WESTERN ILLINOIS UNIVERSITY
COLLEGE OF EDUCATION AND HUMAN SERVICES
DEPARTMENT OF KINESIOLOGY

ATHLETIC TRAINING PROGRAM HANDBOOK

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Original 2002
Revised 2013
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WESTERN ILLINOIS UNIVERSITY
INTRODUCTION TO THE
ATHLETIC TRAINING PROGRAM
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Clinical Education Coordinator
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H: (309) 836-5769
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Western Hall Athletic Training Room
(309) 298-1253

Brophy Hall Athletic Training Room
(309) 298-2135

Football Athletic Training Facility
(309) 298-2340

Brophy Hall Pool
(309) 298-1121

WIU Kinesiology Department
(309) 298-1981
Fax: (309) 298-2981

WIU Athletic Department
(309) 298-1190
Fax: (309) 298-2009

Macomb High School Athletic Training Room
(309) 837-2331
Ext. 222

Beu Health Center
298-1888

Emergency
911
Office of Public Safety  
(309) 298-1949

Non-emergency  
(McDonough District Hospital)  
(309) 833-4101

Ambulance Service  
(309) 837-4500

**M.D. DIRECTORY**

**Dr. Michael Waters** – Medical Director  
Beu Health Center  
(309) 298-1888

**Dr. Ronald Wheeler** – Team Physician  
Western Illinois Sports & Ortho Medicine and Orthopedics Rotation II  
503 E. Grant Street  
Macomb, IL 61455  
(309) 833-5917

**Dr. David Miller** - Team Physician  
5 Doctors Lane & General Medical Rotation  
Macomb, IL 61455  
(309) 836-3387

**Dr. White** – Orthopedic Rotation I  
505 E. Grant Street  
(309) 833-3800  
*If no answer: 833-4101

**Dr. Idol Mitchell** – Team Podiatrist  
437 E. Grant Street  
Macomb, IL 61455  
837-3964

**Dr. Ted Pawlias** – Team Dentist  
501 E. Grant Street  
Macomb, IL 61455  
837-6344

**MRI Scheduling/Lab/Pathology**  
(309) 836-1530

**McDonough Hospital**  
(309) 833-4101

**Beu Health Center**  
(309) 298-1888

**Ambulance Service**  
(309) 837-4500

**WIU Public Safety**  
(309) 298-1949
MISSION STATEMENT

Western Illinois University’s Athletic Training Program strives to provide athletic training students with premier academic, clinical, and hands-on experiences within the field of athletic training. Through research, instruction, application, and feedback in the prevention, recognition, evaluation and rehabilitation of the physically active, the AT Program prepares students for success on the Board of Certification examination while building qualified entry-level professionals who are characterized by their commitment to the profession, leadership in the community, and life-long learning.

VISION STATEMENT

Western Illinois University’s Athletic Training Program will be recognized nationally as one of the premier athletic training programs. Western’s AT Program will be widely known for its state of the art facility and excellent instructors who are recognized for their contributions to the athletic training profession. Students will have the opportunity to develop and utilize applied technical and clinical skills as well as critical thinking and problem-solving abilities to assist in the daily operation of traditional and non-traditional athletic training settings. Western Illinois University graduates will assume significant leadership responsibilities across the nation and around the world.
NATA CODE OF ETHICS

PREAMBLE
The Code of Ethics of the National Athletic Trainers’ Association has been written to make the membership aware of the principles of ethical behavior that should be followed in the practice of athletic training. The primary goal of the Code is the assurance of high quality health care. The Code presents aspirational standards of behavior that all members should strive to achieve.

The principles cannot be expected to cover all specific situations that may be encountered by the practicing athletic trainer, but should be considered representative of the spirit with which athletic trainers should make decisions.

The principles are written generally and the circumstances of a situation will determine the interpretation and application of a given principle and of the Code as a whole. Whenever there is a conflict between the Code and legality, the laws prevail. The guidelines set forth in this Code are subject to continual review and revision as the athletic training profession develops and changes.

PRINCIPLE 1:
Members shall respect the rights, welfare and dignity of all individuals.
1.1 NATA does not discriminate against any protected class.
1.2 Members shall be committed to providing competent care consistent with both the requirements and the limitations of their profession.
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 unless the person consents to such release or release is permitted or 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 adhere to all National Athletic Trainers' Association guidelines and ethical standards.
2.3 Members are encouraged to report illegal or unethical practices pertaining 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 accept responsibility for the exercise of sound judgment.
3.1 Members shall not misrepresent in any manner, 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 via education and/or experience and by pertinent legal regulatory process.
3.3 Members shall provide services, make referrals, and seek compensation only for those services that are necessary.

PRINCIPLE 4:
Members shall maintain and promote high standards in the provision of services.
4.1 Members shall recognize the need for continuing education and participate in various types of educational activities that enhance their skills and knowledge.
4.2 Members who have the responsibility for employing and evaluating the performance of other staff members shall fulfill such responsibility in a fair, considerate, and equitable manner, on the basis of clearly enunciated criteria.

4.3 Members who have the responsibility for evaluating the performance of employees, supervisees, or students, are encouraged to share evaluations with them and allow them the opportunity to respond to those evaluations.

4.4 Members shall educate those whom they supervise in the practice of athletic training with regard to the Code of Ethics and encourage their adherence to it.

4.5 Whenever possible, members are encouraged to participate and support others in the conduct and communication of research and educational activities that may contribute knowledge for improved patient care, patient or student education, and the growth of athletic training as a profession.

4.6 When members are researchers or educators, they are responsible for maintaining and promoting ethical conduct in research and educational activities.

**PRINCIPLE 5:**

Members shall not engage in any form of conduct that constitutes a conflict of interest or that adversely reflects on the profession.

5.1 The private conduct of the member is a personal matter to the same degree as is any other person's except when such conduct compromises the fulfillment of professional responsibilities.

5.2 Members of the National Athletic Trainers' Association and others serving on the Association's committees or acting as consultants shall not use, directly or by implication, the Association's name or logo or their affiliation with the Association in the endorsement of products or services.

5.3 Members shall not place financial gain above the welfare of the patient being treated and shall not participate in any arrangement that exploits the patient.

5.4 Members may seek remuneration for their services that is commensurate with their services and in compliance with applicable law.
Welcome to our Athletic Training Program and to our athletic training staff. You have decided to join our program primarily because of your interest in athletic training as a profession and because you have demonstrated a desire to pursue certification as an athletic trainer. You are encouraged to be as professional as possible at all times. Being an athletic training student at WIU is a privilege and should be treated as such. The program will be as good as you make it!

Athletic training is an allied health profession dealing in prevention, recognition and evaluation of injuries and illnesses, management and treatment of injuries and illnesses, rehabilitation of injuries and illnesses to those involved in physical activity, as well as, health care administration, and professional development. The athletic trainer serves as a liaison between the physician, other health care specialists, coaching staff, parents, and administrators. Athletic trainers must have thorough knowledge and expertise in anatomy, physiology, biomechanics, psychology, nutrition, therapeutic modalities, taping, conditioning, injury prevention, and rehabilitation techniques.

Historical Overview of the Program

Western Illinois University (WIU) has had an athletic training curriculum since November 1972 when W.L. Lakie, Dean of the College of Health, Physical Education, and Recreation received a letter from the National Athletic Trainers’ Association’s (NATA) Executive Director Otho Davis congratulating WIU on being an approved NATA athletic training program. This was due to the hard work and dedication of Roland “Duke” LaRue who was the Head Athletic Trainer and the Director of the Athletic Training Curriculum at WIU from 1965-1978. Duke LaRue had an illustrious career while here at WIU. He was a member of the NATA Board of Directors from 1968-1974. In 1972 he was one of the Athletic Trainers selected for the Winter Olympics in Sapporo, Japan and again in 1980 in Lake Placid. Duke was inducted into NATA Hall of Fame in 1990. He has also been inducted into the Mid-America Athletic Trainers’ Association Hall of Fame in 1995, the Nebraska State Athletic Trainers’ Association Hall of Fame in 1997, and is in WIU’s Athletic Hall of Fame as well. We consider Roland “Duke” LaRue the father of WIU’s Athletic Training Education Program. The ATEP dedicated a plaque in honor of Duke LaRue’s contributions to WIU in the spring of 2007.

Western Illinois University’s Athletic Training (AT) Program was one of the first educational programs to receive NATA approval back in 1972 and continued until June 1998 when NATA approval was replaced by accreditation through the Commission on Accreditation of Allied Health Education Programs (CAAHEP). The CAAHEP-accreditation was maintained through 2005 at which time the program’s accreditation status was assumed by the Commission on Accreditation of Athletic Training Education (CAATE).

Western Illinois University has enjoyed a long rich tradition of having an athletic training curriculum. There have been six program directors in WIU’s AT Program history including Duke LaRue (1973-1978), Larry Leverenz (1979-1986), Don Zylks (1986-1990), Sharon
Menegoni (1991-1996), Roger Clark (1996-2002), and Renee Polubinsky (2002-Present). Other key individuals who contributed to WIU’s AT Program success include: Valerie Lindbloom who worked as an athletic trainer for 13 years while teaching athletic training courses. Val also served as interim program director on two occasions (1978-79 & 1984-85) and was named Women’s Physical Education Teacher of the Year in 1972, 1973, 1979, and 1986. Val was also a coach for the field hockey, basketball, and softball teams at WIU. As softball coach she took WIU’s team to the College World Series in 1972 & 1973, placing 3rd and 4th respectively. Val was very active in the state of Illinois as an athletic trainer and volunteered for the Special Olympics for over 17 years. Some of her more notable honors include: receiving the Service in Athletic Training Award from the Cramer Company in 1980; serving as the USA Co-Head Athletic Trainer at the Goal Ball Championships for the blind in Indianapolis, IN in 1982; serving as USA Head Athletic Trainer at the Canadian National Championship for the Disabled in Ontario in 1983; serving as USA Head Athletic Trainer at the International Games for the Disabled in New York in 1984; and serving as an athletic trainer for the Blind Olympics in Bloomington, IL for several years. Val retired in 1996 with 31 years of service as an Assistant Professor, Athletic Trainer, and Coach. The ATEP dedicated a plaque in honor of Val Lindbloom’s contributions to WIU in 2008.

Gail Weldon was the Head Women’s Athletic Trainer for WIU from 1974-1978. She was a pioneer in the advancement of women in the field of athletic training by having contributed to its success. She was the first of 2 women asked to join the NATA (as a student) in 1972. She obtained her certification in 1974 by the NATA which made her one of the first 10 women ever certified as an athletic trainer. In 1976, Gail was the first female Certified Athletic Trainer selected to the sports medicine staff of the US Olympic Committee. In 1976, she was the first women Certified Athletic Trainer for the Summer Olympic Games in Montreal. Gail left WIU in 1978 to become the Head Women’s Athletic Trainer for UCLA. Gail passed away in 1991 after a short but brave bout with cancer. In 1995, Gail Weldon was the first women inducted into the NATA Hall of Fame.

Other key individuals include: Marsha Grant-Ford who was the first African American women Certified as an Athletic Trainer and she began her career as WIU’s Head Women’s Athletic Trainer from 1978-1980. The longest serving Head Athletic Trainer was Michael “Pendy” Pendergast, who served as WIU’s Head Athletic Trainer for 30 years as well as interim program director on two occasions (1985-86 & 1990-91). The AT Program has several notable alumni as well including two Illinois Athletic Trainers Association Hall of Fame members Dan Stephens and Steve Mayo, and Karen Bloch who was the AT for water polo at the 2008 Olympics in Beijing, China.

Western Illinois University’s AT Program has evolved tremendously over the years. From once being an exclusive WIU campus experience to now having opportunities with Orthopedic Surgeons, Internal Medicine Physicians, Osteopathic Physicians, Nurse Practitioners, emergency room departments, high school experiences, and outpatient clinical settings, WIU’s program continues to grow. Students have opportunities to provide athletic training care through a variety of clinical learning experiences including the Division I Collegiate level, high school interscholastic athletics, Senior Olympics, and Special Olympics to name a few.
Western Illinois University’s AT Program will continue to strive to improve student learning opportunities and develop competent entry-level professionals. With an ever-evolving profession, it is not a wonder that curriculum programs are constantly challenged to stay abreast in the field and offer the best educational opportunities for athletic training students. Western Illinois University is committed to serving the athletic training profession by preparing strong critical thinkers who have a commitment to the profession and ethical responsibility to the health care of the physically active.

PURPOSE OF THE WIU ATHLETIC TRAINING PROGRAM

The Athletic Training Program at WIU is intended to prepare graduates who will be capable of providing health care to the physically active. The AT Program students assist with the delivery of health care to all student-athletes participating in WIU intercollegiate athletic programs and to the Macomb High School student-athletes. Through these settings along with the strong science foundation provided by the rigorous curriculum, graduates are prepared to pass the Board of Certification (BOC) exam and practice as an athletic trainer.

The undergraduate AT Program at WIU is designed to facilitate the athletic training student in meeting all of the requirements set forth by the National Athletic Trainers’ Association Education Council, the BOC, the CAATE competencies for an accredited program, as well as the graduation requirements of WIU. There are three parts to the AT Program: Formal didactic classroom education, laboratory experiences, and clinical experiences.

Meeting the BOC and the CAATE requirements will allow the athletic training student to take the BOC examination. To practice professionally as an athletic trainer one must pass this examination.

GOALS AND OBJECTIVES OF THE WIU AT PROGRAM

1. **GOAL:** To prepare athletic training students for a future role in the health care of the physically active and to meet entry-level standards of the athletic trainer.

   **OBJECTIVES:**

   A. Review of clinical competencies and academic course work by the Athletic Training Advisory Committee.

   B. Develop an overall understanding of the National Athletic Trainers’ Association’s (NATA) structure.

   C. Prepare for successful completion of the Board of Certification examination and Illinois Athletic Training Licensure.

   D. Provide athletic training students with diverse clinical experiences.

   E. Assess employment preparedness via alumni surveys.
2. **GOAL:** To provide students with a variety of clinical settings while providing quality health care to Western Illinois University athletes.

**OBJECTIVES:**

A. Develop experiences that include both high and low risk injury sports.

B. Assign students to clinical rotations that include both genders.

C. Assign students to both team and individual sport experiences.

D. Develop opportunities that allow athletic training students to have clinical experiences at the high school setting, in intercollegiate athletics, and in an outpatient orthopedic clinic.

E. Develop opportunities for students to observe and gain clinical knowledge with a variety of allied health professionals as well as orthopedics and general medicine.

3. **GOAL:** To provide an open and receptive learning environment in both the academic and clinical settings.

**OBJECTIVES:**

A. Develop and administer student evaluation tools to improve clinical instruction.

B. Develop and administer tools for students to evaluate the clinical experiences.

C. Utilize a mentoring system to assist students with progression through the program.

D. Develop and administer preceptor evaluations of the athletic training students.

E. Schedule regular athletic training staff meetings for the AT Program faculty and clinical staff as well as the athletic training students.

F. Create a positive classroom experience by using a variety of teaching tools and methods.

4. **GOAL:** To develop a positive working relationship with the community.

**OBJECTIVES:**

A. Provide students with an opportunity to communicate with other allied health professionals through the use of guest lecturers and in-services.
B. Provide opportunities for students to attend and present at professional meetings.

C. Provide opportunities for community service projects for the Athletic Training Student Association (ATSA).

5. **GOAL:** To integrate classroom knowledge with clinical practice.

**OBJECTIVES:**

A. Provide structured opportunities in the classroom to incorporate clinical experiences.

B. Develop clinical competencies based on classroom knowledge.

C. Provide structured opportunities in the clinical setting to incorporate competencies learned in the classroom setting.

**LEARNING OUTCOMES FOR THE AT PROGRAM**

1. Students will be proficient in the Educational Competencies as determined by the Professional Education Council of the National Athletic Trainers’ Association, including the following domains:

   A. Evidenced-based Practice:
      Students will be able to apply principles of evidence-based practice to determine clinical diagnoses, and formulate and implement acceptable therapeutic treatments to maximize patient outcomes.

   B. Prevention and Health Promotion:
      Students will be able to apply prevention strategies and procedures to limit the incidence and/or severity of injuries and illnesses as well as articulate the importance of nutrition and physical activity for maintaining a healthy lifestyle and for preventing chronic diseases which will optimize a patient's quality of life.

   C. Clinical Examination and Diagnosis:
      Students will be able to collect and organize appropriate clinical data (history, physical exam, laboratory assessments including technology advancements in diagnostics) to accurately diagnose a patient’s complaints.

   D. Acute Care of Injury and Illness:
      Students will be able to demonstrate the immediate management care of acute injuries and illnesses.

   E. Therapeutic Interventions:
      Students will be able to design therapeutic interventions and safely apply rehabilitation techniques and therapeutic modalities to meet treatment goals.
F. Psychosocial Strategies and Referral:
   Students will be able to recognize patients exhibiting abnormal social, emotional, and mental behaviors as well as articulate the appropriate intervention and referral strategies for such behaviors.

G. Healthcare Administration:
   Students will be able to describe the role of the athletic trainer in the delivery of athletic training services within the context of the broader healthcare system. Students will also be able to identify components of a risk management plan, develop policies and procedures to guide the operation of athletic training services as well as explain the budgeting and billing process.

H. Professional Development and Responsibilities:
   Students will be able to summarize athletic training profession’s history and development along with the role and function of the National Athletic Trainers’ Association, Board of Certification, the Commission on Accreditation of Athletic Training Education programs, and state regulatory boards.

2. Students will be proficient in the Clinical Integrated Proficiencies (CIPs) as determined by the Professional Education Council of the National Athletic Trainers’ Association.

3. Clinical Education Experiences:
   A. Students will complete a variety of clinical education experiences in a variety of settings that expose the student to high and low risk activities, athletes of both genders, equipment intensive activities, general medical experiences, and both on-and off-campus clinical settings.

   B. Students will develop and fine-tune clinical skills and knowledge through well supervised hands-on application in a variety of athletic training settings.

   C. Students will differentiate the skills of the athletic trainer within the broader health care system.

   D. Students will demonstrate problem-solving abilities when faced with evaluation opportunities.

   F. Students will demonstrate appropriate oral and written communication skills with patients, coaches, administrators, colleagues, and other health care professionals.

   G. Students will provide patient care that is rooted in ethical behavior, honesty/integrity, strong communication skills, and advocacy for patient needs as evidenced through the student’s ability to:
      1. Abide by the Standards of Practice established by the Board of Certification.
      2. Abide by all State laws governing the practice of athletic training.
PERSONNEL

You will find the faculty and staff to be a very professional, dedicated group, who are conscientious in meeting all obligations and responsibilities during your educational experiences. We expect you to have the professionalism and dedication that is required to become a Board Certified Athletic Trainer. Our obligation to you is to provide the environment, expertise, guidance, and opportunity to learn the theory and basic skills to become a member of our profession.

The athletic training staff consists of staff athletic trainers, faculty athletic trainers, graduate assistant athletic trainers, athletic training students, a medical director, team physicians, and consulting medical specialists. Primarily, the team physicians and staff athletic trainers coordinate the medical care for WIU athletes.

A. **Medical Director**
The medical director serves as the primary resource for the AT Program. The medical director oversees all aspects of the education program and has final authority in the administration of the AT Program. He is also an active participant in student education through supervision of the general medical clinical rotations, providing in-services, or guest lecturing in the AT Program classes.

B. **Team Physicians**
The team physicians provide diagnostic help, supervision, and prescriptive medical care. They prescribe treatment and rehabilitation for all intercollegiate athletes. They must have absolute authority in determining the physical fitness and/or physical disability or illness of an athlete. The team physicians act as a medical advisor to the athletic training staff regarding prevention of injuries, care of injuries, and post-injury rehabilitation.

C. **Consulting Medical Specialists**
The WIU athletic training program will utilize a consulting medical specialist whenever deemed necessary. The athletic training staff will often refer patients to the WIU Beu Health Services where there are registered nurses, nurse practitioners, and family physicians on staff. Beyond the WIU Health Services are a host of medical specialists the athletic training staff may utilize.

D. **Faculty Athletic Trainers**
The faculty athletic trainers have the following duties and responsibilities:

1. Serve as Preceptors or a Clinical Instructor Educator (CIE) in the AT Program.
2. Work with and under the supervision of the medical director.
3. Supervise and evaluate undergraduate athletic training students in their normal daily duties in the athletic training room and while taking care of an athletic team.
4. Participate in the administration of all operations of the AT Program.
5. Participate in regular staff meetings and annual program review processes.

E. Staff Athletic Trainers
The staff athletic trainers have the following duties and responsibilities:

1. Serve as Preceptors in the AT Program.
2. Work with and under the supervision of the medical director and team physicians.
3. Supervise and evaluate undergraduate athletic training students in their normal daily duties in the athletic training room and while taking care of an athletic team.
4. Assist in the administration of all operations of the AT Program.
5. Administer first aid, emergency care, and treatment/rehabilitation to injured athletes.
6. Administer therapeutic modalities under the supervision of the team physician or medical director.
7. Direct and supervise the daily operation of the athletic training facilities.
8. Direct and supervise the rehabilitation programs of the student-athletes.
9. Cover selected athletic practices and contests.
10. Mentor and supervise the graduate assistant athletic trainers.
11. Participate in regular staff meetings and annual program review processes.

F. Graduate Assistant – Athletic Trainers
The graduate assistant athletic trainers have the following duties and responsibilities:

1. Serve the Athletic Department in the capacity deemed by the staff athletic trainers.
2. Serve as Preceptors in the AT Program.
3. Work with and under the supervision of the medical director and team physician.
4. Supervise and evaluate undergraduate athletic training students in their normal daily duties in the athletic training room and while taking care of an athletic team.
5. Administer first aid, emergency care, and treatment/rehabilitation to injured or ill athletes.
6. Administer therapeutic modalities under the supervision of the team physician or medical director.
7. Direct and supervise the daily operation of the athletic training facilities.

8. Direct and supervise the rehabilitation programs of the student-athletes.

9. Cover selected athletic practices and contests as determined by the athletic training staff.

10. Participate in regular staff meetings and annual program review processes.
ILLINOIS LICENSED ATHLETIC TRAINERS

All faculty, staff, and graduate assistant athletic trainers will be licensed by the State of Illinois as defined by Section 3 of the Illinois Athletic Trainers Practice Act. This act defines a licensed athletic trainer as a person who is licensed to practice Athletic Training as defined in the Act, who possesses the specific qualifications set forth in the Act and who, upon the direction of a team physician and/or consulting physician, carries out the practice of prevention/emergency care and/or physical reconditioning of injuries incurred by athletes participating in an athletic program conducted by an educational institution, a professional athletic organization, or a sanctioned amateur athletic organization that employ the athletic trainer. The Act further indicated that a licensed athletic trainer is a person who, under the direction of a physician, carries out the practice of prevention/emergency care and/or physical reconditioning of injuries for a health organization-based extramural program of athletic training services for athletes.

The Act indicated that the specific duties of an athletic trainer shall include, but not limited to:

a) supervision of the selection, fitting, and maintenance of protective equipment;

b) provision of assistance to the coaching staff and the development and implementation of conditioning programs;

c) counseling of athletes on nutrition and hygiene;

d) supervision of athletic training facilities and inspection of playing facilities;

e) selection and maintenance of athletic training equipment and supplies;

f) instruction and supervision of athletic training student staff;

g) coordination with team physician to provide:
   1. pre-competition physical exams and health history updates
   2. game coverage or phone access to a physician or paramedic
   3. follow-up injury care
   4. reconditioning programs
   5. assistance on all matters pertaining to the health and well-being of athletes

h) provision of on-site injury care and evaluation as well as appropriate transportation, follow-up treatment and rehabilitation as necessary for all injuries sustained by athletes in the program;

i) with a physician, determination of when an athlete may safely return to full participation post-injury;

j) maintenance of complete and accurate records of all athletic injuries and treatments rendered.
WESTERN ILLINOIS UNIVERSITY AT
PROGRAM EDUCATIONAL
REQUIREMENTS
Western Illinois University
Athletic Training Program

Academic Plan

Students entering WIU with an interest in athletic training, pursue a Bachelor of Science degree in the Department of Kinesiology with a major in Athletic Training. The program can be completed in an eight semester sequence for the traditional freshman or in seven semesters for the transfer student who is bringing in many of the General Education requirements.

The academic plan includes three critical and intertwined elements as part of the Athletic Training (AT) Program. The first is the classroom or didactic component of the curriculum. This is where students are formally instructed and evaluated in all of the competencies necessary for an entry-level athletic trainer. The second element is the laboratory portion of the AT Program. The labs are designed to give the students their first experience in applying the skills taught in the classroom. Students are instructed, given several hands-on opportunities to practice and receive frequent critiquing of their skills, and finally, will be assessed as to their ability to demonstrate the specific skills. The third element is the clinical education experiences. In the clinical education component of the AT Program, students in the program register for one class every semester that involves formal classroom activities along with clinical field experience assignments. In the classroom portion, students are assessed on the clinical competencies from courses previously completed as part of the program. This provides an opportunity for students to continue to develop and maintain their clinical competence in various components that are assigned to each level of student. Students also are assigned to a Preceptor for the field experiences where they are placed into supervised real-life settings in order to apply the skills that they have demonstrated minimum competency. The Preceptor has opportunity to continue to instruct and assess each student under their supervision and assist in the learning over time continuum.

