and timely identification of services with regard to alcohol or drug abuse; referrals of students for appropriate diagnosis, treatment and assistance; and follow-up services for students who participate in the program or require monitoring if returned to their academic program.

“Drug” means any controlled substance identified in Schedules I through V of Section 202 of the Controlled Substances Act (21 U.S.C. 812). Such drugs include, but are not limited to, amphetamines, barbiturates, benzodiazepines, cocaine, methaqualone, opiates (codeine, heroine, morphine, papaverine), phenycyclidine (PCP) and cannabinoids (THC, marijuana). In accordance with this policy, “drug” also means any legend drug obtained in violation of any Food and Drug Administration enforced statute or regulation. The abuse and/or dependence upon legally permitted substances such as, tobacco, prescription drugs, etc. is also prohibited.

“Drug paraphernalia” means any equipment, product or material that is used or intended for use in concealing a drug or for use in injecting, ingesting, inhaling, or otherwise introducing into the human body a drug or controlled substance.

“Drug test” or “test” means any chemical, biological or physical instrumental analysis, for the purpose of determining the presence or absence of alcohol, drugs or its metabolites. Tests may be based on breath, saliva, urine, blood and/or hair samples.

“Reasonable-suspicion drug testing” means alcohol or drug testing based on a belief that a student is using or has used alcohol or drugs in violation of this policy drawn from specific, objective facts and reasonable inferences drawn from those facts in light of experience. Among other things, the facts and inferences may be based upon:

(A) Observable phenomena such as direct observation of drug or alcohol use or of the physical symptoms or manifestations of being under the influence of alcohol or a drug;
(B) Abnormal conduct or erratic behavior or a significant deterioration in performance;
(C) A report of alcohol or drug use, provided by a reliable and credible source;
(D) Evidence that an individual has tampered with an alcohol or drug test while in the academic program; and
(E) Evidence that a student has used, possessed, sold, solicited or transferred drugs or used alcohol.

“Refusal to test” means:

(A) Failure to provide adequate urine, hair, swab or other biological material for prohibited substances testing without a valid medical explanation after he or she has received notice of the requirement for testing;
(B) Engaging in conduct that obstructs or interferes with the testing process;
(C) Failure or refusal to execute the required forms provided in conjunction with the receipt of this policy or which are a part of the testing;
(D) Failure to be readily available for requested testing;
(E) Failure to report to, and undergo prohibited substances testing as required; and
(F) Alteration or adulteration of a specimen or admission to the collector that you adulterated or substituted a specimen.

“Under the influence” means a condition which alters, impairs, diminishes or affects the body’s sensory, cognitive or motor function due to alcohol or drug consumption; drug consumption may include extensive use of prescribed medications as well as illegal use of drugs. This also means the detectable presence of substances within the body, regardless of when consumed, having an alcohol test result of 0.04 or greater alcohol concentration and/or having a positive alcohol or drug test.

“Use of Prescription Stimulants” means the appropriate treatment of Attention-Deficit/Hyperactivity Disorder (ADHD) as evidenced by a recent (within the previous 6 months) psychosocial evaluation by an appropriately licensed/certified psychologist or other relevantly trained physician that includes a clear description of the impact of ADHD, summary of relevant information, diagnosis, history (including the presence of any co-psychological disorders), educational assessment, summary, and recommendations and the possession of a current, valid prescription for the stimulant. A student’s use of stimulants (as evidenced by a positive drug screen) without a current psychosocial evaluation and prescription will be considered to be abuse of prescription drugs and a “positive” test as noted below.

General Policy Prohibition

Any of the following actions constitutes a violation of the policy and may subject a student to disciplinary action including immediate termination from the program:

- Consuming or being under the influence of alcohol, smoking or using smokeless tobacco on University property, at a clinical site, or as a representative of Union University.

- Using, selling, purchasing, transferring, possessing, manufacturing, or storing an illegal drug or drug paraphernalia, or attempting or assisting another to do so, while on University property, in a clinical site or as a representative of Union University.

- Using any prescription drug without a current, valid prescription or being unnder the influence of any prescription drug without a current, valid prescription. A valid prescription is one that is issued by a licensed health care provider authorized to issue such prescription and used for its intended purpose as prescribed before any expiration date. This includes prescription stimulants without a valid, current (within 6 months) psychosocial evaluation.