NOTE: The AT Program is a selective program. Application to the AT Program is done during the student’s first year at WIU. All of the materials for admission to the Program will be provided and reviewed in AT 100: Introduction to Athletic Training and AT 110: Prevention and Care of Athletic Injuries courses.

Eight Semester Academic Plan Description

In the eight semester academic plan, the student’s first semester has four required courses for the AT Program prerequisites. These courses consist of five credit hours in the following: AT 100 (Introduction to AT), KIN 290 (Anatomy & Physiology I), and KIN 147 (Weight Training). The remaining credit hours are used to complete the General Education courses required for graduation. The athletic training course AT 100 is the Introduction to Athletic Training. This course is a one credit class that is designed to explain the profession and the program requirements to the students who are considering athletic training as a career choice. The course explains the process for AT Program application, retention, and graduation. There is also an element that requires students to obtain an interview from an athletic trainer. This interview is encouraged to be obtained from a setting outside of WIU, often at the student’s high school or home town.
The second semester in the AT Program eight semester plan, the student enrolls in six credit hours of the following courses: AT 110 (Prevention & Care of Injuries) and KIN 291 (Anatomy & Physiology II). The remaining credits are used for the General Education requirements. The AT 110 is the second athletic training course for the Program. This course is the class that really begins the student’s initial pre-professional training. Students are taught the evaluation process, taping skills, many first aid skills, universal precautions, and completes blood borne pathogen training. Also incorporated into this course is the student mentoring program. Students, who have identified the interest in pursuing athletic training as a career choice, are provided opportunities to be paired up with a student mentor and shadow them throughout their clinical education rotation experiences. The student mentors are upper level students already accepted into the AT Program. Each student mentor shares a responsibility for the pre-admission student assigned to them. They will attempt to include them on the daily tasks that they perform by explaining what and why they are doing the things that they are. The mentors will be responsible for answering questions that the pre-admission student may have as well as provide an evaluation of the student at the end of the rotation. Also, each student in the AT 110 class that is involved in the student mentor program will be introduced to the Preceptor of the student they are shadowing. This Preceptor, who is an athletic trainer, will attempt to get to know the pre-admission student and they too will evaluate them at the end of the experience.

At the midpoint of the AT 110 class, students are provided the information as to how to access the application materials and the process is explained by the AT Program faculty member. Students pursuing program admission must complete the application procedures by the stated deadline to be considered a program applicant. Current First Aid and CPR certifications are also required at the end of this semester or by the time of program admission. Students can elect to take the HE 251 (First Aid) course offered at WIU to gain this certification or they can pursue certification through the community agencies of the American Red Cross or the American Heart Association.

The third semester (in the eight-semester AT Program plan) is the first semester that the student completes after formal program admission. This semester has 14 credits of required courses. The courses include: AT 200, AT 211, AT 300, HS 250, KIN 270, and KIN 292. The three AT classes are Lower Extremity (AT 200), Modalities (AT 300), and the clinical education class (AT 211). The unique course here is the clinical education class, AT 211. Every semester, all Program students enroll in a one credit hour clinical education course where the competencies are assessed formally in the lab setting and also includes a field experience rotation. The assessments include the competencies that were taught and measured in the previous semester’s courses. During the field experience rotations, students are provided supervised opportunities to work with a Preceptor so they are able to apply the skills that they were taught and assessed in the classroom and labs in the athletic training rooms and on the field of play. The Preceptor is able to continue to instruct and evaluate the student’s skills in order to assist the student in developing mastery of the competencies that are required of an entry-level professional. At the end of the semester, every student in the clinical education courses is required to complete a comprehensive written and practical exam. This is another opportunity to assess each student’s level of competency in the various skills and athletic training knowledge. The goal for each student is to pass the clinical comps described above with a 70% on both parts of the exam (written/practical).
The fourth semester requires 12 credits in the major and the remaining credits are filled with General Education courses. The AT Program students enroll in AT 210, AT 301, AT 305, KIN 293, and KIN 359. The AT courses include Upper Extremity (AT 210), Therapeutic Exercise (AT 305), and the clinical education course (AT 301). Each semester is intended to build on the previous semester’s skills and competencies and continue to develop a student’s professional training.

The clinical education course, AT 301 is the next level for the formal classroom assessments and field experience rotations. Students in AT 301 sign up for one credit and meet weekly with the faculty member to assess clinical skills that were taught and measured in the previous semesters, as well as continue to gain hands-on opportunities working with a Preceptor.

The fifth and sixth semesters are the last semesters that contain academic courses in the AT Program. These semesters are providing the upper level student classes in Head, Neck, Spine, & Abdomen (AT 310), Advanced Rehab Techniques (AT 315), Pharmacology (AT 403), Pathology (AT 405), Administration (AT 410), Senior Seminar (AT 413), Nutrition (FCS 109), Exercise Physiology (KIN 391), and Biomechanics (KIN 392). Both of these semesters are still filled in with General Education requirements for graduation and each semester has a clinical education course (AT 311 & AT 401) assigned to it. The clinical education courses are the same format as previously described; however, the AT 311 student will have two off-site rotations. One is at a second Orthopedic Surgeon’s office where the student in this clinical will spend eight to twelve hours observing an Orthopedic in his private practice evaluating patients. The second off-site rotation for an AT 311 student is to the Outpatient Rehabilitation Clinic. At this rotation, the student will assist an athletic trainer or physical therapist and gain experience working in the nontraditional setting seeing a variety of patients. The AT 401 student will also have off-site rotations. One is the general medical experience where the students will spend time at an internal medicine physician’s office. The second rotation will be another opportunity for every student to go to an off-site Orthopedic Surgeon’s office. Here the student shadows the physician to gain experience working in the orthopedic setting.

The seventh semester contains the last clinical education course (AT 411). The final clinical education class and field experience rotations is used to assess the student’s readiness to head to Internship and ultimately graduation and the BOC exam. The student in this clinical will spend four to eight hours observing a Chiropractor, up to eight hours at the McDonough District Hospital Emergency Room Department, and an additional general medical rotation at the Beu Health Center.

The final semester (eight), is the Internship placement (AT 420). This is a student’s culminating experience where they work with an athletic trainer for 40 hours a week for 12 weeks. This is a 12 credit semester that allows a student to function in the capacity of an entry-level professional under the guidance of an experienced athletic trainer.

Once all the eight semesters are completed the student has fulfilled all the AT Program and University requirements for graduation.
Seven Semester Academic Plan Description

The seven semester academic plan is suitable for students who have already completed college or university coursework. Some students enter WIU with an Associate’s Degree, or with at least one to two semesters’ worth of general education requirements. This student can enter the AT Program and receive equal consideration as any other student. This academic plan is for the transfer student and the transfer student policy would apply.

The transfer student who already has college academic credit would be allowed to take AT 100 (Introduction to AT) and AT 110 (Prevention and Care of Injuries) in the same semester. These are two of the AT Program prerequisite courses along with KIN 290 (Anatomy & Physiology I) and KIN 147 (Weight Training). As long as a transfer student will have a minimum of 30 semester hours of university coursework, completed AT 100, AT 110, Anatomy & Physiology I (KIN 290), and Weight Training (KIN 147) they can apply for formal admission at the end of the first semester on campus.

The same criterion pertains to them as the eight semester student with the only exception being that the pre-admission courses are taken in the same semester rather than over two semesters. This student is able to accomplish the shortened time due to having the General Education requirements completed as determined by the University. Therefore, after the first semester, in the seven semester plan, the transfer student follows the same sequence as the eight semester student as described above, beginning with the third semester on. However, the AT major courses may be taken out of sequence depending on the semester the student is officially accepted into the AT Program. The academic advisor will provide the long term planning sequence for the newly admitted student.

If a transfer student has courses that are considered WIU equivalent courses to any of the AT Program required courses (clinical competencies contained in them), then the department academic advisor and Program Director must review the request for course transfer. All courses with competencies in them must be taken at WIU, therefore, all transfer substitutions in AT Program required courses are denied. A student can write an appeal to the department for a transfer substitution. If the student requests to appeal for a transfer substitution that has been denied, then the student must agree to an exam that will satisfy the course competencies prior to granting the course substitution. However, the student applying for an appeal of a transfer substitution must pass the specific course content area exam with a 70% passing score. If the student fails to achieve the 70% passing score, they must enroll in the required course at WIU.
Athletic Training Program Expenses

Costs associated with the AT Program will be the responsibility of the student. The instructional fee per semester hour is the same for students enrolled in the AT Program as for other students enrolled at WIU. In addition to tuition, housing, books/supplies, and usual transportation costs, students in the AT Program will incur additional expenses in at least the following areas (estimated costs are in parenthesis):

- Program admission physical examination (~$20), including immunizations (Hep B ~$45/dose) as required by the University or clinical education sites;
- Criminal background check ($52);
- Laboratory fees in AT 110 (~$65), AT 211 (~$35), AT 301 (~$30), AT 311 (~$25), AT 401 (~$20), & AT 411 (~$15);
- Transportation and other expenses associated with daily off-campus clinical education rotations, preseason camp coverage, and internships (Macomb has free bus service). This does not pertain to travel with WIU intercollegiate teams or away events with the high school;
- Clothing necessary to meet the AT Program dress code, including but not limited to polo shirts, athletic training t-shirts, and khaki pants/shorts;
- TB Screening (Initial QFT = ~$25; Annual Risk Assessment = Free);
- Annual CPR with AED for the Professional Rescuer certification (~$27)

Note: Since the AT Program is a professional education program, students will need to remain flexible with their time to participate fully in laboratory sessions, clinical education rotations, and internships. Most students are unable to maintain regular employment during enrollment in the program.
# 8 Semester Degree Plan

**Bachelor of Science**  
**Athletic Training**

<table>
<thead>
<tr>
<th>FALL</th>
<th>SPRING</th>
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<tbody>
<tr>
<td><strong>1st Semester</strong></td>
<td><strong>2nd Semester</strong></td>
</tr>
<tr>
<td>AT 100 Intro to Athletic Training (1)</td>
<td>AT 110 Prev &amp; Care of Athletic Injuries* (3)</td>
</tr>
<tr>
<td>English 180 (3)</td>
<td>KIN 291 Anatomy and Physiology II (3)</td>
</tr>
<tr>
<td>KIN 290 Anatomy &amp; Physiology I (3)</td>
<td>Chemistry 150 (4)</td>
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<td>Physics 100 (4)</td>
<td>Multi Cultural (3)</td>
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<td>Psychology 100 (3)</td>
<td>Humanities (3)</td>
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<tr>
<td>KIN 147 Weight Training (1)</td>
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<tr>
<td><strong>Total:</strong> 15 hours</td>
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<tr>
<th><strong>3rd Semester</strong></th>
<th><strong>4th Semester</strong></th>
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<tbody>
<tr>
<td>AT 200 Lower Extremity (3)</td>
<td>AT 210 Upper Extremity (3)</td>
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<tr>
<td>AT 211 Clinical Education &amp; Exp in AT I* (1)</td>
<td>AT 301 Clinical Ed and Exp in AT II* (1)</td>
</tr>
<tr>
<td>AT 300 Therapeutic Modalities (3)</td>
<td>AT 305 Therapeutic Exercise (3)</td>
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<tr>
<td>English 280 (3)</td>
<td>KIN 359 Sport &amp; Exercise Psych (3)</td>
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<td>HS 250 Medical Terminology (2)</td>
<td>Micro 200/Bio 101 (4)</td>
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<tr>
<td>KIN 270 Motor Behavior (3)</td>
<td>KIN 293 Manual Muscle Testing (2)</td>
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<tr>
<td>KIN 292 Palpatory Anatomy (2)</td>
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<td><strong>Total:</strong> 17</td>
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<tr>
<th><strong>5th Semester</strong></th>
<th><strong>6th Semester</strong></th>
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<tbody>
<tr>
<td>AT 310 Head, Neck, Spine, &amp; Abdomen (3)</td>
<td>AT 401 Field Experience in AT II* (1)</td>
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<tr>
<td>AT 311 Field Experience in AT I* (1)</td>
<td>AT 315 Advanced Rehab Techniques (2)</td>
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<tr>
<td>AT 403 Pharmacological Issues in AT (3)</td>
<td>AT 405 Medical Cond &amp; Pathologies in AT (3)</td>
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<tr>
<td>KIN 391 Exercise Physiology (3)</td>
<td>AT 410 A.T. Administration (3)</td>
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<tr>
<td>Psychology 221 – Psy of Child Dev (3)</td>
<td>STATS 171 (3)</td>
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<tr>
<td>KIN 247 Power Training (1)</td>
<td>FCS 109 Nutrition (3)</td>
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<tr>
<td>MATH 123 (3)</td>
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<tr>
<td>AT 411 AT Professional Preparation* (1)</td>
<td>AT 420 Internship (12)</td>
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<td>AT 413 Senior Seminar (1)</td>
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<td>KIN 392 Biomechanics (3)</td>
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<td>Communication 241 (3)</td>
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<td>Humanities (3)</td>
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<td>Fine Arts (3)</td>
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<td>Social Sciences (3)</td>
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Academic Plan can be achieved if athletic training student registers on assigned time and date.  
Revised 5/14/10  
*Lab fee is associated with course.
# 7 Semester Degree Plan
Bachelor of Science
Athletic Training

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<td>FCS 109 Nutrition (3)</td>
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| 7th Semester (Summer) | |
|------------------------||
| AT 420 Internship (12) | |

Revised 5/14/10  *Academic Plan can be achieved if ATS registers on assigned time and date.
*Lab fee is associated with course.
ACADEMIC ADVISING

Academic Advising Description/Definition

Academic advising is an educational process that, by intention and design, facilitates students’ understanding of the meaning and purpose of higher education and fosters their intellectual and personal development toward academic success and lifelong learning (NACADA, 2004).

At WIU, academic advising provides students with the opportunity to build a relationship with their advisor for the purpose of gaining assistance in planning their educational career, in learning the skills needed for academic success, and in learning how to access the variety of resources and services available to them on the Western campus.

Academic advising is a collaborative educational process whereby students and their advisors are partners in meeting the essential learning outcomes, ensuring student academic success, and outlining the steps for achievement of the students’ personal, academic, and career goals. This advisor/student partnership requires participation and involvement of both the advisor and the student as it is built over the student’s entire educational experience at the University. Both the student and the advisor have clear responsibilities for ensuring the advising partnership is successful.

Advisor Responsibilities – What You Can Expect From Your Advisor:

- Understand and effectively communicate the curriculum, graduation requirements, and University and college policies and procedures through use of the catalog and WARD reports.
- Encourage and guide you as you define and develop realistic goals.
- Encourage and support you as you gain the skills to develop clear and attainable educational plans.
- Provide you with information about and strategies for utilizing the available resources and services on campus.
- Assist you in understanding the purposes and goals of higher education and its effects on your life and personal goals.
- Monitor and accurately document your progress toward meeting your academic goals.
- Be accessible for meeting with you via office hours for advising, telephone, or e-mail.
- Assist you in gaining decision-making skills and skills in assuming responsibility for your educational plans and achievements.
- Maintain confidentiality.
- Assist you in working closely with your professors.
Advisee Responsibilities – What You Are Expected To Do

As an advisee, you have clear responsibilities in the advising partnership in order to be successful:

- Schedule regular appointments or make regular contacts with your advisor during each semester.
- Come prepared to each appointment with questions or material for discussion.
- Be an active learner by participating fully in the advising experience.
- Learn how to use the catalog and WARD reports.
- Ask questions if you do not understand an issue or have a specific concern.
- Keep a personal record of your progress toward meeting your goals.
- Organize official documents in a way that enables you to access them when needed.
- Complete all assignments or recommendations as advised.
- Gather all relevant decision-making information.
- Clarify personal values and goals and provide your advisor with accurate information regarding your interests and abilities.
- Become knowledgeable about college programs, policies, and procedures.
- Accept responsibility for your decisions.
- Check your ECOM account regularly.

Assistance with Issues Involving Disabilities

Western Illinois University is dedicated to providing equal opportunity and access for every student. It is important that if you feel that you need accommodations for a learning or physical disability that you make your advisor aware of these accommodations. In some cases, your advisor may refer you to the Disability Resource Center (DRC located in 143 Memorial Hall) for assistance. The staff of DRC provides a broad range of supportive services in an effort to ensure that the individual needs of each student are met. In addition, the DRC staff functions as an advocate for students with disabilities on the Western campus. Through active involvement with all areas of the University, the office is able to monitor conditions relevant to students with disabilities and to provide help with decisions affecting their quality of life.

Anti-Harassment Policy per Official University Policy

I. Policy Statement

Western Illinois University strives to provide an educational and working environment that is free from harassment for faculty, staff, and students. We are committed to providing an environment that values diversity and emphasizes the dignity and worth of every individual, an environment in which every individual is treated with respect. Harassment in any form is contrary to these goals and fundamentally at odds with the core values of Western Illinois University. Harassment is unacceptable and will not be tolerated. Incidents of harassment will be met with appropriate disciplinary action, up to and including separation or dismissal from the University. Any action taken as a result of a violation of this policy will be in accordance with the relevant collective bargaining agreements or University policies.
II. Prohibited Conduct

A. Harassment

It is the policy of Western Illinois University that all faculty, staff, and students work and study in an environment that is free from harassment based on race, color, religion, ethnicity, national origin, sex, sexual orientation, age, disability, marital status, or veteran status.

The University defines harassment as verbal or physical conduct that denigrates or shows hostility toward an individual because of his/her race, color, religion, ethnicity, national origin, sex, sexual orientation, age, disability, marital status, or veteran status, and that:

- has the purpose or effect of creating an intimidating, hostile, or offensive environment;
- has the purpose or effect of unreasonably interfering with an individual's work, study, or participation in University activities; or
- otherwise adversely affects an individual's opportunities.

Harassing conduct includes:

- epithets; slurs; negative stereotyping; or threatening, intimidating, or hostile acts that relate to race, color, religion, ethnicity, national origin, sex, sexual orientation, age, disability, marital status, or veteran status;
- written or graphic material that denigrates or shows hostility or aversion toward an individual or group because of race, color, religion, ethnicity, national origin, sex, sexual orientation, age, disability, marital status, or veteran status and that is displayed on walls, bulletin boards, or other public locations.

B. Sexual Harassment

The University will not tolerate sexual harassment of any member of the campus community and will investigate all allegations of sexual harassment. Where sexual harassment is found, steps will be taken to end it immediately. In those instances where it is determined that an individual has sexually harassed another, that individual will be subject to appropriate discipline in accordance with relevant collective bargaining agreements and University policies. The level of discipline will depend on the severity of the harassment. If the investigation reveals a pattern of harassing behavior, or the conduct is aggravated, probation or termination may be appropriate.

Pursuant to Title VII of the Civil Rights Act of 1964 and Title IX of the Educational Amendments of 1972, "sexual harassment" is defined as:

Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature, when:

1. submission to such conduct is made either implicitly or explicitly a term of an individual's employment or status in a course, program, or activity;
2. submission or rejection of such conduct by an individual is used as the basis for employment or education decisions affecting such individual; or
3. such conduct has the purpose or effect of interfering with the individual's work or educational performance; or of creating an intimidating, hostile, or offensive working and/or learning environment; or of interfering with one's ability to participate in or benefit from an educational program or activity.

Examples of Sexual Harassment

Examples of behavior and conduct that constitute sexual harassment may include, but are not limited to, the following:

- physical assault;
- direct or implied threats that submission to sexual advances will be a condition of employment, work status, compensation, promotion, grades, or letters of recommendation;
- sexual advances, physical or implied, or direct propositions of a sexual nature. This activity may include inappropriate/unnecessary touching or rubbing against another, sexually suggestive or degrading jokes or comments, remarks of a sexual nature about one's clothing and/or body, preferential treatment in exchange for sexual activity, and the inappropriate display of sexually explicit pictures, text, printed materials, or objects that do not serve an academic purpose;
- a pattern of conduct, which can be subtle in nature, that has sexual overtones and is intended to create, or has the effect of creating, discomfort and/or humiliation of another; or
- remarks speculating about a person's sexual activities or sexual history, or remarks about one's own sexual activities or sexual history, that do not serve a medical or academic purpose.

C. Other Violations of the Anti-Harassment Policy

Other violations of this policy include retaliation against a person who has made a report or filed a complaint alleging harassment, or participated as a witness in a harassment investigation; or disregarding, failing to investigate adequately, or delaying investigation of allegations of harassment, when responsibility for reporting and/or investigating harassment charges comprises part of one's supervisory duties.

To make deliberate false accusations of harassment violates this policy. In such instances, the complainant will be subject to disciplinary action. However, failure to prove a claim of harassment does not constitute proof of a false and/or malicious accusation.
Non-University visitors, guests, patrons, independent contractors, or clients who violate this policy will be subject to action in accordance with contractual agreements.

III. Supervisory Relationships

No individual who is in a position of authority over another, either in the employment or educational context, has the authority to harass others by virtue of his or her supervisory role. The University does not, in any way, expressly or by implication, condone the harassment of a student or employee by a supervisor.

IV. Prohibition against Retaliation

It is a violation of this policy for students or employees who in good faith report what they believe to be harassment, or who cooperates in any investigation, to be subjected to retaliation. Any student or employee who believes he/she has been the victim of retaliation for reporting harassment or cooperating in an investigation should immediately contact the Affirmative Action Office.

V. Student-to-Student Complaints

Where there is not an employee/supervisor relationship, harassment involving students will be treated as a disciplinary matter and should be reported to the Office of Student Judicial Affairs. In cases where an employee/supervisor relationship exists between two students, the Affirmative Action Officer will work cooperatively with the Office of Student Judicial Affairs in the investigation of harassment allegations.

VI. Responding to Reports of Harassment

Reporting Responsibilities:

Employees should contact the Affirmative Action Office to report any harassment they experience, witness, or which is reported to them. No student or employee should assume an official of Western Illinois University knows about a situation or incident. Students and employees should report all incidents of harassment immediately.

Investigation and Resolution:

All reports of harassment will be promptly investigated and appropriate action will be taken as expeditiously as possible. Investigations will be conducted in accordance with the University's Discrimination Complaint Procedures. Complaints of harassment should be reported as soon as possible after the incident(s) in order to be most effectively investigated. The University will make reasonable efforts to protect the rights of both the complainant and the respondent. The University will respect the privacy of the complainant, the individual(s) against whom the complaint is filed, and the witnesses in a manner consistent with the University's legal
obligations to investigate, to take appropriate action, and to comply with any discovery or disclosure obligations required by law. The University encourages any person who feels he or she has been harassed to report the incident to the appropriate supervisor or the Affirmative Action Officer. Any student, faculty member, or employee who knows of, receives information about, or receives a complaint of harassment should report the information or complaint to the Affirmative Action Officer. Administrators and supervisors must report incidents of harassment that are reported to them to the Affirmative Action Officer in a timely manner.

Allegations of harassment will be investigated in accordance with the University's Discrimination Complaint Procedures. During this process, the Affirmative Action Officer will keep the supervisor/administrator informed of the status of the complaint and will seek input from the appropriate personnel when recommending corrective action. These procedures do not replace the right of complainants to pursue other options or remedies available under the law.

Privacy/Confidentiality:

During the investigation, all individuals involved in the process will keep the information gathered during the investigation private to the extent permitted by state and federal law. The Affirmative Action Officer shall exercise due care in sharing identifiable information about students, staff, or faculty.

**CLINICAL EDUCATION AND FIELD EXPERIENCE**

The NATA and the CAATE requires athletic training students in an accredited AT Program be taught specific competencies. Students admitted to the AT Program at WIU will make a commitment of seven or eight semesters in which to attain the necessary educational competencies.

The competencies will be taught in the classroom and laboratory setting by the faculty athletic trainers or adjunct instructors. These competencies will also be measured in the clinical education courses and athletic environments or clinical settings by the faculty and staff athletic trainers. The clinical education and field experiences will allow athletic training students to work directly with athletes under the supervision of a Preceptor. These experiences are invaluable in preparing the student for their future professional endeavors.

The Preceptors will evaluate the athletic training student’s skills during the clinical and field experience placements. This component of the student’s education at WIU is a vital element in the all around academic experience and training required for the entry-level professional to acquire supervised clinical hours of hands-on experience.

The following is a breakdown of the clinical and field experiences associated with WIU’s AT Program:

1) Preadmission Requirements:
   a. AT 100: Introduction to Athletic Training
      Initial exposure to the clinical aspect of athletic training is gained through AT 100.
Students will interview the athletic trainers who work at their high schools or hometown sports medicine clinics in order to gain an appreciation of the professional field.

b. AT 110: Prevention and Care of Athletic Injuries
Continued exposure to the field of athletic training is gained through AT 110. This course includes observational/clinical learning experiences in WIU’s intercollegiate athletic training facilities. This course entails a “Student Mentor Program” in which upperclassmen, who have been formally accepted into the professional phase of the program, serve as “mentors,” exemplifying the duties and responsibilities of the athletic training students. Students enrolled in AT 110 are to complete around 30 hours of observation during clinical rotations in which they will shadow an assigned mentor during each rotation.

c. Students reapplying for AT Program admission will be responsible for 15-20 clinical experience observation hours and offered the same opportunity of mentoring as the AT 110 students. See the Reapplication for Admission Policy for further explanation.

2) Post-admission Requirements:
   a. A student who has been formally accepted into the professional phase of WIU’s AT Program must complete a clinical rotation every semester until graduation. These clinical rotations provide a minimum length of time necessary for the athletic training student to develop the competencies expected of the entry-level athletic trainer. This time also allows for opportunities to present themselves for directed supervision and assessment by the Preceptors at each clinical education site.

b. AT 211: Clinical Education and Experience in Athletic Training I
AT 211 is the first clinical education experience for the athletic training student. Due to the little knowledge held at this time by the student, 75% of these hours are observation in nature with guided learning taking place and the other 25% is hands-on. Students will strive to document approximately 160 supervised hours during this clinical education rotation.

c. AT 301: Clinical Education and Experience in Athletic Training II
AT 301 is the second clinical education experience for the athletic training student. As coursework has been completed in previous semesters, students are able to apply more hands-on skills under the direct supervision of a Preceptor. Students should strive to complete approximately 160 supervised hours of clinical experience throughout this semester. Students will also complete a minimum of 8 hours at an orthopedic physician’s office.

d. AT 311: Field Experience in Athletic Training I
AT 311 is the third clinical rotation for students in the AT Program. In the clinical setting, these students may also find themselves paired with an AT 110 student to serve as a mentor for the pre-admission student. Students in AT 311 will now be at 75% of hands-on as compared to 25% of observation. Students will be expected to demonstrate critical decision-making within the realm of their knowledge and experience. Students will strive to complete approximately 160 hours of directed, supervised athletic training experiences and have a second opportunity to spend time with an orthopedic physician, as well as completing a
rotation at the outpatient rehabilitation clinic.

e. AT 401: Field Experience in Athletic Training II
AT 401 is the fourth clinical rotation experience for students in the AT Program. Here the athletic training student is near the end of his/her academic career and is preparing for an Internship assignment and the Board of Certification exam. Students in this clinical rotation may participate in an equipment-intensive (i.e. football) clinical rotation to provide as many opportunities as possible to fine-tune and continue to develop athletic training skills. Students may also assist in any capacity needed to improve on their specific areas of weaknesses identified. Students in this clinical education rotation will strive to minimally fulfill 160 clinical hours of hands-on athletic training skills. Students will also complete the first general medical experience with these hours being provided through either WIU’s Beu Health Center and an internal medicine physician in the community.

NOTE: Athletic training students entering the fall equipment-intensive rotation should plan on reporting to the Preceptor during the week of August 1st or the pre-season date determined by the Preceptor. During this pre-season reporting time, students may complete CPR recertifications, orientation, as well as other possible in-service trainings.

f. AT 411: Athletic Training Professional Preparation
AT 411 is the final clinical education course students in the AT Program must take. Here the athletic training student prepares for Internship and the BOC examination. This is the culminating clinical education component that challenges students in all the previous competencies learned during their academic career in WIU’s AT Program. Students in this clinical rotation may participate in an equipment-intensive (i.e football) clinical rotation to provide as many opportunities as possible to fine tune and continue to develop athletic training skills. Students may also assist in any capacity needed to improve on their specific areas of weaknesses identified. Clinical hours will vary depending on the Preceptor that they are placed with. Students in this clinical will also spend hours of observation with the second general medical rotations as well as experience at the McDonough District Hospital Emergency Room Department.

NOTE: The off-site clinical education rotations will be scheduled throughout the day, afternoon, and potentially evening hours. These planned rotations will not conflict with the academic schedule of the student as the Clinical Education Coordinator will specifically plan each student’s rotation based on their academic commitments.

3) Culminating Experience:
AT 420: Internship
All athletic training students shall complete their academic career by fulfilling an Internship experience. This falls under the academic course of AT 420 and is a 12 credit load. Each student will locate an Internship site and work in a similar capacity of an entry-level athletic trainer for 12 weeks of full-time employment, under the direct supervision of an AT. There are no formal clinical competency evaluations done during the Internship experience as the student has completed all curricular requirements prior to being cleared for Internship. All students must be in good standing with the AT Program, Department, and University to be
cleared for the Internship experience. See Retention Policy and Graduation Policy for further clarification.

NOTE: Since the AT Program is a professional education program, students will need to remain flexible with their time to participate fully in laboratory sessions, clinical education rotations, and internships. Most students are unable to maintain regular employment during enrollment in the program.

CLINICAL EDUCATION ROTATION SITES

Below are sites that WIU’s AT Program has affiliations with:
- Macomb High School
- McDonough District Hospital Outpatient Rehabilitation
- McDonough District Hospital Emergency Room Department
- Dr. David Miller’s Office
- Dr. Drake White’s Office
- Dr. Ronald Wheeler’s Office
- Beu Health Center
- Advanced Rehab and Sportsmedicine
- Baldwin Chiropractic Center

CRITERIA FOR SUCCESSFUL COMPLETION OF EACH AT PROGRAM SEGMENT

1. Admission – Prerequisites:
   - AT 100
   - AT 110
   - Anatomy & Physiology I
   - Major GPA 3.00
   - Cumulative GPA 3.00
   - Passed all 1st yr Competencies
   - Evaluations - WIU Athletic Trainers
   - TB/QFT Test
   - Background Check Acknowledgement
   - ATS Acceptance Agreement
   - Technical Standards Form
   - Observation hours of clinical experience
   - Submit an Academic Progress Sheet
   - Submit an AT Program Application
   - Submit 2 Letters of Reference
   - Submit one-page Essay
   - Blood Borne Pathogen Training
   - Passed all 1st yr Proficiencies
   - Completed Physical
   - Hep B Vaccination/Declination
   - CPR & FA certifications
   - ATS Policy Verification Form
   - Background Check

2. Didactic (Classroom) Experiences include the following courses:
   - AT 200
   - AT 210
   - AT 211
   - AT 300
   - AT 301
   - AT 305
   - AT 310
   - AT 311
   - AT 315
   - AT 401
   - AT 403
   - AT 405
   - AT 410
   - AT 411
   - AT 420
   - KIN 147
   - KIN 247
   - KIN 270
   - KIN 291
   - KIN 292
   - KIN 293
   - PHYS 100
   - KIN 359
   - KIN 391
   - KIN 392
   - KIN 394
   - HS 250
   - FCS 109
   - KIN 291
   - FCS 109
   - KIN 292
   - KIN 293
   - PHYS 221
3. Laboratory Experiences include the following courses:

- AT 200
- AT 210
- AT 300
- AT 305
- AT 310
- AT 315

4. Clinical Education Experiences include the following courses:

- AT 211
- AT 301
- AT 311
- AT 401
- AT 411

PLEASE NOTE:

- Each clinical education course is a prerequisite for the next level.

- All clinical education course competencies must be passed as per the individual course level requirements (See specific syllabi per course).

- The written and practical competency examination at the end of every clinical education courses must be passed with a 70% overall mastery or the student will be denied the opportunity to move forward in the program. A student who fails to pass the two sections of the clinical comp exam will be assigned an “F” for the clinical education course and be required to repeat the clinical education course at its next offering that is in line with the appropriate course sequencing (i.e. fall or spring). Once the student demonstrates the ability to pass the comps at 70%, they are cleared to move to the next level.

- If the student fails the clinical education course, the course must be taken in the same sequence in order to match the competencies that are associated with the specific course. For example, if AT 301 was failed in the spring offering, then the student is required to reenroll in AT 301 in the following spring semester to complete the course in the appropriate sequence. The student will not be allowed to register for new athletic training courses until they are able to demonstrate a 70% competency level on the clinical education comp exams which are measuring past courses the student has completed.

5. Internship Experience

- AT 420

6. Other:

- Maintain scheduled hours every semester.
- Abide by the policies and procedures of the AT Program.
- Attend all meetings and in-services called by the AT Program.
- Complete an annual TB risk assessment and attend an annual blood borne pathogen training.
- Schedule an appointment with the Academic Advisor every semester.
PROGRAM ADMISSION

The AT Program at WIU is a selective program in that students must apply for formal acceptance into the professional phase of the curriculum once having met the prerequisite criteria. The program can accommodate approximately 75 students and will be consistent in using a 5:1 ratio of students to athletic trainers in the field experiences.

Students are encouraged to apply for admittance to the AT Program as a second semester freshmen. Students with higher academic standing may apply and will be given equal consideration, but must be willing to make a commitment to the program of at least 7 semesters. This is the minimal amount of time needed to attain the experience and education required to satisfy all the competencies and proficiencies required of an entry-level professional. The admission materials are explained and provided in the AT 110 course.

Entry into the AT Program is not guaranteed upon completion of the prerequisites. Other determining factors include: the success of the pre-admittance experience, meeting all academic prerequisites, completion of the application and review process, and professionalism.

Selection is centered on academic achievement and athletic training experiences. Academic achievement involves completion of courses in the athletic training major. Also factored into the selection process is the overall grade point average and evaluations from supervising Preceptors. The AT Program is a demanding program that consists of various clinical education experiences outside of the classroom setting. Therefore, a rigorous selection process has been developed in order to select the most well prepared and committed candidates to enter the program.

TRANSFER/CHANGE OF MAJOR STUDENTS

Transfer students, and students who have changed their major to athletic training will be considered for admission into the AT Program. These students may be able to complete the program in a seven semester academic plan, depending on the number of General Education requirements that were previously fulfilled. Transfer/Change of Major students may apply for formal AT Program admission at the end of their first semester at WIU, if having met all of the requirements as listed in the “Admission Requirements to the AT Program”. Transfer/Change of Major students, regardless of their current academic standing, must complete all required coursework of the AT Program.

If a transfer student has courses that are considered WIU equivalent courses to any of the AT Program required courses (clinical competencies contained in them), then the department academic advisor and Program Director must review the request for course transfer. All courses with competencies in them must be taken at WIU, therefore, all transfer substitutions of AT Program required courses are denied. A student can write an appeal to the department for a transfer substitution. If the student requests to appeal for a transfer substitution has been denied, then the student must agree to an exam that will satisfy the course competencies prior to granting the course substitution. The student applying for an appeal of a transfer substitution must pass the specific course content area exam with a 70% passing score. If the student fails to achieve the 70% passing score, they must enroll in the required course at WIU.
STUDENT-ATHLETES

Students who aspire to enter the AT Program and who are on, or planning to be on, one of WIU’s intercollegiate teams must be aware that the clinical education component of the AT Program requires a commitment to service learning hours during afternoons, evenings, and weekends causing a conflict between the sport demands and the clinical education requirements. The AT Program faculty supports the ability for student-athletes to participate on an intercollegiate team while completing their athletic training degree. However, graduation in a timely manner may be at risk if the student is unable to obtain enough quality clinical education experiences that will help prepare him/her to become an entry-level athletic trainer. See the Student-Athlete Policy for AT Program guidelines.

ADMISSION REQUIREMENTS & APPLICATION PROCESS

*Refer to the Admission Requirements to the AT Program Policy

Western Illinois University’s AT Program may accept up to 15 students each semester. Each prospective student is required to apply for admission by the end of the semester in which the prerequisites will be completed. The application process is explained and discussed in both the AT 100 and AT 110 classes. The materials for application are provided to students in the AT 110 course, and are on the WIU AT Program website. Students with a higher academic standing may apply and will be given equal consideration, with the understanding that they must complete the entire academic plan for their specific situation. Please be sure to meet with your academic advisor for appropriate course selections. A listing of the specific criteria for program application and acceptance is in the Policy and Procedures section of the Handbook.

The AT Program Review Committee will be responsible for the selection of qualified candidates to enter the AT Program. The AT Program Review Committee is comprised of AT Program faculty, full-time athletic trainers through the Athletics Department, the Kinesiology Department Academic Advisor, a student from the Department of Kinesiology (in matters of a disciplinary nature), and the Kinesiology Department Chair (in matters of a disciplinary nature). A rating form for admission is used to objectively measure each candidate’s admission criteria (See Admission Requirements Policy for rating scale information). Each admission criteria has a point value associated with it as noted on the Final Rating Form for Admission.

In the event that there are more qualified applicants than can be accommodated by the program, those applicants with the highest point total will be accepted into the AT Program. In the event that there are students with the same point total, the student with the higher grade point average in all coursework will be admitted. Students will be notified, in writing, of the outcomes of their application in a timely manner and will begin their athletic training experience in the following semester.

Students who are not accepted into the program may reapply for admission the following semester, or may appeal the denial through the appeals process (See Appeals Policy). Anyone denied admittance and who intend to reapply, should schedule a meeting with the AT Program Director within the first two weeks of the following semester. Students who fail to submit all of the admission materials for admission into the AT Program will not be considered. Students are
encouraged to review the various policies of the AT Program, located at the end of the AT Program Handbook and on Western Online.

The admitted student will then be given the first semester as an AT 211 level student to prove that they can withstand the rigor of the program. If at the end of the first semester, the student falls below the minimum GPAs in either the overall or the major, the student may be placed on Program Probation or dismissed. All evaluations from field supervisors and coursework will be reviewed prior to a dismissal decision being made.

APPLICATION MATERIALS FOR THE AT PROGRAM

A prospective athletic training student must submit the following materials to apply to the WIU AT Program:
1. Completed application by November 1st or April 1st.
2. Essay by November 1st or April 1st, (accompanies the Application).
3. Two letters of reference by November 1st or April 1st (sent directly to AT Program by reference)
4. A physical is required to be on file with the Program Director by the start of the following semester. The physical confirmation form needs to be filled out and submitted to the Program Director (see Note below). The cost of the physical exam is the responsibility of the student.
5. Signed Technical Standards form by November 1st or April 1st.
6. Completed immunization forms needs to be filled out and handed in by the following semester. The cost for the required immunizations is the responsibility of the student.
7. Academic Progress Grade Sheet.
8. Clinical education rotation observation hours.
9. First aid and CPR certification cards must be on file with the Program Director at the start of the semester admission is in effect.
10. Background check acknowledgement form.
11. Background check must be on file with the Program Director at the start of the semester admission is in effect.
12. Insurance form completed

All materials (as noted above) are required before a decision on your acceptance can be made. The grade point averages (major and cumulative) will be obtained by the Program Director once semester grades are posted. The admitted student will then be given the first semester as an AT 211 level student to prove that they can withstand the rigor of the program. If at the end of the first semester, the student falls below the minimum GPAs in either the overall or the major, the student may be placed on Program Probation or dismissed. All evaluations from field supervisors and coursework will be reviewed prior to a dismissal decision being made.

NOTE: A physical examination can be obtained by one of the physicians on campus (Beu Health Center). There is a fee associated with the physical examination from the Beu Health Center physician. The physical should reflect the demands of the Technical Standards and your general health. The physical form must be signed by the examining physician.
Western Illinois University
Athletic Training Program

Application for Admission
(Please type)

Personal Information:

Date Submitted: ________________

Name: ___________________________________________________________________

                        Last              First              Middle

WIU ID Number: ___________________________________________________________________

Permanent Home Address: ___________________________________________________________________

                        Street              City              State              Zip

Home Phone: (____) ___________________________________________________________________

College Address: (____) ___________________________________________________________________

                        Street              City              State              Zip

College Phone: (____) ___________________________________________________________________

Education:

High School: ___________________________________________ Graduation Date: __________

H.S. G.P.A. (on a 4.0 scale) __________

College/University ___________________________________________ (If applicable)

Total Number of College Semester Hours completed to date: __________________________

Total Number of Semester Hours completed at WIU: _____________________________

Current Overall G.P.A. (on a 4.0 scale): _____________

Current Major G.P.A. (on a 4.0 scale): _____________
**Athletic Training Experience:** Please include all athletic training experience, specific sporting events, clinical experiences, seminars/workshops attended, etc.

**List the duties you performed in previous athletic training experience:**

**Name of the supervising athletic trainer at your school or for the above activities:**

**Extracurricular Activities Prior to College:** Please list all extracurricular activities you have participated in during high school; e.g. athletics, band, choir, community service, etc.

**Certifications:** Please list any certifications you hold; e.g. First Aid, CPR, Certified Personal Trainer, etc.

**Current Organizations & Activities:** Please list any organizations you are a member of or the extra-curricular activities you participate in (Community Clubs, Church Organizations, Fraternities / Sororities, Club Sports, etc) while here at WIU:

**Are you a Member of an Athletic Team at WIU?**

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<tr>
<th>YES:</th>
<th>NO:</th>
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If yes, what sport?

**Do you plan to participate in sports at WIU?**

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<th>YES:</th>
<th>NO:</th>
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If yes, what sport(s)?

**Have you received any Awards or Recognitions?** Please list any awards, scholarships, or special recognitions, etc that you have received:
**Characteristics:** After completing your observation hours here at WIU, what personal and professional characteristics do you think an athletic trainer must possess?

**Personal Qualities:** Based on your personal qualities, describe how you plan to contribute to the WIU Athletic Training Education Program?

**Professionalism:** Professional behavior is a must with athletic trainers and is demanded of all students in the Athletic Training Education Program. Explain your view of professional behavior for an athletic training student regarding the following areas.

- Dress:
- Consumption of alcohol:
- Personal relationships with athletes/coaches:
- Confidentiality:
- Punctually/Dependability:
- Honesty:

**Type of work desired after graduation?**
**Essay:** Please enclose a one page typed essay – see Essay Instruction Form for further details. The essay will be evaluated based on the criteria provided on the instruction form.

**References:** Please list two people from whom you will request completion of our recommendation form, e.g. athletic trainer, coach, counselor, or teacher. These people should be able to speak on your behalf academically and/or professionally.

1. __________________________________________
   Name   Position   Work   Phone

2. __________________________________________
   Name   Position   Work   Phone

All Application materials must be submitted to:

Renee L. Polubinsky, EdD, ATC, CSCS, CES
Director of Athletic Training Education
Western Illinois University
Brophy Hall 220B
1 University Circle
Macomb, IL 61455

_I understand that application to the Athletic Training Program is an opportunity that is not available to every student. I am granting my permission for the Athletic Training Program Review Committee to discuss my academic records as part of the review process. By making application, I understand that the information that I will receive regarding the decisions of the Athletic Training Program Review Committee will consist of whether I am granted or denied acceptance into the Athletic Training Program. I understand that information regarding my final rankings in relation to other candidates and discussions of the committee members is confidential. I also understand the application materials are the property of the Athletic Training Program and will not be provided to me following the committee’s decisions. Upon request, I may review my academic file following the decision made by the Athletic Training Program Review Committee._

Applicant
Signature: _________________________________    Date: __________________

**NOTE:** If accepted into the AT Program a Polo shirt is provided to you. Please circle the size that you would prefer:

   SM    MED    LG    XL    XXL
Western Illinois University
Athletic Training Program
Application for Admission

ESSAY INSTRUCTION FORM

As part of the Application and Admission process for the AT Program, you must write a brief essay which includes:

1. Your interests in athletic training.
2. Why you wish to be considered for a position as an athletic training student in the Western Illinois University undergraduate Athletic Training Program.
3. Your long-term career goals.

Each section will have a point value associated with it for a total of 15 possible points. This essay is one area of admission criteria for which you will be evaluated. The following is a breakdown of the points assigned to each area of the essay.

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<thead>
<tr>
<th>Points Available</th>
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<tbody>
<tr>
<td>1. Essay is typed (1 pt)</td>
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<td>2. Essay is 1½ to double-spaced (1 pt)</td>
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<td>3. Essay uses a Times New Roman font (1 pt)</td>
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<tr>
<td>4. Essay uses a 12 point font (1 pt)</td>
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<td>5. Essay has one inch margins (1 pt)</td>
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<td>6. Essay is one complete page in length (1 pt)</td>
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<tr>
<td>7. Essay is free of spelling and grammar errors (1/4 pt off for each error)</td>
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<tr>
<td>8. Essay answers the questions of:</td>
</tr>
<tr>
<td>a. Interest in athletic training (3 pts)</td>
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<tr>
<td>b. Desire for admission into AT Program (3 pts.)</td>
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<tr>
<td>c. Long-term career goals (3 pts)</td>
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Western Illinois University
Athletic Training Program

Letter of Reference

To the Applicant: Please write your name in the space provided, complete the section regarding your right to review the letter provided by your reference, and then give this form to the individual who has agreed to complete it. It is always helpful if you provide the reference with the completed return envelope. The letters of recommendation should be sent to:

Reneé L. Polubinsky, EdD, ATC, CSCS, CES
Director of Athletic Training
Western Illinois University
Brophy Hall 220B
1 University Circle
Macomb, IL 61455

Name of Applicant: _____________________________________________________

Under the Family Educational Rights and Privacy Act of 1974, students are given the right to inspect their records, including their letters of recommendation, unless they have waived their right to review. You have the option of waiving your right to access this letter of recommendation or decline to waive that right. Some people prefer not to complete a recommendation form unless the student has waived their right to review. Comments provided by the reference are maintained in confidence and can be a great assistance in determining the suitability of the candidate’s admission to the program. Regardless of your decision, your application will be given full consideration based on all of the information in your application file. Therefore, please complete the statement below:

____ I do  ____ I do not    waive my right of subsequent access to this recommendation form.

Applicant’s Signature: ___________________________  Date: ______________

To the Evaluator: Your assistance is requested in evaluating this applicant’s qualifications for admittance into the Athletic Training Program at Western Illinois University. Please evaluate the candidate on the qualities that are listed below. Additional comments are also appreciated. This form must be completed and returned by _________________ to insure the candidate’s consideration for the program.

1. How long have you known the applicant? _________________________________

2. What is your relationship to the applicant? (e.g., employer, teacher, supervisor, friend) _______________________________
3. What is your occupation? ________________________________________________

4. Please check in the appropriate column your evaluation of the applicant’s characteristics, as listed below.

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<thead>
<tr>
<th>Characteristic</th>
<th>Outstanding (Top 5%)</th>
<th>Excellent (Top 15%)</th>
<th>Above Average (Top 25%)</th>
<th>Average (25-50%)</th>
<th>Below Average (Bottom 50%)</th>
<th>No Opportunity To Observe</th>
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<tr>
<td>Intellectual Ability</td>
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<td>Acceptance of Responsibility</td>
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<td>Initiative—does tasks without being asked</td>
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<td>Emotional Maturity</td>
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<td>Integrity/Honesty</td>
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<td>Attendance &amp; Promptness</td>
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<td>Ability to work with peers</td>
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<td>Ability to communicate orally</td>
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<td>Sense of humor</td>
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<td>Writing Skills</td>
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<td>Ethics/Standards</td>
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<td>Potential as a Leader</td>
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5. Please use the rating scale for the following areas:

I. Preparation to succeed at the college level:
   Low Preparation 1 2 3 4 5 6 7 8 9 10

II. Ability to work independently:
   Needs Constant Supervision 1 2 3 4 5 6 7 8 9 10
III. Leadership Ability:

<table>
<thead>
<tr>
<th>Not Demonstrated</th>
<th>Excellent Leader</th>
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<td>1 2 3 4 5 6 7 8 9 10</td>
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IV. Ability to work well in groups:

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<tr>
<th>Low</th>
<th>High</th>
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<td>1 2 3 4 5 6 7 8 9 10</td>
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V. Ability to succeed as a medical professional:

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<th>Low</th>
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<td>1 2 3 4 5 6 7 8 9 10</td>
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VI. Overall, I would rate this candidate:

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<th>Low</th>
<th>High</th>
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<td>1 2 3 4 5 6 7 8 9 10</td>
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6. Admission to the Athletic Training Program at Western Illinois University is a competitive process. Please elaborate on the strengths or characteristics of this applicant that you feel would make him/her successful in the field of athletic training. (Use the space below, write on back, or attach an extra sheet)

7. Recognizing that everyone can improve him or herself professionally and personally, please describe the areas that you feel the applicant could improve upon.
8. Overall Recommendation:

- Highly Recommend
- Recommend
- Recommend with Reservations
- Do not Recommend

Name: ________________________________

Title/Position: ________________________________

Name of Institution/Business: ________________________________

Address: ________________________________

Phone: ________________________________

Signature: ________________________________ Date: __________

Thank you for your valuable time and thoughts in completing this confidential recommendation form. Please return in the envelope provided.
WESTERN ILLINOIS UNIVERSITY
AT PROGRAM REQUIREMENTS,
EXPECTATIONS, & RESPONSIBILITIES
Acceptance Agreement

Once a student has been formally accepted in the AT Program, an acceptance agreement is presented for signature during the first week of classes in the acceptance semester. Each student is required to read and acknowledge receipt of and acceptance of this agreement as part of the admission criteria. At this same time, students will be given the AT Program Policy and Procedures Informed and Acknowledged Statement Form to complete. The understanding that by providing one’s initials following each Policy and or Procedure, that the student understands and accepts the information provided therein. The following is a sample of the Athletic Training Student Acceptance Agreement and at the start of the Policy and Procedures section is a copy of the AT Program Policy and Procedures Informed and Acknowledged Statement Form.