- Using any drug (over the counter or prescription, regardless of possession of a valid prescription), that has the potential to impair judgment while on University property, a clinical site or while serving as a representative of Union University.

- Refusal to test.

- Conviction of illegal possession and/or illegal distribution of drugs or alcohol.

Types of Testing

**Applicant Testing**: All applicants accepted into a health-related academic program may, depending on the program requirements, be required to submit to an initial drug screen upon enrollment. This will be at the student’s expense.

**Random Testing**: The student may be selected at random for drug and/or alcohol testing at any interval determined by the University. When selected for random testing the student must visit the designated laboratory within twenty-four (24) hours of notification.
Reasonable Suspicion Testing: Union University may ask the student to submit to a drug and/or alcohol test at any time it feels that the student may be under the influence of drugs or alcohol, including, but not limited to, the following circumstances: evidence of drugs or alcohol on or about the employee's person or in the employee's vicinity, unusual conduct on the employee's part that suggests impairment or influence of drugs or alcohol, negative performance patterns, or excessive and unexplained absenteeism or tardiness.

Post-Incident Testing: Any student involved in an on-campus or clinical site incident which injures the student, another student or a patient under circumstances that suggest possible use or influence of drugs or alcohol in the incident may be asked to submit to a drug and/or alcohol test.

Monitoring Testing: Any student participating in a prescribed treatment program will be required to submit to drug testing as indicated by that treatment plan at the student’s expense.

Testing Procedure/Collection of Samples

All testing will be performed by designated laboratories certified by either the SAMHSA (Department of Health and Human Services) or other governmental entity. Testing shall be in accordance with industry standards and in accordance with any applicable federal and state laws. The collection procedures shall be designed to ensure the security and integrity of the specimen provided by each student and those procedures shall follow chain-of-custody guidelines.

A Medical Review Officer shall be designated to receive all laboratory results from every type of test and assure that an individual who has tested positive has been afforded an opportunity to justify the test result. If the MRO determines that there is no legitimate explanation for the positive result, such result will then be considered a verified positive test result.

When testing is accomplished by urinalysis testing, it shall be accomplished by split specimen collection. The split specimen will be stored at the initial laboratory until the analysis of the primary specimen is completed. If the primary specimen is negative, the split will be discarded. If the primary specimen is positive, the split will be retained for testing if so requested by the student through the Medical Review Officer. When notified of a positive test result, a student may request a retest of the split specimen within forty-eight (48) hours of notification. The student will be responsible for the costs associated with the retest.

Tests for breath alcohol concentration will be conducted utilizing a National Highway Traffic Safety Administration (NHTSA)-approved testing device. If the initial test indicates an alcohol concentration of 0.04 or greater, a second test will be performed to confirm the results of the initial test. The confirmatory test will be observed and performed between fifteen (15) minutes and no more than thirty (30) minutes from the completion of the original test.

Self-Reporting

Students are expected to have the responsibility, accountability and competence to make positive choices that maintain and improve their physical, mental and spiritual well-being. Union University desires to assist all students in achieving their educational goals. With this in mind, Union University allows self-reporting of alcohol or drug abuse by those who have erred but wish to make responsible choices in the future.

The student may self-report his or her violation of this policy, except where it is done to evade an unannounced, random drug test. Self-reporting will also not be allowed after a test has been taken but prior to the results.

The student will only be given one opportunity to self-report. When a student self-reports it will be treated as a first “positive” test.

Disciplinary Procedures
• Failure to report for testing

Students who fail to report for testing will be suspended until they are in compliance with the wellness policy. Failure to achieve required clinical hours for any course will result in failure of that course.

• First “positive” test

Students receiving a first “positive” test for alcohol or drugs will be suspended and referred for evaluation by an appropriate and approved assistance program. After receiving appropriate recommendations and/or completing treatment, the student will be reinstated to continue with the original cohort or will be reenrolled with a later cohort. The student will be responsible for complying with all recommendations made by the assistance program. The testing results will be reported to the appropriate state licensing board either by Union University or the approved treatment facility, if applicable. Upon reinstatement or reenrollment, a student is subject to random testing or monitoring testing as indicated in the treatment plan and/or in accordance with this policy. If the duration of the student’s suspension is unresolved at the end of the semester, the student will receive an incomplete (“I”) for that semester’s classes. If the student withdraws from the academic program and University, those incomplete grades will be converted to F’s. If the student is reinstated to continue in the academic program, the incomplete grades will be replaced with permanent grades once the course requirements are fulfilled. Failure to attend or cooperate with recommendations made will subject the student to being dismissed from the program.