WESTERN ILLINOIS UNIVERSITY
Athletic Training Program

Athletic Training Student Acceptance Agreement

Congratulations!

You have been formally admitted into the professional phase of the Athletic Training Program at Western Illinois University as an athletic training student. We are depending on you to become a strong academic student and a skilled member of our athletic training staff. Remember, it is a privilege to be a member of this program, not a right. Students must conduct themselves in an exemplary manner at all times. Any misconduct or infraction of a program policy may result in a probation period or dismissal from the AT Program.

Professional Development

Because you have indicated athletic training as your career goal, we will expect you to develop your knowledge and skills in athletic training so that you will be able to fulfill your obligation as an athletic training student. In this way, you will be capable of assuming greater responsibilities as you progress. You are encouraged to join the National Athletic Trainers’ Association (NATA) and the Illinois Athletic Trainers’ Association (IATA) as a student member (go to: www.nata.org for an application or to http://www.illinoisathletictrainers.org/ for the state only application). Professional membership provides student discounts (i.e., conventions, certification exam) and scholarship opportunities.

Personal Qualities

1. Maintain a positive self-image.
2. Be punctual and dependable.
3. Accept constructive criticism from others (i.e., Instructors, preceptors, staff athletic trainers, upper level athletic training students, coaches, & faculty).
4. Remain level-headed and have the ability to use common sense.
5. Be honest and loyal.
6. Demonstrate enthusiasm and eagerness to learn.

**Clinical Education Experience**

The purpose of the clinical education experience is for the student to practice and apply the skills learned in the classroom. Western Illinois University’s intercollegiate athletics will serve as the primary clinical education setting for students. In addition, there are also off-campus clinical education settings (i.e., clinics, doctor's offices, hospital, and high school athletics) for students to learn. These clinical settings serve as essential learning environments where the staff athletic trainers are your instructors (Preceptors). All students must adhere to the following:

1. Athletic training students will commit to a minimum of 800 clinical education hours to service learning.
   a. 1st Semester (AT 211) – Expectation: Students will strive to document approximately 160 supervised hours of clinical experience during this clinical education rotation or about 10 hours/week, but no more than 20. Every student must have one day off per week. Students are assigned to one Preceptor and a clinical education rotation experience with WIU Intercollegiate Athletics.
   b. 2nd Semester (AT 301) – Expectation: Students should strive to complete approximately 160 supervised hours of clinical experience throughout this semester or about 10 hours/week, but no more than 20. Every student must have one day off per week. Students are assigned one Preceptor with two clinical education rotation experiences. Once again, the rotations are with WIU Intercollegiate Athletics and the other will be at an orthopedic physician’s office.
   c. 3rd Semester (AT 311) – Expectation: Students will strive to complete approximately 160 hours of directed, supervised athletic training experiences or about 10 hours/week, but no more than 20. Every student must have one day off per week. Students are assigned to one Preceptor and two clinical education rotation experiences. Once again, the rotations are with WIU Intercollegiate Athletics/or a local high school and the others will be with a second orthopedic physician’s office and at an outpatient rehabilitation clinic.
   d. 4th Semester (AT 401) – Expectation: Students in this clinical education rotation will strive to minimally fulfill 160 clinical hours of hands-on athletic training skills or about 10 hours/week, but no more than 20. Every student must have one day off per week. Students are generally assigned to a football clinical education rotation with one Preceptor. Students will also satisfy the first of two General Medical rotations at either the Beu Health Center or an area Internal Medicine Physician’s office.
e. 5th Semester (AT 411) – Expectation: Students will strive to complete the minimum 800 program hours of hands-on clinical education experiences or strive for 160 hours or about 10 hours/week, but no more than 20. Every student must have one day off per week. Daily hours are required under the direct supervision of a Preceptor. Students are assigned to various clinical education rotation experiences dependent on the identified areas of needed improvement and will be assigned off-site opportunities with a Chiropractor, the McDonough District Hospital Emergency Department, and the second General Medical rotation at either the Beu Health Center or an area Internal Medicine Physician’s office. This is the final semester for clinical competency assessment and experiences.

2. Clinical education rotations will be assigned by the Clinical Education Coordinator.

3. Clinical education hours may begin as soon as the athletic teams report to campus along with the Preceptor. The clinical education hours finish at the same times as the regular academic year, but students are allowed to go longer as long as they are supervised by the Preceptor.

4. These clinical education hours must be directly supervised and signed by a BOC Athletic Trainer who will serve as a Preceptor. It is a shared responsibility to make every clinical education rotation a learning experience.

5. These clinical education hours must be documented properly (refer to instructions) and filed in your permanent records with the Program Director. Refer to AT Student Handbook for instructions. Students are encouraged to keep a separate record of their clinical education hours (i.e., daily planner).

6. Students will be evaluated daily by the staff athletic trainers (Preceptors) and course instructors. Informal meetings with the Preceptor will take place at the beginning, middle, and end of each clinical education rotation.

7. Students may be provided the opportunity to evaluate the Preceptor and their experiences.

8. Students are not intended to take the place of the staff athletic trainers (See Fair Practice Policy).

9. Every student in the clinical education experiences will have a one credit classroom component assigned to each level. Therefore, on one day per week, the specified level of students will return to the AT Program classroom/lab for clinical psychomotor competency assessments. The Instructor will provide a syllabus and explanation of grading/evaluation criteria.

10. If a student has a "paying" job or other responsibilities (i.e., wedding, funeral, study review), please contact the preceptor and AT Program Director immediately. Proper forms (absence request) should be completed for each occurrence.
Confidentiality

Do NOT discuss the health status (i.e., athletic injuries, diseases) of any athlete with anyone. Do NOT leak any information to friends, press, radio, etc. Athletic training students will have a great deal of access to student-athlete's medical records and doctor visits with athletes, which provide excellent educational experiences and should not be misused or abused. Direct all inquiries to the staff athletic trainer, head coach, or sports information department. All public comments about injuries will be handled by the staff athletic trainer, team physician, or coach. All athletic training students must abide by HIPAA (Health Insurance Portability and Accountability Act) privacy and security rules regarding all medical information.

Academic Requirements

With successful completion of our AT Program and some additional course requirements, any student could pursue additional graduate studies in physical therapy, physician assistant, exercise physiology, or any other medical or allied health career. Therefore, there are several academic and retention requirements. These include: a) maintaining a minimum cumulative GPA of 3.00; b) maintaining a minimum Major GPA of 3.00; c) passing all clinical education course competencies at the stated percent passing requirement for each level as per the syllabus for the clinical course; d) maintaining scheduled hours every semester; e) abiding by the policies and procedures of the AT Program; f) attending all meetings and in-services called by the AT Program; g) scheduling an appointment with AT Program Academic Advisor every semester. All students must be in good standing before being cleared for the Internship experience. These requirements will be strictly enforced. Students should make every effort to maintain a "B" or better in all required athletic training courses. Remember, there is a BOC examination that must be taken after graduation, but students are encouraged to sit for the board exam during the last semester prior to graduation. Please refer to the AT Student Handbook for complete descriptions.

If a student is having trouble in his/her classes, make an appointment immediately with the instructor AND the AT Program Director. Do not wait until the end of the semester when it is too late. The academic performance of students is the primary responsibility – the clinical education experience is always secondary. If deemed necessary by the AT Program Director or AT Program Review Committee, a student may be required to attend remedial education to obtain additional assistance in specified areas (See Remedial Education policy).

Probation or Dismissal from the Clinical Education Component

If a student does not maintain the academic requirements of the AT Program or fails to demonstrate a commitment to the clinical education component of the curriculum, they will be placed on probation. Remember that athletic training is a medical profession. A student on probation will not have clinical education hours, may be assigned to remedial education, and be encouraged to obtain tutoring services (See the Probation Policy).
If the academic performance (i.e., academic requirements) does not improve by the semester of Internship placement, the student will not be permitted to move forward in the internship opportunity or graduation. The student has the option to seek options other than athletic training if the academic and graduation requirements will not be met in a timely manner.

**Ethical Principles**

An athletic training student should have pride in his/her professional endeavors. The obligation to act competently calls for higher motivation than that arising from concerns of civil liability or disciplinary penalty. Athletic training students should make every effort to ensure that their services are rendered properly.

1. Athletic training students should neither practice nor condone discrimination on the basis of race, color, sex, age, religion, sexual orientation, or national origin.

2. Athletic training students should not condone, engage in or defend unsportsmanlike conduct or practice.

3. Athletic training students should provide care on the basis of the needs of the individual athlete. They should not discriminate in providing care on the basis of athletic ability.

4. Athletic training students should strive to achieve the highest level of competence. They should use only those techniques and preparations for which they are qualified and authorized to administer.

5. Athletic training students should recognize the need for continuing education to remain proficient in their practice. They should be willing to consider new procedures within guidelines that assure safety.

6. Athletic training students should recognize that personal problems and conflicts may occur which may interfere with professional effectiveness. Accordingly, they should refrain from undertaking any activity in which their personal problems are likely to lead to inadequate performance or harm to an athlete or colleague.

Note: Students who do not conduct themselves in an ethical manner, may be dismissed from the clinical education experience resulting in a failure of the clinical education course. If the breach is serious, it may result in dismissal from the AT Program.

You are to maintain and read the Athletic Training Program Student Handbook available through Western Online. The AT Program Student Handbook contains important information about the AT Program, retention, graduation, as well as all of the policies and procedures, and additional materials to provide you with the tools to be successful in your academic endeavors.
Western Illinois University - Athletic Training Program  
Athletic Training Student Agreement

I, ______________________________________________, hereby ___ ACCEPT   ___ REJECT
(PRINT your name)

the invitation to be formally admitted into the professional phase of the Athletic Training Program at Western Illinois University. By signing this agreement, I acknowledge that I have been advised, read, obtained, and/or completed the following items:

a. Athletic Training Student Handbook. This contains the students’ academic and clinical requirements and responsibilities. It is available through the AT 211 Western Online Website.

b. Verification of Hepatitis B, TB (QFT) test, and other vaccinations. This must be completed prior to clearance for starting the clinical education rotations.

c. Physical examination. This must be obtained before being allowed to begin the clinical education rotations, which are associated with AT Program Clinical Education courses.

d. Standard First Aid and CPR certifications (current). CPR recertification may be provided at the start of each academic year through the AT Program.

e. Technical Standards. Students must read and sign a copy of the Technical Standards.

f. Blood borne pathogen training. This is an annual training that must be completed prior to starting the clinical education rotations.

g. Criminal Background Check. All students must obtain a criminal background check at the beginning of the clinical education experiences.

h. Anyone who wishes to participate on an intercollegiate athletic team at Western Illinois University must formally meet with the Program Director and their coach to complete the student-athlete agreement form. The AT Program is a full-time academic program.

i. Changes in BOC, CAATE, or program requirements. In such cases, all students will be informed and expected to meet the AT Program changes that comply with these requirements, prior to graduation. This information will be given to students by means of providing a handout and/or orally presenting the information in class, or program meetings.

j. Any conditional admission criteria indicated in the acceptance letter (if applicable).

If, at any time, I have questions or concerns pertaining to my status in the AT Program, I know that I should immediately make an appointment with the AT Program Director. I fully understand, agree, and consent to the provisions of the program, and agree to abide by its terms.

If I choose to Reject this agreement, my admission to the AT Program will be denied.

__________________________________________________________________________  ____________
Student’s Signature                                       Date
__________________________________________________________________________  ____________
AT Program Director’s Signature                           Date
OTHER AT PROGRAM REQUIREMENTS, DUTIES, AND EXPECTATIONS

1. Graduation Application:
   During the second semester of the junior year, students must file an application for graduation. It is the responsibility of the student to obtain application materials from the Academic Advisor (AT Program Director) early in the semester. Although the student will be assisted in the completion of the application by their advisor, the student is responsible for submitting the completed application to the Registrar.

2. Required Clinical Education Experiences:
   Each athletic training student must spend time in the athletic training rooms. To be eligible for Internship placement, an athletic training student must have a minimum of 800 hours in the clinical education rotations under the supervision of a Preceptor or athletic trainer in order to demonstrate satisfaction of the clinical competencies. Of these hours, each student must have experienced individual and team sports, an upper extremity high risk injury sport, a lower extremity high risk injury sport, an equipment intensive sport, patients of both sexes as well as non-sport populations, and have done a general medical rotation.

3. BOC Examination:
   It is recommended that all athletic training students who are heading out to complete Internships prepare to take the Board of Certification (BOC) exam prior to departure from campus. This means complete the application materials to sit for the BOC exam and secure the appropriate endorsements. Students are encouraged to review the Candidate Handbook located on the BOC Website. *Students must have the approval of the Program Director before beginning any internship hours at any site.

4. Twenty Hour per Week Rule:
   For a WIU AT Program student to accumulate 800 hours, the student would need to spend approximately 10-15 hours per week in the athletic training room for five semesters. Athletic training clinical education experience hours should not exceed 20 hours per week at any time. A week is defined as Sunday through Saturday. If the student is approaching 20 hours per week, he/she should inform his/her Preceptor so appropriate measures can be taken. The 20 hr/wk rule does not pertain to times when classes are not in session. Students will also be assured to have one day off per week for the clinical education rotations.

5. 800 Hour Minimum:
   The athletic training student should expect to spend many evenings, Saturdays and/or Sundays covering athletic events at WIU or the local high school. Our athletic training students will be expected to travel with athletic teams from Western or the high school when the opportunity arises. Once a student reaches the 800 minimum clinical education hours prior to Internship, the expectation is that the student will remain active in the clinical education experiences up until graduation.

6. Role as Student-Learner:
   Students in the AT Program are responsible for assisting the athletic training staff with all phases of the Athletic Training Program, including care of the student-athletes in the
Intercolligate Athletic Program. Some field experience opportunities outside of WIU will be used to enhance the educational program. The athletic training student will assist the supervising athletic trainer at that site. Assistance may be in the areas of first aid, event/practice coverage, emergency care, evaluation and treatment of injuries, rehabilitation programs, preventative programs, flexibility programs, strength training, and athletic training student education sessions and meetings.

7. Progression with Level of Learning:
Athletic training students at WIU have varying responsibilities depending on their skill level, maturity, and professionalism. Students must stay within the boundaries of their current level of knowledge and skills. Outside rotations are made by the AT Program Clinical Education Coordinator in order to fulfill the requirements of the program.

8. ATEP Meetings and In-Services:
Athletic training students are expected to attend all meetings and in-services called by the AT Program Director. Failure to do so will result in the consequences identified on each clinical education syllabus.

SUCCESSFUL QUALITIES

There are several qualities that will make you successful as an athletic training student in WIU’s AT Program. The following are recommended qualities that will help you be a success:

1. Dependability: Dependability is probably the most important quality we look for in our students. The AT Program and supervising athletic trainers need to know who they can count on. Therefore, being dependable is critical to our success. This also means being punctual for all of the clinical education rotations and off-site experiences as lateness will not be tolerated. Be early.

2. Dedication & Loyalty: The field of athletic training is a demanding profession. Often it requires long hours that often go unrecognized. You must be dedicated to your learning experiences and helping each patient without needing praise or recognition.

3. Follow Directions & Complete Tasks: There may be opportunities in your clinical education and learning experiences when you are asked to take on a special project or simply assist others. A sign of a mature student is one who can take directions and see a project to completion no matter how menial the task may seem.

4. Showing Initiative: Leaders are recognized by many qualities including initiative. One who takes initiative, takes responsibility for their learning and looks for opportunities to assist or to create opportunities with unique ideas.

5. Professionalism: Your every action is under constant scrutiny. Hold yourself with the utmost pride and professional demeanor in all you do. This includes how you carry yourself, your attire, your attitude, and all you say or do. Be honest and sincere and maintain your integrity in all situations. While serving as an athletic training student during the clinical education
rotations, there should not be excessive socializing, flirtatious behavior, or the use of profanity. There will be no tolerance for any athletic training student caught using or in possession of illegal drugs. Also, any student suspected of consuming alcohol prior to reporting to the clinical education rotations will be asked to leave the area immediately and will result in the disciplinary actions as expressed in the clinical education syllabus. Professionalism includes your actions away from campus as well. Never wear WIU Athletic Training clothing out to bars or other places where students may socialize. As a member of WIU's AT Program and a future athletic trainer, you are expected to act in a responsible and mature manner at all times.

6. Ethical Behaviors: Every athletic training student must abide by the NATA Code of Ethics as well as the Standards of Professional Practice. Any violation of the ethical principles or standards of the profession will not be tolerated and may be grounds for failure of the clinical education course and termination from the AT Program.

RESPONSIBILITIES

Accepting a position in WIU's AT Program, athletic training students have certain responsibilities for which they will be held accountable. Remember that you are a reflection of the faculty and staff of the AT Program, of the Kinesiology Department, and of WIU. The following are general responsibilities of all WIU athletic training students:

1. Maintain a professional attitude at all times when representing Western Illinois University.

2. Each semester submit your class schedule so the off-site placements can be arranged by the Clinical Education Coordinator.

3. Be responsible for duties and assignments by completing them. Notify your Preceptor in advance when you will be absent by completing an absence request form and by arranging for coverage of your assignment when you are absent.

4. Maintain confidentiality of all patients at all times.

5. Limitations of responsibility and duties will be given by the faculty/staff athletic trainers; you are held accountable for your actions. Stay within your boundaries of knowledge and skills.

6. It is important to articulate and communicate well with athletes, faculty, staff, coaches, physicians, parents, the Preceptor, and other athletic training students. Foul language is never acceptable.

7. NO prescription drugs shall be distributed to anyone.

8. NO instructions, treatments, or other duties shall be performed unless you are specifically trained and designated to perform those duties and your Preceptor is present.

9. Keep treatment forms and equipment checkout forms up-to-date.
10. Make your best effort to cooperate and assist in the entire AT Program.

11. Each student should strongly consider receiving immunization for Hepatitis B.

12. It is the responsibility of each student to read and understand the Communicable/Infectious Disease Policy. Talk to your Preceptor if you have any questions.

13. Use the proper channels for questions and procedural advice. Never question the appropriateness of care provided by your Preceptor in front of a patient. Wait until an appropriate time to ask your questions of the supervisor. Ask questions but do not challenge.

14. Keep current with athletic training room functions and actively seek improvements in the program. Be a critical thinker, analyzer, and take initiative to improve.

15. Continually work to improve your athletic training skills. Invest your time wisely and you will be rewarded. The only place “success” comes before “work” is in the dictionary.

16. Do not allow patients to treat themselves while in the athletic training facilities and never leave any patients unattended during treatment.

17. NO medical information is to be released to ANYONE at ANYTIME. Please forward to your Preceptor ALL requests for medical information.

18. Maintain sanitary conditions in the athletic training rooms. This means you will have to clean.

19. NO supplies or equipment are to be taken from the athletic training rooms. Please be thrifty with their use.

20. Medical files are NOT to be removed from the athletic training rooms.

21. Your Clinical Education Hours Log sheets should be signed by your Preceptor every day.

22. The Clinical Education Hours Log sheets, Reflective Summaries, and Evaluations are due on the 5th of every month.
TELEPHONE USE

1. Answer the telephone by saying, “Western Illinois University Athletic Training, this is (your name).”

2. Assist the caller if at all possible; do everything you can to help. If you cannot help, ask to take a message. Be sure to get the person’s name, number, and a time to call back. Always write the message down, date the message, and sign your name to the message.

3. Make sure the message gets to the person the caller is trying to reach.

4. Do not use the telephone for long distance or personal calls; this is a business phone.

5. Athletes must ask permission to use the telephone, follow the specific policy of your clinical education rotation site.

6. When using a campus phone to dial an off-campus number, dial 7 before dialing the number.

EDUCATIONAL RESOURCES

Students accepted into the AT Program are invited to utilize the educational resources available in Brophy Hall 220B. There are many items available for athletic training students to review or check out including, journals, books, videos, flashcards, etc. The Athletic Training Student Resource Room is located on the lower level of Brophy Hall right outside the gym. Every athletic training student has access to this room from 7:30 am -10:30 pm through the Brophy Hall Equipment Attendant. You must give her your student ID and she will allow you entrance. See the Program Director for further details and access to these resources.

COMMUNICATION

Communication among the AT Program and students will occur in a variety of methods. Through direct face-to-face communications through meetings and conversations after classes, over the telephone, but most often, email communication will be utilized by the Program Director to communicate with students, faculty, and staff. If at any time, there is a question or concern, please contact the Program Director. The AT Program Director maintains an open door policy and attempts to be accessible for student needs.
AT PROGRAM MEETINGS AND IN-SERVICES

Attendance at AT Program meetings and in-services is MANDATORY. If anticipating an absence, students must complete an absence request form. A student who misses either a called AT Program meeting or in-service is subject to disciplinary actions and consequences as per the clinical education syllabus. See the Retention and Disciplinary Policies for further information and clinical education syllabi.

INJURIES

In the event that an athletic training student would receive an injury while performing the duties expected at the clinical education rotations, he/she must report immediately to his/her Preceptor. The Preceptor of the clinical education rotation will handle the injury and complete an incident form. All students must have an insurance form on file with the AT Program. Depending on the circumstances, the clinical education Preceptor will recommend the follow-up care needed. In all events of injury or sudden illness, the Program Director must be contacted, preferably at the time of the event or closely thereafter.

ATHLETIC TRAINING STUDENT MENTOR PROGRAM

The primary purpose of the student mentor program is to expose the prospective student to the duties and responsibilities of the athletic trainer. The program will also serve as a means by which the student is evaluated for his/her potential as an athletic trainer and as criteria for admission into the AT Program.

Upper classmen, when available, will serve as student “mentors” for the program. From the onset, it is clearly understood that the prospective student (usually from AT 110) is to serve primarily as an observer. Although the student can perform minor duties, discretion should be used in assigning tasks or when allowing the student to assist in tasks.

Guidelines for the Mentor Program:

1. Each AT 110 student will complete a minimum of 30 hours of clinical observation experience. These hours are to be compiled by observing the athletic training rooms at WIU or one of the intercollegiate athletic teams. Students reapplying for admission may complete up to 20 hours and are invited to take part in the Mentor Program.

2. Each student will be assigned to an upperclassman in the AT Program. If there are not enough upperclassmen available, the Clinical Education Coordinator will use discretion and select other suitable program representatives.

3. All hours will be recorded on the Clinical Education Hour Log Sheet and verified by the signature of the upperclassmen student mentor or an athletic trainer.
4. Good judgment on the part of the student is necessary with respect to the attire worn in the athletic training rooms or on the athletic fields of play. See dress code guidelines provided by the Clinical Education Coordinator, or refer to the Dress Code Policy of the AT Program.

5. The manner in which a professional presents himself/herself is essential to the integrity of that person. It is absolutely critical that each student present himself/herself in an exemplary manner. Remember, you are not only representing yourself, but also the AT Program, the Kinesiology Department, and WIU.

6. The AT 110 student will be responsible for writing a summary of clinical observation hours experienced for each assigned rotation. They will also may be invited to evaluate their Student Mentor and the clinical education rotation site they experienced.

Responsibilities of the Student Mentor:

1. To determine an appropriate schedule for clinical observation hours for the assigned mentee.

2. To instruct the student on proper record keeping procedures.

3. To familiarize the student with the athletic training room and supplies.

4. To demonstrate and explain pre- and post-practice management responsibilities.

5. To assist the student in the mastery of AT 110 material and taping/wrapping proficiencies.

6. To verify student clinical observation hours by signing the Clinical Education Hour Log Sheet.

7. To encourage professional participation such as attending ATSA meetings and activities.

8. To always be a professional role model for the future athletic training student.
General Medical Rotation

Responsibilities and Expectations

Responsibilities and Expectations of Athletic Training Students:

1. Use every opportunity as a chance to learn. Students should take every opportunity to participate in their setting. Students must take the initiative to participate through early communication and interactions with the Clinical Education Preceptor. See the “Suggestions for Athletic Training Students While Observing at Beu Health Center” for more ideas on this matter.

2. Conduct yourself as an entry-level professional in all aspects (conversation, attire, professionalism, etc). Your presence may be the most contact a particular person has with a representative of the AT Program. Attire for athletic training students at the General Medical rotation is a collared shirt and dress slacks. See Off-Site Dress Code Policy. Remember that the Beu Health Center is a formal medical facility and your attire should reflect this professional standard.

3. Ask questions when the opportunity arises.

4. During “down” time, take this opportunity to read resource materials available through the medical professional at the Beu.

5. Abide by the Confidentiality clause at all times.

6. Arrive on-time and provide advance notice to both the Clinical Education Coordinator and the Beu Health Center Clinical Education Supervisor if you are to be absent from an assigned observation time. Plan ahead and coordinate your schedule so you may meet all of your commitments. Failure to notify your supervisor appropriately may reflect poorly on their evaluation of you and will affect your clinical education grade.

7. Read the “Suggestions” sheet provided by the Beu Medical Staff.

Responsibilities of Medical Staff:

1. Include the athletic training students in the appropriate medical evaluations.

2. Discuss special conditions with them as well as special populations.

3. Inform the Clinical Education Coordinator or AT Program Director if any student acts in an inappropriate manner.

4. Demonstrate a willingness to answer questions from the athletic training students.

5. Evaluate the AT Program General Medical Clinical Education Rotation experiences.
PHYSICIAN SUGGESTIONS FOR ATHLETIC TRAINING STUDENTS
WHILE OBSERVING AT BEU HEALTH CENTER

Being a student in a clinical discipline can be exciting and challenging. It can also be frustrating and boring. We (the Beu Physicians) have appreciated previous student feedback and offer the following with the hope that it will enhance your clinical experience while you are with us.

Illnesses and injuries are not scheduled events. We have determined that certain clinical situations are not appropriate for observation by athletic training students. These include, but are not limited to, visits regarding STDs (sexually transmitted diseases), highly emotional or personal visits, or visits in which the student-patient requests that a student not be involved in their encounter in our office.

Because of these factors, you may be very busy, or see no patients at all. Most times are somewhere in between. We know how challenging, frustrating, and boring that can be. For these reasons, we expect you to make use of the time in a productive way. All of us have resource materials that we will share with you while you are here. We have audio and video tapes of relevant sports medicine topics. We expect you to come prepared to utilize “down” time when there is no appropriate patient to see. That may involve class reading, homework, etc.

What we do as physicians is sometimes very similar to what an athletic trainer would do. Often it is quite different. If you have questions about why we do, or do not do certain things that you have been trained to do, we encourage you to discuss this with us. We intend to teach you, but as is always the case in education, we often learn from you as well.

As athletic trainers you will be looked to for advice on medical matters other than strictly “sports medicine” matters. Because of your contact with the athletes and the frequency and importance of some conditions, we hope you will have some familiarity with fatigue, stress-related matters, sleep disorders, depression/anxiety problems, headaches, weight changes, eating disorders, asthma and allergies.

We would like to serve as a resource for you if you have specific topics you wish to know more about. We expect you will become familiar with the services that we offer at the Beu Health Center. If you cannot attend a scheduled session we would ask that you let us know. If necessary, we will be glad to reschedule your time with us.

By law and medical ethics, absolute confidentiality about what is seen by the student or health care provider is essential. Violation of this principle will be cause for immediate termination of the privilege of observing in the office. Observing a patient in the office is a privilege granted by the student-patient. It is expected that all athletic training students will dress and act appropriately while in the office observing.
WESTERN ILLINOIS UNIVERSITY
SAMPLE CLINICAL EVALUATIONS
AT 110 – Reflective Summary of Observation Experiences

This form must be typed. Complete sentences are required for your responses.

Name: ____________________________________________ Date (Month/Year) ______________________
Completed: _______________________________________

Observation Experience:

Observation Site: _____Brophy Hall ATR _____Western Hall ATR _____Football ATR

1. Describe your Observation Experience: Summarize the events and learning opportunities you had, including any injuries you witnessed, any injury evaluations you observed, and/or any skills you got to practice while completing your observation hours. Based on your experiences at this observation rotation, also include some insight on the components of athletic training you like most and the components of athletic training you like least and explain why.

2. Based on your answers to #1 above, as well as from any feedback you obtained from your AT Program student mentor and/or supervising Certified Athletic Trainer, where do you feel your strengths & weakness are as they pertain to your pursuits of becoming a student in WIU’s athletic training program?

3. What do you feel are the strengths and weaknesses of the AT Program mentoring program? Explain your responses and provide feedback on how you think we could improve the mentoring program.

4. Overall, How would you rate your skill proficiency this month?

   1 = Not proficient
   2 = Minimally proficient with the skills
   3 = Competent for my level but needs continued practice
   4 = Proficient but not confident with the skills
   5 = Proficient and confident with the skills

5. Please provide some details to support your self-rating for this rotation:

September 26, 2010
Mid-term Preceptor Evaluation of AT Program Student

It is important to the success of our Athletic Training Program that we receive constructive feedback from our Preceptors regarding the pre-professional skills and attributes you have witnessed from our athletic training students. Please take this evaluation seriously and be honest with all responses to help us build an outstanding Athletic Training Program.

Student’s Name: ______________________  Clinical Site: _______

Sport Assignment: _____________________  Date of Rotation: _____

Preceptor: ____________________________

Student Level: AT 211

Student/Preceptor Evaluation Review Date: ____________
Student’s Signature: ________________________________
Preceptor’s Signature: ________________________________

When completing this section of the evaluation please remember that the student is at the AT 211 level and has limited educational experiences at this point (ex. May not have taken or completed courses such as upper extremity, modalities, etc. at this time).

Please describe any strengths the student currently possesses that are enhancing his/her ability as an Athletic Trainer. Please use back of the evaluation if more space is needed.

Strengths: ______________________________________

Recognizing that everyone can improve him or herself professionally and personally, please describe any areas that you feel the student is in need of improvement and any suggestions to help the student successfully make improvement in those identified areas so he or she may become a more effective Athletic Trainer. Saying NONE is unacceptable. Please use back of evaluation if more space is needed.

Areas of Needed Improvement/Suggestions for Improvement: ________________________

__________________________________________

__________________________________________

__________________________________________

__________________________________________

__________________________________________
Please check in the appropriate column your evaluation of the ATS’s characteristics, using the following rating scale as a guide.

- **5=Outstanding**: Student’s characteristics exceed most ATS’s at the 211 level (90<sup>th</sup> percentile & above)
- **4=Strong**: Student’s characteristics are better than most ATS’s at the 211 level (80<sup>th</sup> percentile)
- **3=Average**: Student’s characteristics meet minimal standards as expected for ATS’s at the 211 level (70<sup>th</sup> percentile)
- **2=Needs Improvement**: Student’s characteristics are at a below-average level (60<sup>th</sup> percentile)
- **1=Unsatisfactory**: Student’s characteristics are not acceptable in meeting 211 level expectations (50<sup>th</sup> percentile and below)
- **No Opportunity to Observe**: Student’s characteristics were not observed during the current clinical rotation.

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Rev. 2/20/04
Western Illinois University
Athletic Training Program

End of Clinical Rotation Preceptor Evaluation of AT Program Student

It is important to the success of our Athletic Training Program that we receive constructive feedback from our Preceptor’s regarding the pre-professional skills and attributes you have witnessed from our athletic training students. Please take this evaluation seriously and be honest with all responses to help us build an outstanding Athletic Training Program.

Student’s Name: ________________________  Clinical Site: _________

Sport Assignment: ______________________  Date of Rotation: ______

Preceptor: ____________________________

Student Level: AT 211

Student/ACI or Clinical Supervisor Evaluation Review Date: ___________

Student’s Signature: _____________________________________________

ACI’s or Clinical Supervisor’s Signature: ______________________________

When completing this section of the evaluation please remember that the student is at the AT 211 level and has limited educational experiences at this point (ex. May not have taken or completed courses such as upper extremity, modalities, etc. at this time).

Please describe any strengths the student currently possesses that are enhancing his/her ability as an Athletic Trainer. Please use back of the evaluation if more space is needed.

Strengths: _______________________________________________________

Listed below are the areas of needed improvement that were provided in the mid-term evaluation of this student. Please review these areas of needed improvement and provide evidence of how the student has made progress toward these improvements. If no evidence can be provided and/or the student has not demonstrated an attempted to address these areas of needed improvement, please comment on this. Please provide any feedback that you can. **Leaving this section blank is not acceptable.** Please use the back of the evaluation if more space is needed.

Evaluation of Progress towards Mid-term Areas of Needed Improvement:

__________________________________________
Additional recommendations for Student Improvement (Include behavior qualities as well as knowledge that will help the student become a more effective Athletic Trainer.) Saying **NONE** is unacceptable. Please use the back of evaluation if more space is needed.

Please check in the appropriate column your evaluation of the ATS’s characteristics, using the following rating scale as a guide.

- **5**=Outstanding: Student’s characteristics exceed most ATS’s at the 211 level (*90<sup>th</sup> percentile & above*)
- **4**=Strong: Student’s characteristics are better than most ATS’s at the 211 level (*80<sup>th</sup> percentile*)
- **3**=Average: Student’s characteristics meet minimal standards as expected for ATS’s at the 211 level (*70<sup>th</sup> percentile*)
- **2**=Needs Improvement: Student’s characteristics are at a below-average level (*60<sup>th</sup> percentile*)
- **1**=Unsatisfactory: Student’s characteristics are not acceptable in meeting 211 level expectations (*50<sup>th</sup> percentile and below*)

No Opportunity to Observe: Student’s characteristics were not observed during the current clinical rotation.

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| 5=Outstanding: Exceeds skill, duty, or procedure performance at the 211 level; Meets entry-level standards ($90^{th}$ percentile and above) |
| 4=Strong: Performs the skill, duty, or procedure better than most ATS’s at the 211 level ($80^{th}$ percentile) |
| 3=Average: Meets minimal standards in performing the skill, duty, or procedure as expected for a 211 student ($70^{th}$ percentile) |
| 2=Needs Improvement: Performs the skill, duty, or procedure at a below-average level; close supervision required ($60^{th}$ percentile) |
| 1=Unsatisfactory: Needs additional practice prior to being cleared to perform skill, duty, or procedure on an athlete ($50^{th}$ percentile and below) |
| No Opportunity to Observe: Performance of skill, duty, or procedure was not observed during the current clinical rotation. |

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**Clinical Education Rotation Advancement:** Please check only the most appropriate response that correlates with the ATS’s current progress in their clinical rotation.

____ Demonstrates skills adequate to advance to next level within the clinical education program

____ Should not advance past their present level until improvement in performance is indicated through further work in the athletic training room

____ Progress is not suitable for present level of work and remedial help is necessary outside of the athletic training room

If you were to assign a letter grade for this clinical experience, what would it be? Grade: _____

Rev. 9/30/03
Western Illinois University
Athletic Training Program

Student Evaluation of Preceptor©

It is important to the success of our Athletic Training Program that we receive constructive feedback from our students regarding the experiences you have had under your Preceptor. Your information will remain anonymous; only averaged ratings and general comments will be shared with the Preceptors at the end of the semester to help them improve their clinical rotation and teaching methods while providing quality educational experiences for the students in the Athletic Training Program. Please take this evaluation seriously and be honest with all responses to help us build an outstanding athletic training program.

Preceptor: ___________________  Clinical Site: _____________

Sport Assignment: _________________  Date of Rotation: ________

Student’s Name: _______________________________________________

Preceptor Evaluation

Please circle the number that best describes your Preceptor.

1=Unsatisfactory  2=Needs Improvement  3=Average  4=Strong
5=Outstanding    NA=Not Applicable

Leadership Skills

1. Demonstrates self-confidence  1 2 3 4 5 NA
2. Demonstrates self-respect  1 2 3 4 5 NA
3. Demonstrates respect for athletic training students and others  1 2 3 4 5 NA
4. Promotes respect from others for self and athletic training students  1 2 3 4 5 NA
5. Maintains discipline in a firm and friendly manner  1 2 3 4 5 NA
6. Provides an environment that makes athletic training enjoyable  1 2 3 4 5 NA
7. Motivates the athletic training students  1 2 3 4 5 NA
8. Provides leadership for the athletic training staff  1 2 3 4 5 NA
1=Unsatisfactory  2=Needs Improvement  3=Average  4=Strong  5=Outstanding  NA=Not Applicable

**Professional Behavior**

9. Verbally and actively promotes the athletic training profession
   1 2 3 4 5 NA

10. Assists students in understanding their professional responsibility
    1 2 3 4 5 NA

11. Cares about student learning and professional conduct
    1 2 3 4 5 NA

12. Presents a positive role model for the athletic training students
    1 2 3 4 5 NA

13. Exhibits ethical behavior in a nondiscriminatory manner towards all athletic training students.
    1 2 3 4 5 NA

**Communication, Social Interaction, & Problem Solving**

14. Communicates effectively with athletic training students
    1 2 3 4 5 NA

15. Develops & maintains a positive attitude with athletic training students
    1 2 3 4 5 NA

16. Identifies conflicts & deals with appropriately
    1 2 3 4 5 NA

17. Offers positive reinforcement
    1 2 3 4 5 NA

18. Treats all athletic training students fairly and objectively
    1 2 3 4 5 NA

19. Offers equal learning experiences to all athletic training students
    1 2 3 4 5 NA

20. Maintains emotional control while in the presence of AT students
    1 2 3 4 5 NA

21. Places the welfare of the athletic training student as a priority
    1 2 3 4 5 NA

22. Respects the rights and individual differences of athletic training students and maintains confidentiality between supervisor & student.
    1 2 3 4 5 NA

23. Is friendly, courteous, and approachable, demonstrating a general concern.
    1 2 3 4 5 NA

24. Is concern for my overall welfare; personal and academic
    1 2 3 4 5 NA

**Teaching Abilities & Attributes**

25. Provides constructive feedback to students in a timely manner
    1 2 3 4 5 NA

26. Tactfully corrects students in an appropriate place/location
    1 2 3 4 5 NA

27. Regularly promotes clinical discussion with athletic training students
    1 2 3 4 5 NA

28. Encourages athletic training students to ask questions
    1 2 3 4 5 NA

29. Listens to & addresses the students’ questions and concerns
    1 2 3 4 5 NA

30. Provides orientation and expectations during 1st days of rotation
    1 2 3 4 5 NA

31. Clearly explains & reviews expectations throughout rotation
    1 2 3 4 5 NA

32. Holds all students equally accountable for assignments/duties
    1 2 3 4 5 NA
33. Promotes unity among the staff, students, and program 1 2 3 4 5 NA
34. Takes time to know athletic training students personally 1 2 3 4 5 NA
35. Challenges athletic training students clinically 1 2 3 4 5 NA
36. Promotes critical thinking of the athletic training students 1 2 3 4 5 NA
37. Admits to students when he/she does not know a correct answer to a question 1 2 3 4 5 NA
38. Follows up on his/her lack of knowledge and seeks out correct information 1 2 3 4 5 NA

**Personal Attributes**

39. Acts according to the professional code of ethics and standards 1 2 3 4 5 NA
40. Is an honest person 1 2 3 4 5 NA
41. Is a trustworthy person 1 2 3 4 5 NA
42. Dresses professionally for all events/practices 1 2 3 4 5 NA
43. Requires athletic training students to dress professionally 1 2 3 4 5 NA
44. Promotes positive professional conduct by the athletic training students 1 2 3 4 5 NA
45. Demonstrates passion and excitement about the profession 1 2 3 4 5 NA
46. Demonstrates to the students, passion for his/her work 1 2 3 4 5 NA
47. Takes pride in the appearance of the athletic training room/equipment 1 2 3 4 5 NA
48. Assists students in daily clean-up activities 1 2 3 4 5 NA
49. Is open to new ideas regarding better ways to accomplish goals 1 2 3 4 5 NA
50. Encourages growth in personal & professional skills 1 2 3 4 5 NA
51. Appears active in life long learning by promoting & attending professional conferences and seminars 1 2 3 4 5 NA
52. What is your overall rating of this Preceptor 1 2 3 4 5 NA

53. What qualities does your Preceptor possess that you find helpful? Please use back if more space is needed.

54. What could be done to make your clinical experience more productive? Please use back if more space is needed.
55. Did you have adequate individual attention?  YES  NO

56. Did your Preceptor understand your education level and education needs?  YES  NO

57. Did you have adequate opportunity for communication with your Preceptor to whom you were responsible?  YES  NO

58. How frequently did you receive feedback on your clinical performance?
   Daily      1x /week      2-3x/week      bi-weekly      never      other _________

59. Based on your experience and skill, how would you describe the degree of supervision you received?
   Too close       Commensurate with need       Not close enough

60. Was the Preceptor who was directly responsible to you adequately prepared to answer your questions?  YES  NO

61. Other Comments/Suggestions should be written on the back of this form.

©This evaluation instrument represents a modification of the original instrument that is copy written and is the property of Linda S. Platt, EdD, ATC; Duquesne University, Pittsburgh, PA; platt@duq.edu. Permission has been granted to use the modified form for the ATEP at WIU.
Western Illinois University
Athletic Training Program

Evaluation of a Clinical Education Setting

*Student Assessment Form*

It is important to the success of our Athletic Training Program that the students evaluate the clinical education settings (CES) utilized for WIU’s athletic training field experiences. Evaluations identify valuable information on the strengths and weaknesses of each clinical education setting, assure that CAATE accreditation guidelines are being met, and demonstrate that the athletic training profession is being positively promoted to our athletic training students. These evaluations should be done on a regular basis (minimum 1 evaluation per semester) for any clinical education setting in which an athletic training student is physically engaged in providing athletic training services.

Clinical Education Site: ____________________________  Date of Evaluation: _______

Type of Clinical Education Setting:  
- University Athletic Training Facility  
- High School Athletic Training Facility

Names of Preceptors present: ____________________________

Name of Athletic Training Student completing evaluation: ____________________________

Evaluate the following criteria based on your observations at the above specified site during the above specified date(s). Please circle your evaluation rating based on the following scale:

<table>
<thead>
<tr>
<th>1 = Poor</th>
<th>2 = Fair</th>
<th>3 = Average</th>
<th>4 = Good</th>
<th>5 = Excellent</th>
<th>NA = Not Applicable</th>
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</thead>
</table>

**Learning Environment**

1. CES provides an active learning environment

2. CES provides a variety of stimulating learning experiences

3. CES provides a positive learning environment

4. CES provides ample work space for learning opportunities

5. CES provides a variety of modalities for learning opportunities

6. CES provides a variety of equipment for rehabilitation learning opportunities

**Staff**

1. CES staff encourage active learning

2. CES staff capitalize on “teachable moments”

3. CES staff engage students in evaluations, treatments, etc

4. CES staff promote students as primary care provider
5. CES staff take role as primary provider with student as secondary provider | 1 2 3 4 5 NA
6. CES staff provide positive professional role modeling for students | 1 2 3 4 5 NA
7. CES staff promote positive morale amongst the students and ATCs | 1 2 3 4 5 NA
8. CES staff provide adequate amount of constructive criticism to enhance learning | 1 2 3 4 5 NA
9. CES staff provide adequate amount of positive feedback to reinforce learning | 1 2 3 4 5 NA
10. CES staff evaluate skill proficiency of the students | 1 2 3 4 5 NA
11. CES staff provide direct supervision of students | 1 2 3 4 5 NA
12. CES staff utilize all levels of students to their ability | 1 2 3 4 5 NA
13. CES staff promotes ethical & legal practice | 1 2 3 4 5 NA

**Practice Standards & Guidelines**

1. Effective Student/ATC communication | 1 2 3 4 5 NA
2. Student-to-ATC ratio is adequate to provide good educational experience | 1 2 3 4 5 NA
3. Preceptor(s) available on site for skill proficiency evaluations | 1 2 3 4 5 NA

*Comments or Feedback About Your Clinical Education Setting (Brophy, Western, WIU Football, or High School), Staff, or Practice Standards & Guidelines that you would like to share with the AT Program:*
Western Illinois University  
ATHLETIC TRAINING PROGRAM  

STUDENT EVALUATION OF ON-CAMPUS GENERAL MEDICAL ROTATION©

It is important to the success of our Athletic Training Program that we receive constructive feedback from our students regarding the experiences you have had during your general medical rotation. Your information will remain anonymous; only averaged ratings and general comments will be shared with Dr. Waters and his staff at the end of the semester to help them improve the general medical rotation and their teaching methods while providing quality educational experiences for the students in the Athletic Training Program. Please take this evaluation seriously and be honest with all responses to help us build an outstanding Athletic Training Program. ©This evaluation instrument represents a modification of the original instrument that is copy written and is the property of Linda S. Platt, EdD, ATC; Duquesne University, Pittsburgh, PA; platt@duq.edu. Permission has been granted to use the modified form for the AT Program at WIU.

Student’s Name: ___________________________  
Student’s AT Program Level: ____________

Date of Rotation: ___________________________  
Number of Observational Hours: _________

Please circle the number corresponding with your feelings and beliefs about your on-campus general medical rotation.

1= Unsatisfactory  2= Needs Improvement  3= Average  4= Strong  5= Outstanding  NA= Not Applicable

1. The general medical rotation introduced me to the roles and tasks of other medical and allied health personnel.  
   1  2  3  4  5  NA

2. The general medical rotation introduced me to new observations or experiences specific to different populations outside of athletics.  
   1  2  3  4  5  NA

3. The general medical rotation regularly introduced me to new physical diagnoses of athletic illnesses, general illnesses/conditions, and orthopedic injuries.  
   1  2  3  4  5  NA

4. The general medical rotation introduced me to new injury evaluation and management skills.  
   1  2  3  4  5  NA

5. The overall general medical rotation provided me with a stimulating learning environment.  
   1  2  3  4  5  NA

6. The observation hours obtained in this general medical rotation helped to reinforce concepts I have learned in my athletic training courses.  
   1  2  3  4  5  NA

7. The general medical rotation provided me with valuable educational experiences outside of the athletic training room.  
   1  2  3  4  5  NA

8. The general medical rotation provided me with ample opportunities to discuss topics with physicians and other health care professionals.  
   1  2  3  4  5  NA

9. The physicians involved in my general medical rotation were a valuable resource for my learning experience.  
   1  2  3  4  5  NA
1. Describe what you have learned about the organization and administration of medical care delivered in a general medical clinic.

2. On a scale of 1-10, how would you rate this experience with 1 being poor and 10 being excellent? Please provide an explanation for your rating.

3. Please describe the strengths of the on-campus general medical rotation.

4. Please describe in general, the areas of needed improvement for the on-campus general medical rotation.

5. Please provide any other comments you would like to share about your experiences during this on-campus general medical rotation.

6. Would you recommend that the AT Program continue the use of this on-campus general medical rotation in its requirements of the AT Program’s clinical education? Provide an explanation for your recommendation.

7. Would you recommend that the AT Program extend or maintain the current number of hours spent in completing your on-campus general medical rotation? Provide the amount of time you feel would benefit you in obtaining a meaningful general medical learning experience.
Western Illinois University
ATHLETIC TRAINING PROGRAM

STUDENT EVALUATION OF OFF-CAMPUS GENERAL MEDICAL ROTATION©

It is important to the success of our Athletic Training Program that we receive constructive feedback from our students regarding the experiences you have had during your general medical rotation. Your information will remain anonymous; only averaged ratings and general comments will be shared with Dr. Miller and his staff at the end of the semester to help them improve the general medical rotation and their teaching methods while providing quality educational experiences for the students in the Athletic Training Program. Please take this evaluation seriously and be honest with all responses to help us build an outstanding Athletic Training Program. ©This evaluation instrument represents a modification of the original instrument that is copy written and is the property of Linda S. Platt, EdD, ATC; Duquesne University, Pittsburgh, PA; platt@duq.edu. Permission has been granted to use the modified form for the AT Program at WIU.

Student’s Name: ____________________________  Student’s AT Program Level: _______
Date of Rotation: ____________________________  Number of Observational Hours: _______

Please circle the number corresponding with your feelings and beliefs about your off-site general medical rotation.

1=Unsatisfactory  2=Needs Improvement  3=Average  4=Strong  5=Outstanding  NA=Not Applicable

1. The general medical rotation introduced me to the roles and tasks of other medical and allied health personnel.  
   
2. The general medical rotation introduced me to new observations or experiences specific to different populations outside of athletics.  
   
3. The general medical rotation regularly introduced me to new physical diagnoses of athletic illnesses, general illnesses/conditions, and orthopedic injuries.  
   
4. The general medical rotation introduced me to new injury evaluation and management skills.  
   
5. The overall general medical rotation provided me with a stimulating learning environment.  
   
6. The observation hours obtained in this general medical rotation helped to reinforce concepts I have learned in my athletic training courses.  
   
7. The general medical rotation provided me with valuable educational experiences outside of the athletic training room.  
   
8. The general medical rotation provided me with ample opportunities to discuss topics with physicians and other health care professionals.  
   
9. The physician involved in my general medical rotation was a valuable resource for my learning experience.
1. Describe what you have learned about the organization and administration of medical care delivered in a general medical clinic.

2. On a scale of 1-10, how would you rate this experience with 1 being poor and 10 being excellent? Please provide an explanation for your rating.

3. Please describe the strengths of the off-campus general medical rotation.

4. Please describe in general, the areas of needed improvement for the off-campus general medical rotation.

5. Please provide any other comments you would like to share about your experiences during this off-campus general medical rotation.

6. Would you recommend that the AT Program continue the use of this off-campus general medical rotation in its requirements of the AT Program’s clinical education? Provide an explanation for your recommendation.

7. Would you recommend that the AT Program extend or maintain the current number of hours spent in completing your off-campus general medical rotation? Provide the amount of time you feel would benefit you in obtaining a meaningful general medical learning experience.
Western Illinois University
ATHLETIC TRAINING PROGRAM

STUDENT EVALUATION OF OUTPATIENT REHABILITATION CLINIC ROTATION

It is important to the success of our Athletic Training Program that we receive constructive feedback from our students regarding the experiences you have had during your outpatient rehabilitation rotation. Your information will remain anonymous; only averaged ratings and general comments will be shared with the Advanced Rehab & Sports Medicine Outpatient Rehabilitation Clinic at the end of the semester to help them improve the outpatient rehabilitation rotation and their teaching methods while providing quality educational experiences for the students in the Athletic Training Program. Please take this evaluation seriously and be honest with all responses to help us build an outstanding Athletic Training Program. ©This evaluation instrument represents a modification of the original instrument that is copy written and is the property of Linda S. Platt, EdD, ATC; Duquesne University, Pittsburgh, PA; platt@duq.edu. Permission has been granted to use the modified form for the AT Program at WIU.