• Second “positive” test

Students receiving a second “positive” test will be dismissed from their academic program and the University. All courses that the student is enrolled in will be given a grade of an “F.”

The following are additional disciplinary consequences:

• Any violation of this policy that causes injury, illness or mortality for a patient will result in automatic and immediate dismissal from their academic program and the University.

• A “refusal to test,” as defined by this policy, will be treated as a “positive” test.

• The University reserves the right to suspend any student who has been arrested for criminal offenses related to the manufacture, possession, sale, use, distribution, dispensation, receipt or transport of any illegal substance pending resolution of the charges to the University’s satisfaction. A verdict of guilty will result in dismissal from their academic program and University. At the conclusion of any matter involving the arrest of a student for the aforementioned criminal offenses, the University reserves the right to discipline the student in accordance with the evidence presented in the matter.

Alcohol/Drug Related Convictions

Students who are convicted of any alcohol or drug related violation under state or federal law or who plead guilty or nolo contendere (i.e. no contest) to such charges must inform the University in writing within five (5) days of the conviction or plea. Failure to report a conviction will result in disciplinary action, up to and including dismissal from their academic program and University.
Cost of Process

Students are responsible for and will be charged a one-time fee for costs associated with enrollment and randomized drug testing. Students will be charged a separate fee for any additional drug testing such as pre-clinical, reasonable suspicion, post incident or participation in approved assistance programs, outpatient and/or inpatient recommended treatment plans and follow-up. Failure to comply will result in dismissal from the program.

Miscellaneous

- While it is the desire to the University to promote a wellness plan that supports the grace filled community of the University, there are many external factors (e.g. licensing boards and clinical facility requirements) that may prohibit the student’s ability to complete program requirements and may therefore result in program and University dismissal. If this occurs, the University is not liable for any effects this may cause in being unable to foster the student’s completion of the program’s academic requirements.

- If a student is allowed to reenroll in the academic program, an individualized plan will be established by the chair, program director, and/or dean in providing an avenue to promote academic success. The student will have the option to abide by the plan or withdraw from the academic program and University. Reinstatement to continue with original cohort may occur if the suspension is cleared promptly within the semester it occurs. Re-enrollment to continue with a subsequent cohort may occur if the suspension is cleared after more than one semester.

Revised 6/02/2010 T: Drive, Nursing, Wellness
Union University
Student Alcohol and Drug Testing Policy
to Maintain Wellness

Consent to Test Form

I understand fully that my performance as a student at Union University and the reputation of Union University are dependent, in part, on my conduct as an individual.

I hereby acknowledge that I have received a copy of the student Alcohol and Drug Testing policy To Maintain Wellness and that I have read and understand it.

I hereby agree to accept and abide by the standards, rules and regulations set forth by Union University and the academic program.

I authorize Union University to conduct all related alcohol and drug tests that are subject to the policy, including random drug tests. I further authorize and give full permission to have the University and/or its personnel send the specimen or specimens so collected to a laboratory for a screening test for the presence of any prohibited substances under the policy, and for the laboratory or other testing facility to release any and all documentation relating to such test to the University and/or to any governmental entity involved in a legal proceeding or investigation connected with the test.

I also authorize the release of information concerning the results of such tests to designated University personnel, its clinical partners, to any assistance program to which I may be referred, and to the appropriate licensing boards, if applicable.

I will hold harmless Union University, its personnel and any testing laboratory the University might use, meaning that I will not sue or hold responsible such parties for any alleged harm to me that might result from such testing, including loss of right to participation in the academic program, ineligibility to test for the national certification exam, employment or any other kind of adverse action that might arise as a result of the drug or alcohol test, even if a Union University or laboratory representative makes an error in the administration or analysis of the test or the reporting of the results. I will further hold harmless Union University, its personnel and any testing laboratory the University might use for any alleged harm to me that might result from the release or use of information or documentation relating to the drug or alcohol test, as long as the release or use of the information is within the scope of this policy and the procedures as explained in the paragraph above.

I understand that this consent form remains in effect during my enrollment in a health-related academic program at Union University.

Date: ___________________________  
Student Signature

_________________________________________  
Printed Student Name