Student’s Name: ___________________ Student’s AT Program Level: ___________
Date of Rotation: ___________________ Number of Observational Hours: ___________

Please circle the number corresponding with your feelings and beliefs about your outpatient rehabilitation clinic rotation.

1=Unsatisfactory  2=Needs Improvement  3=Average  4=Strong  5=Outstanding  NA=Not Applicable

1. The rehabilitation rotation introduced me to the roles and tasks of clinical athletic trainers, physical therapists, and other allied health professionals. 1 2 3 4 5 NA

2. The rehabilitation rotation introduced me to new observations or experiences specific to different populations involved and non-involved with athletics 1 2 3 4 5 NA

3. The rehabilitation rotation regularly introduced me to new physical diagnoses of athletic and other orthopedic injuries that required rehabilitation. 1 2 3 4 5 NA

4. The rehabilitation rotation introduced me to new injury evaluation and management skills. 1 2 3 4 5 NA

5. The overall rehabilitation rotation provided me with a stimulating learning environment. 1 2 3 4 5 NA

6. The observation hours obtained in the rehabilitation rotation helped to reinforce concepts I have learned in my athletic training courses. 1 2 3 4 5 NA

7. The rehabilitation rotation provided me with valuable educational experiences outside of the athletic training room. 1 2 3 4 5 NA

8. The rehabilitation rotation provided me with ample opportunities to discuss topics with athletic trainers, physical therapists, and other health care professionals. 1 2 3 4 5 NA

9. The athletic trainers and physical therapists involved in my rehabilitation rotation were valuable resources for my learning experience. 1 2 3 4 5 NA
1. Describe what you have learned about the organization and administration of rehabilitation services delivered in an outpatient rehabilitation clinic.

2. On a scale of 1-10, how would you rate this experience with 1 being poor and 10 being excellent? Please provide an explanation for your rating.

3. Please describe the strengths of the outpatient rehabilitation clinic rotation.

4. Please describe in general, the areas of needed improvement for the outpatient rehabilitation clinic rotation.

5. Please provide any other comments you would like to share about your experiences during this off-campus outpatient rehabilitation rotation.

6. Would you recommend that the AT Program continue the use of this off-campus outpatient rehabilitation rotation in its requirements of the AT Program’s clinical education? Provide an explanation for your recommendation.

7. Would you recommend that the AT Program extend or maintain the current number of hours spent in completing your off-campus outpatient rehabilitation rotation? Provide the amount of time you feel would benefit you in obtaining a meaningful outpatient rehabilitation learning experience.
Western Illinois University  
ATHLETIC TRAINING PROGRAM  

STUDENT EVALUATION OF ORTHOPEDIC ROTATION©

It is important to the success of our Athletic Training Program that we receive constructive feedback from our students regarding the experiences you have had during your orthopedic rotation. Your information will remain anonymous; only averaged ratings and general comments will be shared with Dr. White or Dr. Wheeler at the end of the semester to help them improve the orthopedic rotation and there teaching methods while providing quality educational experiences for the students in the Athletic Training Program. Please take this evaluation seriously and be honest with all responses to help us build an outstanding Athletic Training Program. ©This evaluation instrument represents a modification of the original instrument that is copy written and is the property of Linda S. Platt, EdD, ATC; Duquesne University, Pittsburgh, PA; platt@duq.edu. Permission has been granted to use the modified form for the AT Program at WIU.

Student’s Name: ____________________________  Student’s AT Program Level: ___________

Date of Rotation: ____________________________  Number of Observational Hours: ___________

Please circle the number corresponding with your feelings and beliefs about your orthopedic rotation.

1=Unsatisfactory  2=Needs Improvement  3=Average  4=Strong  5=Outstanding  NA=Not Applicable

1. The orthopedic rotation introduced me to the roles and tasks of a physician/surgeon.  
   1  2  3  4  5  NA

2. The orthopedic rotation introduced me to new observations or experiences specific to different populations involved and non-involved with athletics.  
   1  2  3  4  5  NA

3. The orthopedic rotation regularly introduced me to new physical diagnoses of athletic and other orthopedic injuries.  
   1  2  3  4  5  NA

4. The orthopedic rotation introduced me to new injury evaluation and management skills.  
   1  2  3  4  5  NA

5. The overall orthopedic rotation provided me with a stimulating learning environment.  
   1  2  3  4  5  NA

6. The observation hours obtained during the orthopedic rotation helped to reinforce concepts I have learned in my athletic training courses.  
   1  2  3  4  5  NA

7. The orthopedic rotation provided me with valuable educational experiences outside of the athletic training room.  
   1  2  3  4  5  NA

8. The orthopedic rotation provided me with ample opportunities to discuss topics with a physician/surgeon.  
   1  2  3  4  5  NA

9. The physician/surgeon involved in my orthopedic rotation was a valuable resource for my learning experience.  
   1  2  3  4  5  NA

-OVER-
1. Describe what you have learned about the organization and administration of medical care services delivered in your orthopedic rotation.

2. On a scale of 1-10, how would you rate this experience with 1 being poor and 10 being excellent? Please provide an explanation for your rating.

3. Please describe the strengths of the orthopedic rotation.

4. Please describe in general, the areas of needed improvement for the orthopedic rotation.

5. Please provide any other comments you would like to share about your experiences during this off-campus orthopedic rotation.

6. Would you recommend that the AT Program continue the use of this off-campus orthopedic rotation in its requirements of the AT Program’s clinical education? Provide an explanation for your recommendation.

7. Would you recommend that the AT Program extend or maintain the current number of hours spent in completing your off-campus orthopedic rotation? Provide the amount of time you feel would benefit you in obtaining a meaningful orthopedic learning experience.
Western Illinois University
ATHLETIC TRAINING PROGRAM

STUDENT EVALUATION OF EMERGENCY ROOM ROTATION©

It is important to the success of our Athletic Training Program that we receive constructive feedback from our students regarding the experiences you have had during your emergency room (ER) rotation. Your information will remain anonymous; only averaged ratings and general comments will be shared with the ER director and staff at the end of the semester to help them improve the ER rotation and their teaching methods while providing quality educational experiences for the students in the Athletic Training Program. Please take this evaluation seriously and be honest with all responses to help us build an outstanding Athletic Training Program. ©This evaluation instrument represents a modification of the original instrument that is copy written and is the property of Linda S. Platt, EdD, ATC; Duquesne University, Pittsburgh, PA; platt@duq.edu. Permission has been granted to use the modified form for the AT Program at WIU.

Student’s Name: ____________________________  Student’s AT Program Level: __________
Date of Rotation: ____________________________  Number of Observational Hours: __________

Please circle the number corresponding with your feelings and beliefs about your ER rotation.

1=Unsatisfactory  2=Needs Improvement  3=Average  4=Strong  5=Outstanding  NA=Not Applicable

1. The rotation introduced me to the roles and tasks of an Emergency Room.  1 2 3 4 5 NA
2. The ER rotation introduced me to new observations or experiences specific to different populations involved and non-involved with athletics. 1 2 3 4 5 NA
3. The ER rotation regularly introduced me to new physical diagnoses of athletic and/or other injuries. 1 2 3 4 5 NA
4. The ER rotation introduced me to new injury evaluation and management skills. 1 2 3 4 5 NA
5. The overall ER rotation provided me with a stimulating learning environment. 1 2 3 4 5 NA
6. The observation hours obtained in my ER rotation helped to reinforce concepts I have learned in my athletic training courses. 1 2 3 4 5 NA
7. The ER rotation provided me with valuable educational experiences outside of the athletic training room. 1 2 3 4 5 NA
8. The rotation provided me with ample opportunities to discuss medical topics with ER doctors and/or other medical staff. 1 2 3 4 5 NA
9. The ER staff involved in this rotation was a valuable resource for my learning experience. 1 2 3 4 5 NA

-OVER-
1. Describe what you have learned about the organization and administration of medical care services delivered in your ER rotation.

2. On a scale of 1-10, how would you rate this experience with 1 being poor and 10 being excellent? Please provide an explanation for your rating.

3. Please describe the strengths of the ER rotation.

4. Please describe in general, the areas of needed improvement for the ER rotation.

5. Please provide any other comments you would like to share about your experiences during this off-campus ER rotation.

6. Would you recommend that the AT Program continue the use of this off-campus ER rotation in its requirements of the AT Program’s clinical education? Provide an explanation for your recommendation.

7. Would you recommend that the AT Program extend or maintain the current number of hours spent in completing your off-campus ER rotation? Provide the amount of time you feel would benefit you in obtaining a meaningful ER learning experience.
Western Illinois University
ATHLETIC TRAINING PROGRAM

STUDENT EVALUATION OF CHIROPRACTIC ROTATION

It is important to the success of our Athletic Training Program that we receive constructive feedback from our students regarding the experiences you have had during your chiropractic rotation. Your information will remain anonymous; only averaged ratings and general comments will be shared with Dr. Bruenger at the end of the semester to help him improve the chiropractic rotation and his teaching methods while providing quality educational experiences for the students in the Athletic Training Program. Please take this evaluation seriously and be honest with all responses to help us build an outstanding Athletic Training Program. ©This evaluation instrument represents a modification of the original instrument that is copy written and is the property of Linda S. Platt, EdD, ATC; Duquesne University, Pittsburgh, PA; platt@duq.edu. Permission has been granted to use the modified form for the AT Program at WIU.

Student’s Name: _____________________________  Student’s AT Program Level: __________

Date of Rotation: ____________________________  Number of Observational Hours: __________

Please circle the number corresponding with your feelings and beliefs about your chiropractic rotation.

1= Unsatisfactory  2= Needs Improvement  3= Average  4= Strong  5= Outstanding  NA= Not Applicable

1. The rotation introduced me to the roles and tasks of a chiropractor.  
   1  2  3  4  5  NA

2. The chiropractic rotation introduced me to new observations or experiences specific to different populations involved and non-involved with athletics.  
   1  2  3  4  5  NA

3. The chiropractic rotation regularly introduced me to new physical diagnoses of athletic and/or other injuries.  
   1  2  3  4  5  NA

4. The chiropractic rotation introduced me to new injury evaluation and management skills.  
   1  2  3  4  5  NA

5. The overall chiropractic rotation provided me with a stimulating learning environment.  
   1  2  3  4  5  NA

6. The observation hours obtained in my chiropractic rotation helped to reinforce concepts I have learned in my athletic training courses.  
   1  2  3  4  5  NA

7. The chiropractic rotation provided me with valuable educational experiences outside of the athletic training room.  
   1  2  3  4  5  NA

8. The rotation provided me with ample opportunities to discuss medical topics with a chiropractor.  
   1  2  3  4  5  NA

9. The chiropractor involved in this rotation was a valuable resource for my learning experience.  
   1  2  3  4  5  NA

-OVER-
1. Describe what you have learned about the organization and administration of medical care services delivered in your chiropractic rotation.

2. On a scale of 1-10, how would you rate this experience with 1 being poor and 10 being excellent? Please provide an explanation for your rating.

3. Please describe the strengths of the chiropractic rotation.

4. Please describe in general, the areas of needed improvement for the chiropractic rotation.

5. Please provide any other comments you would like to share about your experiences during this off-campus chiropractic rotation.

6. Would you recommend that the AT Program continue the use of this off-campus chiropractic rotation in its requirements of the AT Program’s clinical education? Provide an explanation for your recommendation.

7. Would you recommend that the AT Program extend or maintain the current number of hours spent in completing your off-campus chiropractic rotation? Provide the amount of time you feel would benefit you in obtaining a meaningful chiropractic learning experience.
WESTERN ILLINOIS UNIVERSITY AT PROGRAM FORMS
## WIU Athletic Training Program – Clinical Education Hours Log Sheet (AT 110)

**Name:** ______________________  **Level:** _____________  **Month/Year:** ___________

<table>
<thead>
<tr>
<th>Date</th>
<th>Sport/Site</th>
<th>Time In</th>
<th>Time Out</th>
<th>Hours</th>
<th>Total</th>
<th>Verification</th>
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<tbody>
<tr>
<td>1</td>
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Athletic Training Student Signature ______________________  Total Hours: ________
**WIU Athletic Training Program – Clinical Education Hours Log Sheet**

Name: ___________________________                          Month/Year: ____________________________

Level: ___________________________                          Preceptor: ____________________________

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**Page 1 Total Hours**

*Clinical hours log sheets are due on the 5th of each month.*

*Hours are to be recorded to the nearest quarter (.00, .25, .50, .75) hour*  
*Travel times cannot be included in hours!*  
*Preceptor signature verification of clinical hours must be obtained on a daily basis*  
*Note: 1 Week = Sunday – Saturday  
*Students should indicate off days/personal days and record 0.00 hrs*  
*FALSIFYING HOURS MAY RESULT IN A “F” FOR THE CLINICAL COURSE GRADE AND MAY LEAD TO IMMEDIATE DISMISSAL FROM THE ATHLETIC TRAINING PROGRAM*
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<th>Hrs Over 20/wk</th>
<th>Preceptor Signature &amp; Date</th>
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Page 2 Total Hours: ________________
Total Accumulated Hours for Month __________

Athletic Training Student Signature & Date: ________________________________

Preceptor Signature & Date: ____________________________________________
Western Illinois University
Off-Site Hours Accumulated

Name: __________________________  Level: ______________

1. Date:_______ Hours:__________ Location/Setting:_______________

AT Signature ___________________________  Date: ______________

Cert. No. ____________  Member No. ______________

2. Date:_______ Hours:__________ Location/Setting:_______________

AT Signature ___________________________  Date: ______________

Cert. No. ____________  Member No. ______________

3. Date:_______ Hours:__________ Location/Setting:_______________

AT Signature ___________________________  Date: ______________

Cert. No. ____________  Member No. ______________

4. Date:_______ Hours:__________ Location/Setting:_______________

AT Signature ___________________________  Date: ______________

Cert. No. ____________  Member No. ______________

Total Hours: ______
Comments:
WIU Athletic Training Program
Field Evaluation Form #1

ATS: ________________________________ Level: 401 FE Due Date: ________________________________

Preceptor: __________________________ Eval Type/Specific Injury: ________________________________

History:

Preceptor’s Rating
___0 = Not acceptable
___1 = Needed moderate assistance
___2 = Needed minimal assistance
___3 = Proficient for student level

Preceptor’s Rating
___0 = Not acceptable
___1 = Needed moderate assistance
___2 = Needed minimal assistance
___3 = Proficient for student level

Observation:

Preceptor’s Rating
___0 = Not acceptable
___1 = Needed moderate assistance
___2 = Needed minimal assistance
___3 = Proficient for student level

Palpation:

Preceptor’s Rating
___0 = Not acceptable
___1 = Needed moderate assistance
___2 = Needed minimal assistance
___3 = Proficient for student level

Preceptor’s Rating
___0 = Not acceptable
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___2 = Needed minimal assistance
___3 = Proficient for student level

Functional Assessment:

Special Tests:

Preceptor’s Rating
___0 = Not acceptable
___1 = Needed moderate assistance
___2 = Needed minimal assistance
___3 = Proficient for student level

Preceptor’s Rating
___0 = Not acceptable
___1 = Needed moderate assistance
___2 = Needed minimal assistance
___3 = Proficient for student level

Dx, Tx, & Plan:

Preceptor’s Rating
___0 = Not acceptable
___1 = Needed moderate assistance
___2 = Needed minimal assistance
___3 = Proficient for student level

Preceptor’s Rating
___0 = Not acceptable
___1 = Needed moderate assistance
___2 = Needed minimal assistance
___3 = Proficient for student level

Documentation:

Preceptor’s Rating
___0 = Not acceptable
___1 = Needed moderate assistance
___2 = Needed minimal assistance
___3 = Proficient for student level

Preceptor’s Overall Assessment Rating (Add scores from each section: total points possible = 21)
___<50% proficiency (1-10 pts) ___60-69% proficiency (13-14 pts) ___80-89% proficiency (17-18 pts)
___50%-59% proficiency (11-12 pts) ___70-79% proficiency (15-16 pts) ___90-99% proficiency (19-20 pts)
___100% mastery (21 pts) ___ Live evaluation (Do not submit Injury Eval/SOAP Note) 

___Mock evaluation (Submit Injury Eval/SOAP Note) – NOT ACCEPTED WITHOUT PERMISSION OF INSTRUCTOR

As indicated by the signatures, this Field Evaluation has been reviewed and discussed between both the student & Preceptor.

Student Signature: __________________________ Date: __________________________

Preceptor’s Signature: __________________________ Date: __________________________
WIU
ATHLETIC TRAINING SERVICES
EVALUATION

Name ___________________ Date ____________ Injury Site: R/L ______________
Referring M.D. __________________________________________________________
Referring DX __________________________________________________________
Treatment ordered ______________________________________________________
Date of injury ______________________ Date of surgery ______________________
Surgical procedure ______________________________________________________

SUBJECTIVE:
Present complaint/ Mechanism: ____________________________________________
______________________________________________________________________
______________________________________________________________________
Pain scale (0-10): _______________________________________________________
Prior related history: ____________________________________________________
______________________________________________________________________
Current medications: ____________________________________________________
Extended medical history: _______________________________________________
______________________________________________________________________
Occupation/Activities: __________________________________________________
______________________________________________________________________
Comments: _____________________________________________________________
______________________________________________________________________
______________________________________________________________________

OBJECTIVE:
General observations: ____________________________________________________
______________________________________________________________________
Posture: ________________________________________________________________
Palpation: ______________________________________________________________
______________________________________________________________________
WIU
ATHLETIC TRAINING SERVICES
EVALUATION CONT’D

AROM:               PROM:

STRENGTH:

Neurological assessment

Circumferential measures:
Location Left Right

Gait/ Biomechanical Assessment:

Special Tests/Comments:

ASSESSMENT:
Goals/Short term:
________________________________________________________________________
________________________________________________________________________

Long Term:
________________________________________________________________________
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Treatment today:
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PLAN: _____________________________________________________________________
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Treatment Recommendation:
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Please sign and give to supervising A.T.

A.T. Student ___________________ A.T. ___________________ Physician ___________________
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# WESTERN ILLINOIS UNIVERSITY
ATHLETIC TRAINING FACILITY
MAINTENANCE/CLEANING LOG

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# WIU ATHLETIC TRAINING SERVICES
## DAILY INJURY LIST

Date: ___________

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<tr>
<th>Name</th>
<th>Sport</th>
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<tbody>
<tr>
<td>No Practice</td>
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<td>Limited Practice (as indicated by Athletic Training Staff)</td>
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<td>Minor Injury - Full Practice</td>
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Comments/Action Required
Name: ____________________________________________

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<th>Verbal Reprimand:</th>
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*Termination from the Athletic Training Program may occur at anytime. It is the right of the athletic training faculty and staff to terminate a student if the infractions are warranted. Breaking the confidentiality rule, being dishonest, or other severe infractions are reasons for termination.*
ATHLETIC TRAINING STUDENT REQUEST FOR ABSENCE FROM CLINICAL EDUCATION EXPERIENCE

This form is to be completed for advance approval for a specific date(s) that is desired off from the clinical education rotation. This form must be submitted two weeks in advance of the date requested off. It is the responsibility of the student to find a suitable replacement to assist with the assigned clinical responsibilities. Once the student completes this form, it is to be submitted to the supervising Preceptor for signature approval, and then given to the Program Director to be filed in the requesting student’s permanent folder.

NAME: ____________________________________________ DATE: _________

Date Requesting Off: ______________________________________________________

Reason for Absence: _______________________________________________________

________________________________________________________________________

Activity: _________________________________________________________________

ATS Replacement: __________________________________________________________

ATS Replacement Signature: ________________________________________________

Requesting ATS Signature: _________________________________________________

________________________________________________________________________

Decision:       Approved (    )     Disapproved (    )

Preceptor’s Signature: _______________________________ DATE: _________

Program Director’s Signature: _______________________________ DATE: _________
WESTERN ILLINOIS UNIVERSITY AT PROGRAM EMERGENCY PROCEDURES
WESTERN ILLINOIS UNIVERSITY
ATHLETIC TRAINING
MEDICAL EMERGENCY PLAN

CHAIN OF COMMAND
Head Athletic Trainer
Assistant Athletic Trainer
Graduate Assistant Athletic Trainer
Senior Athletic Training Student:
- 411
- 401
- 311
- 301
- 211
- 110

EMERGENCY PROCEDURE

Athletic Trainer
- Performs initial evaluation and remains with injured athlete/individual
- Makes decision to consult team physician
- Gives orders for emergency equipment
- Gives orders to activate EMS
- Ask student-athlete IF they want their parents to be informed of circumstances OR use your best judgment according to the situation
- Documenting all information relating to injury and emergency response

Senior Athletic Training Student
- Assists Athletic Trainer
- Calms and reassures athlete
- Directs emergency procedure orders from Athletic Trainer
- If so designated, accompanies injured athlete to hospital

Underclass Athletic Training Student
- Follows instructions of Athletic Trainer
- Retrieves emergency equipment
- Activates EMS (see phone protocol)
- Meet emergency personnel at gate/door and accompany them to injured athlete
  (this person should have any necessary keys to gates/doors in their possession)
PHONE PROTOCOL – Activating the EMS System

Provide the following information:

1. Identify yourself, exact location, & telephone number you are calling from:
   Western Hall  298-1253  Brophy Hall  298-2135
   Brophy Hall Pool  298-1121  Grady Baseball Field  298-1138
2. Explain what happened/situation, or nature of emergency
3. Number of individuals involved and condition of each
4. First aid treatment initiated by athletic trainers or first responders
5. Specific directions as needed to locate the emergency scene
6. **Stay on phone until dispatcher disconnects the call**
7. Return to the injured individual.

Important Things to Remember:

1. Always carry a cell phone with you when you are out at practice/competition/conditioning and away from a land line phone
2. Dialing 911 from a campus land line phone takes you directly to the Public Safety Office, which will then determine if an ambulance is necessary. It is best to call 911 directly from your cell phone or call MDH at 309-837-4500 and ask for the ambulance department and state your emergency.

**EMERGENCY PHONE NUMBERS**

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<tr>
<th>Service</th>
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<tbody>
<tr>
<td>Ambulance</td>
<td>837-4500</td>
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<tr>
<td>Beu Health Center</td>
<td>298-1888</td>
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<tr>
<td>Team Physicians: Dr. Miller</td>
<td>(309) 836-3387</td>
</tr>
<tr>
<td>Western Hall Athletic Training Room</td>
<td>298-1253</td>
</tr>
<tr>
<td>Football Athletic Training Facility</td>
<td>298-2340</td>
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<tr>
<td>Football Equipment Room</td>
<td>298-2339</td>
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<tr>
<td>Vince Grady Field</td>
<td>298-1138</td>
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<tr>
<td>Faculty/Staff AT:</td>
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<tr>
<td>Chad Cerullo (Cell)</td>
<td>309-313-4775</td>
</tr>
<tr>
<td>Molly Reis (Cell)</td>
<td>217-316-6794</td>
</tr>
<tr>
<td>Zach Ruble (Cell)</td>
<td>260-402-2633</td>
</tr>
<tr>
<td>Lindsay Moore (Cell)</td>
<td>405-808-7687</td>
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<tr>
<td>Renee Polubinsky (H)</td>
<td>309-836-5769</td>
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<tr>
<td>Ambulance Service</td>
<td>911</td>
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<td>Fire Department</td>
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<td>Police Department</td>
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All medical emergencies are transported to McDonough District Hospital, the closest Emergency Care & Trauma I Facility

*Western Illinois University Sports Medicine has access to AED devices. An AED will be on site for all competitions. An AED will be accessible from one of the three (3) athletic training facilities for practices. The Athletic Trainer responsible for practice should determine ahead of time where the closest AED is located.*
EMERGENCY PLAN: WESTERN HALL

SPORTS: Basketball (Men’s, Women’s), Volleyball, Track

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) on site for practice and competition, located on 1st floor.

Emergency Communication: Fixed telephone line located in athletic training room office (298-1253) and/or cell phones.

Emergency Equipment: Supplies (AED, Oxygen, trauma kit, splint kit, & spine board) located within Western Hall athletic training facility.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Western Hall is located on University Drive. The emergency entrance is at the east arena bay doors.

- Approaching North on 67 (Lafayette)
- Make left (West) turn at stop light to University Drive
- Continue on University Drive to stop sign
- Make left turn into Q Lot
- Athletic Training Student will be present outside east arena bay doors
EMERGENCY PLAN: FOOTBALL ATHLETIC TRAINING FACILITY

SPORTS: Football/Athletic Training Room/Equipment Room/Locker Room

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) on site for practice and competition, located on 1st floor.

Emergency Communication: Fixed telephone line located in athletic training room office (298-2340).

Emergency Equipment: Supplies (AED, Oxygen, trauma kit, splint kit, & spine board) located within Football Athletic Training Facility.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: The Football Facility is located adjacent to Western Hall on University Drive. The emergency entrance is located at the South end of the building next to the “Football Training Facility” sign.

- Approaching North on 67 (Lafayette)
- Make left (West) turn at stop light to University Drive
- Continue on University Drive to stop sign
- Make left turn into Q Lot
- Continue to “Football Training Facility” sign on right
- Athletic Training Student will be present outside by the facility sign
EMERGENCY PLAN: HANSON FIELD

SPORTS: Football Home Games/Practices; Track & Field Practices/Competitions

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for all organized practices and competitions. During Football home games, Athletic Trainers and Athletic Training Students are on both home and visiting team (host coverage as needed) sidelines; MDs (primary care/sports medicine, orthopedic, internal medicine) on home sideline, ambulance for field of play is positioned inside stadium, medical cart (Gator) is available to transport injured athlete from field. Prior to start of game, Athletic Trainer should meet with EMTs and visiting athletic trainers to review emergency procedures.

Emergency Communication: The Athletic Trainer carries a cellular phone. Fixed telephone line located in stadium press box (298-1138). Additional fixed telephone lines are located in the Football athletic training facility (298-2340) and Western Hall AT facility (298-1253).

1. The WIU staff athletic trainer and/or team physicians, athletic training students will go onto the track or field to evaluate the student-athlete.

2. The staff athletic trainer will make the appropriate hand signals to the sideline personnel

3. During home football games the head athletic trainer or his designee with contact the onsite ambulance EMS crew using a two way radio and relay the emergency information to them.

4. The head athletic trainer or his designee will provide basic life support or first aid until EMS arrives
   • If the injury is a suspected cervical spine injury during a football game the team physician or football graduate assistant will maintain in-line head support while the head athletic trainer performs face mask removal
   • Athletic training students will make sure the emergency area is clear from spectators and players and retrieve and emergency equipment requested
   • The head athletic trainer, graduate assistant football athletic trainer and team physician will assist the EMS crew in spine boarding and loading the student-athlete

5. The football graduate assistant athletic trainer will accompany the student-athlete to the medical facility with their insurance information

6. Once at the medical facility the graduate assistant athletic trainer will call the head athletic trainer with any medical updates.

*During home football games the ambulance crew will be parked in the north end zone on the track, and will have two way radio communications with both sidelines. Western EMS will be responsible for providing first aid and emergency care for the fans and crowds.
**Emergency Equipment:** *Day of Competition:* Supplies (AED, trauma kit, splint kit, crutches) maintained on site on the Northwest end of the track near entrance gait along with other first aid supplies. Additional emergency equipment including spine board is maintained in the Football and Western Hall athletic training facility. University vehicle and motorized cart (Gator) are maintained on site for transportation. **Practice:** Supplies (AED, trauma kit, splint bag, spine board) maintained in Western Hall athletic training facility. Medical kit stocked with first aid supplies is maintained on site.

**Venue Directions:** **Hanson Field** is located South of Western Hall and the Football Training Facility. The emergency entrance is through the front gate at the North side of the Stadium.

- Approaching North on 67 (Lafayette)
- Make left (West) turn at stop light to University Drive
- Continue on University Drive to stop sign
- Make left turn into Q Lot
- Continue through the parking lot onto sidewalk
- Athletic Training Student will be present at gate to direct EMS
EMERGENCY PLAN: ALFRED D BOYER STADIUM

SPORT: Baseball Practice/Competitions

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) on site for all organized practices and competitions. Additional sports medicine staff is available from Western Hall athletic training facility (298-1253) located across the street from stadium.

Emergency Communication: The Athletic Trainer carries a cellular phone. A fixed telephone line is located in Western Hall athletic training facility (298-1253).

Emergency Equipment: Supplies (AED, trauma kit, splint kit, crutches) maintained in Western Hall athletic training facility across the street from stadium. A medical kit stocked with first aid supplies is maintained on site.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Vince Grady Field is located on the corner of University Drive and Western Dive across from Thompson Hall. The emergency entrance is located on the North side of the home dugout.

- Approaching North on 67 (Lafayette)
- Make left (West) turn at stop light to University Drive
- Continue on University Drive to second stop sign
- Make right turn onto Western Drive
- Athletic Training Student will be present at gate to direct EMS
EMERGENCY PLAN: BROPHY HALL GYM

SPORTS: Soccer (practice and game prep), Swimming & Diving, Softball

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for all practices and competitions. Additional sports medicine staff is available from Brophy Hall athletic training facility (298-2135) located across the hall from the gym.

Emergency Communication: Fixed telephone line located in Brophy Hall athletic training room (298-2135).

Emergency Equipment: Supplies (AED, trauma kit, splint kit, crutches) maintained in Brophy Hall athletic training facility across the hall from the gym. Medical kit stocked with first aid supplies is maintained on site in gym.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Brophy Hall Gym is located on the ground level of Brophy Hall. The emergency entrance is located on the East side of the building.

- Approaching North on 67 (Lafayette)
- Make left (West) turn at stop light to University Drive
- Continue on University Drive to Brophy Hall parking lot
- Make right turn into parking lot
- Athletic Training Student will be present at gate to direct EMS
EMERGENCY PLAN: BROPHY HALL POOL

SPORTS: Swimming & Diving Practice and Competitions

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for all practices and competitions. Lifeguard on deck for practice and competition. Additional sports medicine staff is available from Brophy Hall athletic training facility (298-2135) located down the hall from the gym.

Emergency Communication: Fixed telephone line located in swimming office poolside (298-1121); additional fixed line located in Brophy Hall athletic training facility (298-2135).

Emergency Equipment: Supplies (AED, trauma kit, splint kit, crutches) maintained in Brophy Hall athletic training facility down the hall from gym; spine board on pool deck.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Lifeguards will execute water rescue for athlete in water; athletic trainers will initiate care as soon as athlete reaches pool deck.
- Activation of emergency medical system (EMS) – lifeguard will call and flag down Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Brophy Hall Pool is located on the ground level of Brophy Hall. The emergency entrance is located on the West side of the building and access is through the emergency drive.

- Approaching North on 67 (Lafayette)
- Make left (West) turn at stop light to University Drive
- Continue on University Drive to stop sign
- Make right turn into Emergency Drive
- Athletic Training Student will be present at entrance to direct EMS
EMERGENCY PLAN: MacKenzie ALUMNI FIELD

SPORT: Men and Women’s Soccer; Home Competitions

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for all practices and competitions. Additional sports medicine staff is available from Brophy Hall athletic training facility (298-2135) located next to field.

Emergency Communication: Athletic Trainer carries cellular phone. Fixed telephone line located in Brophy Hall athletic training facility (298-2135) next to Alumni Field.

Emergency Equipment: Supplies (AED, trauma kit, splint kit, crutches) maintained in University vehicle parked behind home bench outside of east gate entrance. Spine board and additional equipment maintained in Brophy Hall athletic training facility located next to Alumni Field.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: MacKenzie Alumni Field is located East of Brophy Hall off of University Drive. The emergency entrance is located on the Southwest side of the field through Brophy Parking Lot.

- Approaching North on 67 (Lafayette)
- Make left (West) turn at stop light to University Drive
- Continue on University Drive to Brophy Hall parking lot
- Athletic Training Student will be present at gate to direct EMS
EMERGENCY PLAN: SOCCER PRACTICE FIELDS

SPORT: Men and Women’s Soccer

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for all practices; additional sports medicine staff is available from Brophy Hall athletic training facility (298-2135) located behind the fields.

Emergency Communication: Athletic Trainer carries cellular phone. Fixed telephone line located under video stand (298-1138) at football practice field next to soccer practice fields. Additional fixed telephone line is located in Brophy Hall athletic training facility (298-2135) behind the practice fields.

Emergency Equipment: Supplies (AED, trauma kit, splint kit, spine board, crutches) are maintained in Brophy Hall athletic training facility. Medical kit with first aid supplies is maintained on site. Additional emergency equipment accessible from Brophy Hall athletic training facility located behind the practice fields.

Role of First Responders:
Immediate care of the injured or ill student-athlete
Activation of emergency medical system (EMS)
Emergency equipment retrieval
Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Soccer Practice Fields are located behind (North) of Brophy Hall. The women’s field is the South field and the men’s field is the North field. The emergency entrance is located through the parking lot on the East side of Brophy Hall.

-Approaching North on 67 (Lafayette)
-Make left (West) turn at stop light to University Drive
-Continue on University Drive to Brophy Hall parking lot on right hand side
-Make right hand turn into parking lot
-Proceed through parking lot into grass toward soccer practice fields
-Athletic Training Student will be present by soccer field to direct EMS
EMERGENCY PLAN: Mary Ellen McKee STADIUM

SPORT: Softball Practice and Competitions

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for all practices and competitions. Additional sports medicine staff is available from Brophy Hall athletic training facility (298-2135).

Emergency Communication: Athletic Trainer carries cellular phone. Fixed telephone line located in Brophy Hall athletic training facility (298-2135) located behind the softball field.

Emergency Equipment: Supplies (AED, trauma kit, splint kit, crutches) maintained in Brophy Hall athletic training facility located behind softball field. Medical kit stocked with first aid supplies is maintained on site.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Mary Ellen McKee Stadium is located directly behind Brophy Hall. The emergency entrance is located West of Brophy Hall.

- Approaching North on 67 (Lafayette)
- Make left (West) turn at stop light to University Drive
- Continue on University Drive to stop sign
- Make right hand turn into emergency drive
- McKee Stadium located straight ahead of emergency drive
- Athletic Training Student will be present to direct EMS
EMERGENCY PLAN: TENNIS COURTS

SPORT: Men and Women’s Tennis Practice/Competitions

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for all practices and competitions. Additional sports medicine staff is available from Brophy Hall athletic training facility (298-2135) located next to tennis courts.

Emergency Communication: Athletic Trainer carries cellular phone. Fixed telephone line located in Brophy Hall athletic training facility (298-2135) located next to tennis courts.

Emergency Equipment: Supplies (AED, trauma kit, splint kit, crutches) maintained in Brophy Hall athletic training facility located next to tennis courts. Medical kit stocked with first aid supplies is maintained on site.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Tennis Courts are located West of Brophy Hall. The emergency entrance is located West of Brophy Hall, between the tennis courts and Brophy Hall.

- Approaching North on 67 (Lafayette)
- Make left (West) turn at stop light to University Drive
- Continue on University Drive to stop sign
- Make right hand turn into emergency drive
- Tennis Courts located on left of emergency drive
- Athletic Training Student will be present to direct EMS
EMERGENCY PLAN: WIU HARRY MUSSATTO GOLF COURSE

SPORT: Men and Women’s Golf Practice/Competitions

Emergency Personnel: No Athletic Trainer or Athletic Training Student(s) are present for practices or competitions. The Head Athletic Trainer will be on call for all home golf competitions.

Emergency Communication: Fixed telephone lines located in Golf Pro Shop (298-3676) and Maintenance Shed (298-3588).

Emergency Equipment: A first aid kit with limited supplies maintained in the Golf Course Pro Shop.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Harry Mussatto Golf Course is located north of campus off of Tower Road. Its emergency entrance is at the Clubhouse Parking Lot located off the left side of the road.

- Approaching North on 67 (Lafayette)
- Make left (West) turn on Tower Road
- Continue on Tower Road until you see the golf course located on both sides of the road
- Designated golf course personnel will be waiting at the road to direct EMS to the scene
EMERGENCY PLAN: SPRING LAKE

SPORT: Men and Women’s Cross Country; Home Competitions

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for all competitions.

Emergency Communication: Athletic Trainer carries cellular phone, two-way radios may be used to facilitate communication over course.

Emergency Equipment: Supplies (AED, trauma kit, splint kit, crutches) transported to venue each competition from Western Hall athletic training facility; University vehicle may be utilized to facilitate course coverage.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Spring Lake is located Northwest of campus off of Tower Road. A course map is used to aid in locating an injured athlete.

- Approaching North on 67 (Lafayette)
- Make left (West) turn on Tower Road
- Follow Tower Road approximately three (3) miles
- Make right turn into entrance of Spring Lake
- Athletic Training Student will be present to direct EMS
EMERGENCY PLAN: Macomb High School – Baseball Field

SPORT: Baseball

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for most all practices and competitions. In the event of a medical emergency, the Athletic Trainer, EMT, or First Responder will administer immediate emergency aid to the ill or injured person. If none of the above are present then the head coach will assume responsibility.

Emergency Communication: The Athletic Trainer carries cellular phone. Fixed telephone line located in the athletic training room located behind the baseball field.

Emergency Equipment: An AED is located in the hallway by the west entrance. Ice, immobilizers, vacuum splint kit, and crutches are maintained in home team dugout during events. Medical kit stocked with first aid supplies is maintained on site.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Baseball Field is located directly behind school with the outfield facing Maple Avenue. The emergency entrance is located West of Maple Avenue.

- Approaching West on Grant Street
- Make left (South) turn on Maple Avenue
- Continue on Maple Avenue about .5 miles to entry gate at East Parking Lot
EMERGENCY PLAN: Macomb High School – Softball Field

SPORT: Softball

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for most all practices and competitions. In the event of a medical emergency, the Athletic Trainer, EMT, or First Responder will administer immediate emergency aid to the ill or injured person. If none of the above are present then the head coach will assume responsibility.

Emergency Communication: The Athletic Trainer carries cellular phone. Fixed telephone line located in the Macomb High School Fitness Center located behind the softball field.

Emergency Equipment: An AED is located right inside the doors leading to the gym & fitness center. Ice, immobilizers, vacuum splint kit, and crutches are maintained in home team dugout during events. Medical kit stocked with first aid supplies is maintained on site.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Softball Field is located at the northwest side of the school.

The emergency entrance is located on South Johnson Street.
- Approaching West on Grant Street
- Make left (South) turn on Johnson Street
- Continue on Johnson Street about .5miles to entry gate at West Parking Lot
EMERGENCY PLAN: Macomb High School – Football Field and Track

SPORT: Football, Soccer, Track & Field

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for most all practices and competitions. In the event of a medical emergency, the Athletic Trainer, EMT, or First Responder will administer immediate emergency aid to the ill or injured person. If none of the above are present then the head coach will assume responsibility.


Emergency Equipment: An AED is located right inside the doors leading to the gym & fitness center. Ice, immobilizers, vacuum splint kit, and crutches are maintained in home team dugout during events. Medical kit stocked with first aid supplies is maintained on site.

Role of First Responders:
   - Immediate care of the injured or ill student-athlete
   - Activation of emergency medical system (EMS)
   - Emergency equipment retrieval
   - Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Football/Soccer Field and Track are located at the northwest side of the school. The emergency entrance is located on South Johnson Street.

- Approaching West on Grant Street
- Make left (South) turn on Johnson Street
- Continue on Johnson Street about .5 miles to entry gate at West Parking Lot
EMERGENCY PLAN: Macomb High School – Gym

SPORT: Basketball, Volleyball, Wrestling

Emergency Personnel: Athletic Trainer and Athletic Training Student(s) are on site for most all practices and competitions. In the event of a medical emergency, the Athletic Trainer, EMT, or First Responder will administer immediate emergency aid to the ill or injured person. If none of the above are present then the head coach will assume responsibility.

Emergency Communication: The Athletic Trainer carries cellular phone. Fixed telephone line located in the fitness center across the hall from the gym.

Emergency Equipment: An AED is located in the hallway across from the gym. Ice, immobilizers, vacuum splint kit, and crutches are maintained on the home team bench during events. Medical kit stocked with first aid supplies is maintained on site.

Role of First Responders:
- Immediate care of the injured or ill student-athlete
- Activation of emergency medical system (EMS)
- Emergency equipment retrieval
- Directions for EMS: Open gates, flag down EMS, direct to scene, scene control

Venue Directions: Gymnasium is located on the West side of the school.

- The emergency entrance is located on South Johnson Street.
- Approaching West on Grant Street
- Make left (South) turn on Johnson Street
- Continue on Johnson Street about .5 miles to entry gate at West Parking Lot
WESTERN ILLINOIS UNIVERSITY AT PROGRAM POLICIES & PROCEDURES
Western Illinois University  
Athletic Training Program  

AT Program Policies and Procedures – Informed and Acknowledged Statement Form  

I, ______________________________, hereby ACCEPT, ACKNOWLEDGE RECEIPT OF, and AGREE TO, the following Policies and Procedures of Western Illinois University’s Athletic Training Program. 

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Athletic Training Student  
AT Program Director  

Date  
Date
**POLICY:** Admission Requirements to the AT Program

**PURPOSE:** To provide each prospective athletic training student with information regarding admission requirements and procedures for admission to the AT Program.

**ATTACHMENT:** Final Rating Form

**LAST REVIEWED:** December 2012

**Western Illinois University**  
**Athletic Training Program**  

**Admission Requirements to the AT Program**

Students must meet the following requirements to be considered for admission into the AT Program:

1. Pass course AT 100 – Introduction to Athletic Training.
3. Pass course KIN 290 – Anatomy and Physiology I.
4. Earn a Cumulative Grade Point Average (CGPA) of 3.00 in all coursework.
5. Earn a Grade Point Average in the Major of 3.00.
6. Complete an Academic Progress Grade Sheet.
7. Complete the Athletic Training Program application.
8. Submit two WIU AT Program Reference Evaluation forms from two references.
9. Submit a one-page essay which includes an explanation as to the decision to major in athletic training at WIU.
10. Completed and passed all first year clinical competencies and proficiencies.
11. Clinical education rotation observation hours (approximately 30).
12. Both First Aid & CPR Certification cards (or successful completion of HE 251).
13. Obtain a Criminal Background Check.

The above criteria will be used for admittance into the AT Program. The AT Program Review Committee will be responsible for the selection of qualified candidates to enter the AT Program. The AT Program Review Committee is comprised of AT Program faculty, Department of Athletics full-time Athletic Training staff, the Kinesiology Department Academic Advisor, a student in the Department of Kinesiology, and the Kinesiology Department Chair. A rating form for admission is used to objectively measure each candidate’s admission criteria. Each admission criteria has a point value associated with it as noted on the Final Rating Form for Admission.

In the event that there are more qualified applicants than can be accommodated by the program, those applicants with the highest point total will be accepted into the AT Program. In the event that there are students with the same point total, the student with the higher grade point average in all coursework will be admitted. Students will be notified, in writing, of the outcomes of their application in a timely manner and will begin their athletic training experience in the following semester. Students who are not accepted into the program may reapply for admission the following semester. Anyone denied admittance who intend to reapply, must schedule a meeting with the Program Director within the first two weeks of the following semester.
NOTE: The admitted student is given the first semester as an AT 211 level student to prove that they can withstand the rigor of the program. If at the end of the first semester, the student falls below the minimum GPAs in either the overall or the major, the student may be placed on Program Probation or dismissed. All evaluations from field supervisors and coursework will be reviewed prior to a dismissal decision being made.
Western Illinois University
Athletic Training Program

Rating Form for Admission to the AT Program

1. **AT 100**
   Grade: A = 4   A- = 3.67   B+ = 3.34   B = 3
   B- = 2.68   C+ = 2.35   C = 2   C- = 1.69
   D+ = 1.36   D = 1   D- = 0.7   F = 0

2. **AT 110**
   Grade: A = 4   A- = 3.67   B+ = 3.34   B = 3
   B- = 2.68   C+ = 2.35   C = 2   C- = 1.69
   D+ = 1.36   D = 1   D- = 0.7   F = 0

3. **KIN 290 (A & P)** = 1 Point if passed due to transfer (C or better)

4. **Cumulative GPA**
   Below 3.00 = Denied
   3.00 – 3.15 = 1 3.16 – 3.35 = 2
   4.00 = 6

5. **Major GPA**
   Below 3.00 = Denied
   3.00 – 3.15 = 1 3.16 – 3.35 = 2
   4.00 = 6

6. **Academic Progress Grade Sheet** = 1 Point if Competed

7. **Application** = Denied if Incomplete

8. **Essay** = 15 Points Total (See Essay Instructions for point breakdown)

9. **Two Letters of Reference**
   Highly Recommend = 3  Recommend = 2
   Recommend with Reservations = 1  Do not Recommend = 0

10. **Clinical Rotation Observation Hours**
    31+ = 5  30 = 4  25–29 = 3  20–24 = 2
    15–19 = 1  0–15 = 0

11. **Taping Check-off Sheet**
    75 = 5  72-74 = 4  70–71 = 3  68-69 = 2  0-67 = 0

   **Total Points:**

**Comments:**
POLICY: Athletic Training Program Review Committee

PURPOSE: To provide each prospective and current athletic training students with the responsibilities and actions of the AT Program Review Committee.

LAST REVIEWED: August 2012

Western Illinois University
Athletic Training Program

Athletic Training Program Review Committee

Identification of Members:
1. AT Program Program Director
2. All AT Program faculty
3. All Athletics Department full-time athletic training staff. If the full-time staff member is not available, a graduate assistant athletic trainer may be asked to serve on their behalf.
4. Department of Kinesiology Academic Advisor
5. A Student in the Department of Kinesiology (in matters dealing with a discipline hearing)
6. Kinesiology Department Chairperson (in matters dealing with grievance, discipline, or curricular changes)

Selection Criteria for Members of the AT Program Review Committee:
1. Program Director has responsibility to oversee and administer all aspects of the AT Program.
2. AT Program faculty is responsible for student academic process and all influential matters thereof. Also AT Program faculty can verify student progress and professional demeanor.
3. Athletics AT staff has personal contact with athletic training students and establish professional relationships with them and can therefore speak of their character. The athletic training staff is integral members of the AT Program and provides input in matters concerning the administration of the program.
4. The Kinesiology Academic Advisor has been personally involved with every one of the athletic training students through the advising role and has University knowledge of policies and procedures.

5. The student representative can offer the student perspective on all issues. For all matters of a disciplinary nature, the student cannot be an athletic training student either current or past.

6. The Kinesiology Department Chairperson offers final authorization and approval on all matters and is the direct supervisor for the AT Program Director.

Committee Responsibilities and Duties:

1. Participate in all aspects of the AT Program student selection process.

2. Convene for admission denial appeals hearings.

3. Convene for transfer student appeals hearings.

4. Review all new policies and procedures affecting the AT Program.

5. Convene for disciplinary or grievance hearings regarding all AT Program students.

6. Offer advisement regarding curricular matters.
**POLICY:**  Appeals Process for Students Denied Admission to the AT Program

**PURPOSE:**  To provide athletic training students with an appropriate appeals pathway regarding admission denial to the AT Program.

**LAST REVIEWED:**  July 2004

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**Western Illinois University**  
**Athletic Training Program**

**Appeals Process for Students Denied Admission to the AT Program**

1. Each student has the opportunity to appeal once denied admission into the AT Program.

2. If the student would like to appeal, he/she must first contact the AT Program Director and state the desired intention to appeal.

3. The student and the AT Program Director will set up a meeting to discuss the student’s concerns about the admission denial.

4. The student and the AT Program Director will discuss the reasons for admission denial into the AT Program as determined by the AT Program Review Committee.

5. If the student is not satisfied with the initial meeting and discussion, the student may set up a meeting with the Chair of the Kinesiology Department and the AT Program Director. This meeting will discuss the reasons for denial into the AT Program.

6. A final decision will be made regarding admission denial into the AT Program after meeting with the AT Program Director and/or AT Program Director and Chair of the Kinesiology Department.
POLICY: Reapplication for Admission to the AT Program after Denial due to GPA Criteria

PURPOSE: To provide each prospective athletic training student with information regarding reapplication for admission to the AT Program if they were already denied after the first application attempt.

LAST REVIEWED: June 2011

Western Illinois University
Athletic Training Program

Reapplication Requirements to the AT Program

Any student who was not accepted into the AT Program may reapply the following semester. All students will be given equal opportunity to be admitted into the AT Program. Each denied student will have the opportunity to formally apply the following semester and compete for any available openings in the AT Program with all of the students who are applying that same semester. Students must meet the following requirements to be reconsidered for admission into the AT Program:

1. Earn a Cumulative Grade Point Average (CGPA) of 3.00 in all coursework.

2. Earn a Grade Point Average of 3.00 in the Major (Courses with AT or KIN prefix).

3. Complete an Academic Progress Grade Sheet.

4. Complete the Athletic Training Program Reapplication form.

5. Complete 15-20 clinical education rotation observation hours.

6. Submit two WIU AT Program Reference Evaluation forms from two personal references.

7. Submit a letter to the AT Program Review Committee which includes:
   a) Your genuine desire to be considered for admission to WIU’s AT Program;
   
   b) Why you wish to be admitted as an athletic training student in WIU’s AT Program;
   
   c) How you plan to assure the committee that the academic problems that have restricted your previous admission to the program will not be of concern once admitted;
   
   d) Your current career goals and plans to meet them.
POLICY: Reaplication for Admission to the AT Program after Denial NOT due to GPA

PURPOSE: To provide each prospective athletic training student with information regarding reaplication for admission to the AT Program if they were already denied after the first application attempt.

LAST REVIEWED: August 2011

Western Illinois University
Athletic Training Program

Reaplication Requirements to the AT Program

Any student who was not accepted into the AT Program may reapply the following semester. All students will be given equal opportunity to be admitted into the AT Program. Each denied student will have the opportunity to formally apply the following semester and compete for any available openings in the AT Program with all of the students who are applying that same semester. Students must meet the following requirements to be reconsidered for admission into the AT Program:

1. Earn a Cumulative Grade Point Average (CGPA) of 3.00 in all coursework.
2. Earn a Grade Point Average in the Major of 3.00.
3. Complete an Academic Progress Grade Sheet.
4. Complete the Athletic Training Program Reaplication form.
5. Complete 15-20 clinical education rotation observation hours.
6. Obtain three clinical evaluations, two from supervising ATs and one from a student mentor.
7. Submit two WIU AT Program Reference Evaluation forms. One from a faculty member not associated with the AT Program and one from a personal reference, different from the ones chosen for the initial application.
8. Submit a letter to the AT Program Review Committee which includes:
   a) Your genuine desire to be reconsidered for admission to WIU’s AT Program;
   b) How you plan to assure the committee that the information that was provided to you regarding your denial to the program will not be of concern once admitted;
   c) Your current career goals and plans to meet them.
POLICY: Application for Readmission to the AT Program after Dismissal

PURPOSE: To provide each prospective athletic training student with information regarding application for readmission to the AT Program if they were dismissed.

LAST REVIEWED: June 2011

Western Illinois University
Athletic Training Program

Application for Readmission Requirements to the AT Program

1. Earn a Cumulative Grade Point Average (CGPA) of 3.00 in all coursework.
2. Earn a Grade Point Average in the Major of 3.00.
3. One completed WIU AT Program Reference Evaluation form from a WIU faculty member who is not part of the AT Program.
4. One completed WIU AT Program Reference Evaluation form from a WIU Athletic Trainer.
5. Complete an Academic Progress Grade Sheet.
6. Complete the Athletic Training Program Reapplication form.
7. Interview with the AT Program Review Committee.
8. Submit a letter to the AT Program Review Committee which includes:
   a) Your genuine desire to return to WIU’s AT Program;
   b) Why you wish to be reconsidered for a position as an athletic training student in WIU’s AT Program;
   c) How you plan to assure the committee that the academic problems will not happen again;
   d) What you have learned from the dismissal experience;
   e) Your current career goals and plans to meet them.

NOTE: Any student dismissed from the AT Program a second time will not have another opportunity for readmission.
**POLICY:** Transfer/Change of Major Student Admission

**PURPOSE:** To provide each transfer student with information regarding admission requirements and procedures for admission to the AT Program.

**LAST REVIEWED:** January 2011

Western Illinois University
Athletic Training Program

Transfer/Change of Major Student Admission to the AT Program

Transfer students, and students who have changed their major to athletic training, will be considered for admission into the AT Program. These students may be able to complete the program in a seven semester academic plan, depending on the number of General Education requirements that were previously fulfilled. Transfer/Change of Major students may apply for formal AT Program admission at the end of their first semester at WIU, if having met all of the requirements as listed in the “Admission Requirements to the AT Program”. Transfer/Change of Major students, regardless of their current academic standing, and must complete all required coursework of the AT Program.

If a transfer student has courses that are considered WIU equivalent courses to any of the AT Program required courses (clinical competencies contained in them), then the department academic advisor and Program Director must review the request for course transfer. All courses with competencies in them must be taken at WIU, therefore, all transfer substitutions in AT Program required courses are denied. A student can write an appeal to the department for a transfer substitution. If the student requests to appeal for a transfer substitution that has been denied, then the student must agree to an exam that will satisfy the course competencies prior to granting the course substitution. However, the student applying for an appeal of a transfer substitution must pass the specific course content area exam with a 70% passing score. If the student fails to achieve the 70% passing score, they must enroll in the required course at WIU.
**POLICY:**  Technical Standards for Admission

**PURPOSE:** To verify whether students meet the technical standards with or without accommodation, and to determine appropriate accommodation.

**ATTACHMENT:** Technical Standards Statement Form

**LAST REVIEWED:** January 2011

The Athletic Training Program at Western Illinois University is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The Technical Standards set forth by the Athletic Training Program establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program's accrediting agency (Commission on Accreditation of Athletic Training Education [CAATE]). All students admitted to the Athletic Training Program must meet the following abilities and expectations. In the event a student is unable to fulfill these Technical Standards, with or without reasonable accommodation, the student will not be admitted into the program. 

*Compliance with the program’s Technical Standards does not guarantee a student’s eligibility for the BOC certification exam.*

Candidates for selection to the Athletic Training Program must demonstrate:

1. the ability to assimilate, analyze, synthesize, integrate concepts; problem solve to formulate assessment and therapeutic judgments; and distinguish deviations from the norm.

2. the ability 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.

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.
TECHNICAL STANDARDS STATEMENT FORM

Candidates for selection to the Athletic Training Program will be required to verify they understand and meet these Technical Standards or that they believe that, with certain accommodations, they can meet the standards.

The Western Illinois University Disability Resource Center (DRC) will evaluate a student who states he/she could meet the program’s Technical Standards with accommodation and confirm that the stated condition qualifies as a disability under applicable laws.

If a student states he/she can meet the Technical Standards with accommodation, then reasonable appropriate accommodations will be determined by the DRC in consultation with the student, and disclosed to appropriate personnel via an accommodation letter. A meeting between student, DRC staff, and the Director of the Athletic Training Program may be necessary to determine the essential functions and skills of the program and appropriate accommodations that can be implemented.

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

__________________________________________  _____________
Signature of Applicant                          Date

OR

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 with reasonable accommodation(s). I understand that if I am unable to meet these standards, with reasonable accommodation(s), I will not be admitted into the program.

Please list the accommodations required along with verification from Western Illinois University’s Disability Resource Center.

__________________________________________  _____________
Signature of Applicant                          Date

__________________________________________  _____________
Western Illinois University’s Disability Resource Center  Date
POLICY: Health

PURPOSE: To ensure each athletic training student has been informed of the risk of physical compromise and has been given opportunity to take appropriate preventative measures.

ATTACHMENTS: Completion Confirmation of Physical Exam Form; Medical History Form, Immunization Record, Hepatitis B Vaccination Form; Blood-borne Pathogen Training Verification Form

LAST REVIEWED: August 2013

Western Illinois University
Athletic Training Program

Health Policy

1. Each student must receive a physical examination through the Beu Health Center by the start of the semester admittance applies. The Completion Confirmation of Physical Exam form must be signed by the Health Care Examiner. It is the responsibility of the student to schedule an appointment for the examination at Beu Health Center. Students are expected to obtain all University required immunizations. The cost of the physical examination, follow-up tests, and/or immunizations is the responsibility of the student.

2. Each student must read and acknowledge the Communicable Disease Policy.

3. Each student must read and acknowledge the Technical Standards associated with the AT Program.

4. Each student must have on record the health history form indicating dates of immunizations.

5. Each student is recommended to get a series of Hepatitis B (HBV) vaccinations. This series is highly recommended, but not required. If a student should chose to deny the series, an HBV declination form must be signed.

6. Each student must have an initial QFT test for tuberculosis prior to being allowed to begin their clinical education rotations. Every year thereafter, the student will complete a TB Risk Assessment, administered at the start of each clinical education course. It is the responsibility of the student to schedule an appointment for the QFT test at Beu Health Center and submit this form by the start of the semester. This may be done through Beu Health Center. The cost for this test is the responsibility of the student.

7. Each student must attend yearly blood-borne pathogen training. This is done at WIU at the beginning of each fall semester.
Western Illinois University
Athletic Training Program

Confirmation of Physical Examination, Hepatitis B and TB Screening

Name: ___________________________________________ I.D. #____________________

The above named athletic training student has completed the required physical examination at
Beu Health Center for participation in the CAATE-accredited Athletic Training Program at
Western Illinois University.

1. A health evaluation (physical) of the student has been completed.

2. The results of the student’s health evaluation have been discussed with the student and the
impact their health status will have on their meeting of the Technical Standards of the
Athletic Training Program.

3. The athletic training student has been encouraged to obtain Hepatitis B vaccination and
has had an opportunity to have all questions answered related to Blood-Borne Pathogens, the
Hepatitis B vaccination and involvement in the Athletic Training Program.

The student has decided to:

   Accept Vaccination: ____________ OR   Decline Vaccination: ____________
   (Athletic training student to initial choice for vaccination or declination)

4. The athletic training student has been informed of and made aware of how to access
health services through the Beu Health Center.

5. The athletic training student will obtain an initial QFT blood test for TB screening and
have an annual Risk Assessment Evaluation for TB as required by the Athletic Training
Program. This risk assessment will be separate from the initial physical examination.

The Examiner finds no acute infection, active communicable disease or infective illness that
would inhibit the athletic training student’s contact with patients.

Date: _________________ Examiner’s Signature: _________________________________

Rev 09/24/10 cf
**Beu Health Center/WIU Athletic Department**  
**MEDICAL HISTORY FOR INTERCOLLEGIATE ATHLETES**

Western Illinois University  
Macomb, IL  61455

Phone: 309/298-1888; Fax: 309/298-2188

<table>
<thead>
<tr>
<th>I.D.</th>
</tr>
</thead>
</table>

---

**Last Name** | **First** | **Middle** | **Birth date** | **S. S. #** |
--- | --- | --- | --- | --- |

**FAMILY HISTORY** of sudden death under age 50 due to heart problem, stroke or ruptured blood vessel? Yes____No____

Marfan’s Syndrome? Yes____  No____

**HEALTH HISTORY:** Have you ever had or do you now have: (check each item)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Broken bones</td>
<td>High blood pressure</td>
</tr>
<tr>
<td>Dislocations</td>
<td>Heart murmur</td>
</tr>
<tr>
<td>Severe sprains</td>
<td>Exertional chest pain</td>
</tr>
<tr>
<td>Back injury</td>
<td>Excessive fatigueability</td>
</tr>
<tr>
<td>Brain concussion</td>
<td>Difficulty breathing with exercise</td>
</tr>
<tr>
<td>Knee injury</td>
<td>Exertional dizziness</td>
</tr>
<tr>
<td>Loss of any organ: spleen, kidney, eye, testicle</td>
<td>Current or prior heart problem</td>
</tr>
<tr>
<td></td>
<td>Prior rheumatic fever</td>
</tr>
<tr>
<td>Hearing impairment</td>
<td>Loss of consciousness</td>
</tr>
<tr>
<td>Prior limitation from sports</td>
<td>Seizure disorder</td>
</tr>
<tr>
<td>Fainting/passing out while exercising</td>
<td>Ever hospitalized for injury/illness</td>
</tr>
<tr>
<td>Stinger, burner or nerve injury</td>
<td>Bleeding tendency</td>
</tr>
<tr>
<td>Heat exhaustion or stroke</td>
<td>Stress fracture</td>
</tr>
</tbody>
</table>

**Past other significant illness, injury or disability?** Yes____ No____  Explain: ____________________________

Are you currently taking any prescribed medications or herbal/nutritional supplements or over-the-counter medications? Yes____ No____

Have you used any prescription medications, or non-prescription medicines or supplements regularly in the last 3 months? Yes____ No____

If yes, list name of products: ____________________________

Do you use: alcohol?__________  tobacco?__________  street drugs?__________

**FEMALES:**

Do you or have you used laxatives, diet pills, or diuretics in the past 6 months? Yes____ No____

Have you made yourself vomit to lose weight or get rid of a big meal in the past 6 months? Yes____ No____

Do you skip meals to avoid certain foods? ____________________________

Have you lost weight recently?________________

What method did you use?________________  What is your ideal weight? ____________________________

What is the most you have weighed in the past 4 years?  The least: ____________________________

How many hours a day do you work out? ____________________________

At what age did you start having periods? ____________________________  How regular are your periods? Every ______ days.

Do you have severe menstrual cramps?______ Yes____ No____

Have you ever missed any periods?______ Yes____ No____

Have you ever taken birth control pills?______ Yes____ No____

Have you ever been pregnant?______ Yes____ No____

Do you take calcium supplements?______ Yes____ No____

Do you drink milk or eat other dietary sources of calcium?______ Yes____ No____

The above information is correct to the best of my knowledge and belief.

Date:_____________________  Signature: ____________________________
**BEU HEALTH CENTER**  
WIU, 1 University Circle  
Macomb, IL 61455  
Phone: 309/298-1888; Fax: 309/298-2188

**IMMUNIZATION RECORD**

<table>
<thead>
<tr>
<th>Name</th>
<th>S.S. #</th>
<th>DOB</th>
<th>Last</th>
<th>First</th>
<th>MI</th>
</tr>
</thead>
</table>

Student ID # ___________________


**Type of vaccine**

<table>
<thead>
<tr>
<th>Type of Vaccine</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diphtheria, Pertussis, and Tetanus (DPT)</td>
<td>(Series of three for international students only)</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>Tetanus and Diptheria (Td)</td>
<td>(One required within the last 10 years)</td>
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<tr>
<td>Combined Measles, Mumps, Rubella (MMR)</td>
<td>(One required on or after first birthday)</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Rubella (Red Measles) Live Virus Vaccine</td>
<td>(If individual shots are given, then two required on or after first birthday)</td>
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<tr>
<td>Rubella (German or Three-Day Measles)</td>
<td>(If individual shots are given, then one required on or after first birthday)</td>
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<tr>
<td>Mumps</td>
<td>(If individual shots are given, then one required on or after first birthday)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Hepatitis A Series</td>
<td>(Not Required)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis B Series</td>
<td>(Recommended – not required)</td>
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<tr>
<td>Influenza</td>
<td></td>
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<tr>
<td>Meningitis</td>
<td>(Not Required)</td>
<td></td>
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<tr>
<td>Varicella (Varivax) MSD (Chickenpox)</td>
<td>(Not required)</td>
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</tbody>
</table>

REQUIRED FOR INTERNATIONAL STUDENTS AND DESIGNATED PROGRAMS ONLY. TO BE ADMINISTERED ON CAMPUS OR IN THE UNITED STATES:

<table>
<thead>
<tr>
<th>TUBERCULOSIS (Mantoux method)</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
</tr>
</thead>
<tbody>
<tr>
<td>Skin test given (0.1 ml/5 TU PPD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin test read</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Result in mm</td>
<td></td>
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<td></td>
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<tr>
<td>Chest x-ray taken</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Chest x-ray result</td>
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</table>

Above information needs to be submitted no later than the 10th day of the student’s first semester at WIU. Appropriate medical personnel should fill in necessary dates and verify by signature or stamp below (or other signed documentation of immunizations can be attached).

__________________________________________ Date ____________________

**For office use only:** Date received ________________ Initials ________________
WESTERN ILLINOIS UNIVERSITY
ATHLETIC TRAINING PROGRAM

HEPATITIS B VACCINATION FORM

HEPATITIS B VACCINATION RECORD

Date: _____________

Athletic Training Student: __________________________________________

WIU ID#: __________________

Date of election to receive vaccine: ________________

   Initial shot date: _________________________

   One month from first shot date: ______________

   Six months from first shot date: ______________

Injection Dates:

   Date of first dose: _________________________

   Date of second dose: _______________________

   Date of third dose: _________________________

_____________________________________________________
Signature of Health Care Professional/Date

_____________________________________________________
Health Care Facility/Location

I verify the above information is true.

_____________________________________________________
Athletic Training Student Signature/Date
WESTERN ILLINOIS UNIVERSITY
ATHLETIC TRAINING PROGRAM

BLOOD-BORNE PATHOGEN TRAINING

Name: ____________________________________________________________

Signatures

Year One Date: ________________  ATS: ________________

ACI/AT: _____________________

Year Two Date: ________________  ATS: ________________

ACI/AT: _____________________

Year Three Date: ________________  ATS: ________________

ACI/AT: _____________________

Year Four Date: ________________  ATS: ________________

ACI/AT: _____________________
POLICY: Communicable Disease and Infection Control

PURPOSE: To make athletic training students aware of the risk of communicable diseases and the outcome of contracting a communicable disease while enrolled in the AT Program. Included are specific policies and procedures for infection control.

ATTACHMENTS: In cooperation with the Beu Health Center Staff, various plans, policies, and procedures currently used by WIU’s Beu Health Care Professionals are provided for our guidance. These can be viewed on each clinical’s Westernonline. Some of these include:
- Respiratory Hygiene/Cough Etiquette
- Dressings and Tissues
- Exposure Control for Bloodborne Pathogens
- Hand Hygiene Protocol
- Guidelines for the Prevention of Disease Transmission
- Personal Protective Equipment

LAST REVIEWED: August 2012

Western Illinois University
Athletic Training Program

Communicable Disease and Infection Control Policy

Students enrolled in the Athletic Training Program must be aware of the possibility of being exposed to communicable or infectious diseases. If a student is exposed to a communicable disease in any setting (home, school, community, affiliated site) during the period in which they are enrolled in a clinical education experience, they must immediately report the exposure to their Preceptor, the Clinical Education Coordinator, or the Program Director. The Preceptor, Clinical Education Coordinator, or Program Director will consult with the appropriate health care professional(s) and determine what action should be taken. The student will be excused immediately from their clinical education experience until the current state of the student’s health is determined.

When a student is exposed to a communicable disease they must consult with a physician or nurse practitioner before continuing in their clinical education experience. The outcome of the consultation will determine when the student may return to the clinical education experience.

The Program Director or Clinical Education Coordinator will track the student’s recovery through communications with the AT Program Medical Director. The student will not be permitted to interact with patients until cleared to do so by the supervising physician or health care provider. This medical clearance must be documented in writing and a copy provided to the AT Program Director.
Western Illinois University
Athletic Training Program

Confirmation of Communicable Disease and Infection Control Policy

Name: __________________________________________ I.D. #____________________

The above named athletic training student acknowledges receipt and understanding of the Communicable Disease and Infection Control Policy at Western Illinois University.

Date: _________________ Student’s Signature: _________________________________
**POLICY:** Retention in the ATEP

**PURPOSE:** To make athletic training students aware that they must meet certain requirements to maintain a position in the AT Program. The status of these requirements is verified each semester by the student’s academic advisor or the student’s Preceptor.

**LAST REVIEWED:** June 2011

Western Illinois University
Athletic Training Program

Retention Policy

The following requirements must be met in order to maintain a position in the AT Program:

1. Maintain a minimum of a 3.00 Grade Point Average (GPA) in the major courses.
2. Maintain a Cumulative Grade Point Average (CGPA) of 3.00 or better in all course work.
3. Must pass all clinical education course competencies.
4. Maintain scheduled hours every semester including the off-site rotations.
5. Abide by the policies and procedures of the AT Program.
6. Attend all meetings and in-services called by the AT Program.
7. Receive an annual TB risk assessment and attend an annual blood borne pathogen training.
8. Must renew certification in CPR for the Professional Rescuer annually.
9. Schedule an appointment with the Academic Advisor every semester.
10. Agree to and sign the Athletic Training Student Acceptance Agreement.
11. Agree to and sign the Policies and Procedures Acknowledgement Form.

**NOTE:** If a student fails to meet the above retention criteria, that student will be on a probationary status and be given one semester to make progress towards the required deficient standard(s). Probationary status may also include a suspension from the clinical education rotation opportunities. If the student fails to make progress each semester he/she forfeits their position in the AT Program. (See Probationary Policy)

*Students must be in good standing with the retention criteria prior to being cleared for Internship. If a student fails to be in good standing with all retention requirements before Internship, he/she will be denied enrollment for this culminating experience until all requirements are met.*
POLICY: Probation in the ATEP

PURPOSE: To ensure all athletic training students are aware of the probationary policy as it relates to the ATEP.

LAST REVIEWED: June 2011

Western Illinois University
Athletic Training Program

Probationary Policy

1. Any student who fails to meet the retention standards or commits an act that the AT Program Review Committee feels violates the Professional Behaviors Policy will be on probation status within the AT Program.

2. If a student’s GPA drops below the 3.00 but remains greater than 2.75, then the student is placed on probation.

3. If a current student is on a probationary status and fails to make progress towards the deficient retention standard(s) within the following semester, that student will then be dismissed from the AT Program.

4. If the student is on probation due to the failure to maintain the minimum GPA (cumulative &/or major), he/she will be suspended from the clinical education rotation experiences. The student must demonstrate progress toward the minimum GPA(s) level every semester. If the student fails to make progress toward the minimum GPA(s) every semester he/she will be dismissed from the AT Program.

5. If a student’s GPA (overall or Major) drops below 2.75, the student will be dismissed from the program.

6. A student that is on probationary status cannot actively participate in AT Program or Athletic Training Student Association (ATSA) organized functions.

7. A student that is on probationary status forfeits his/her position as a board member on the ATSA until removed from the probationary status.

8. A student on probation can be required to attend remedial education sessions or be required to attend University offerings regarding student success/study skills if deemed appropriate by the Program Director.

9. A student on probation due to the failure to meet the minimum GPA(s) (cumulative or major) will not be cleared for the Internship experience.
POLICY: Remedial Education in the AT Program

PURPOSE: To ensure all athletic training students are aware of the remedial education policy as it relates to the AT Program.

LAST REVIEWED: August 2007

Western Illinois University
Athletic Training Program

Remedial Education Policy

Any athletic training student who has been placed on probation, demonstrated difficulty in achieving a 70% proficiency on the clinical education assessments and comprehensive examinations (see Retention Policy or Handbook), or obtained the minimum grade point averages, may be subjected to remedial education work. This can be recommended by the Athletic Training Program Review Committee at the time of admission or by the Program Director at any time throughout the student’s academic career in the AT Program.

1. Students recommended for remedial education must attend the times and dates as assigned by the Program Director.

2. During the remedial education sessions, student will be expected to participate in the remedial education assigned activity session.

3. The activities for the remedial education sessions may be guided study, specific course tutoring, University tutoring, or clinical education skill practice and review.

4. A student is only assigned the remedial education sessions for one semester. If it is believed by the Program Director, student, or AT Program Review Committee that the student would benefit from continued attendance in the remedial education sessions, such may be recommended. This recommendation for continued remedial support would be of a voluntary nature by the student rather than required.

5. The Program Director has the right to reduce clinical education rotation hours and to limit or eliminate athletic team travel.

6. If a student fails to show for a remedial education session, they will be subject to the disciplinary actions of the AT Program (see disciplinary actions policy).

7. Only the Program Director or AT Program Review Committee can excuse the student from completing an entire semester of remedial education.

8. A student can appeal (through a written request to the AT Program Review Committee) the decision of the Program Director or AT Program Review Committee for required attendance in the remedial education sessions.
POLICY: Confidentiality

PURPOSE: To ensure understanding of confidentiality in a health care setting and to enforce confidentiality among athletic training students.

ATTACHMENTS: Confidentiality Statement Form, Clinical Instructor/Supervisor Confidentiality Agreement, and Permission to Discuss Academic Records

LAST REVIEWED: August 2007

Western Illinois University
Athletic Training Program

Confidentiality Clause

The Athletic Training Program at Western Illinois University is an allied health care provider and is directly supervised by a physician. Consequently, the need for patient confidentiality is a critical component of maintaining and adhering to professional health care standards. A patient’s record of treatment is a confidential matter and should only be discussed with the health care providers associated with the treatment.

Confidentiality of the student-athlete’s medical records must be maintained. No records are to leave the athletic training room. Any questions or concerns from the press or professional scouts must be directed to the head athletic trainer or designated athletic trainer. Any questions or concerns from a coach should be handled in a professional manner. If medical records are needed for a case study, then a Student-Athlete Medical Records Release Form must be filled out and approved by both the athlete and staff athletic trainer. This form gives access to the medical records of only the athlete noted on the form. The records still may not be taken out of the facility or photocopied.

Failure to adhere to this policy could result in legal action against the student or the University. It is the policy of the AT Program to discipline all individuals who violate this confidentiality clause. The athletic training student must maintain confidentiality of every patient. If a violation of confidentiality would occur, termination from the AT Program is permissible immediately. The AT Program Review Committee will determine the punishment based on the severity of the breach of confidentiality.
Confidentiality Statement Form

MEDICAL RECORDS CONFIDENTIALITY ACKNOWLEDGEMENT

I. __________________________________, have been informed and understand that information concerning treatment of patients is confidential and is not to be disclosed to any person or entity without appropriate patient authorization, subpoena, or court order. As a condition of my clinical education, I agree that I will not directly or indirectly disclose said information without proper authority and I specifically agree with the following requirements:

I. I will avoid any action that will provide confidential information to any unauthorized individual or agency.

II. I will not review medical records or files for which I have no authorization.

III. I will not make copies of any medical records or data except as specifically authorized.

IV. I will not remove confidential identifying information from the facility except as authorized in the performance of my duties.

V. I will not discuss in any manner, with any unauthorized person, information that would lead to identification of individuals described in the medical record.

VI. If I observe unauthorized access or divulgement of confidential records or data to other persons, I will report it immediately to my supervisor. I understand that failure to report violations of confidentiality by others is just as serious as my own violation.

I understand that confidential information or data is defined as any information where the individual patient, student-athlete, or physician(s) is named or otherwise identifiable. As a student in the Athletic Training Program, breach of confidentiality may be cause for **immediate termination from the Athletic Training Program**.

I have read this acknowledgement and the confidentiality policies of this facility and do hereby demonstrate my understanding and agreement to abide by these policies and procedures by affixing my signature and the date below. I will review this policy and document my compliance and understanding by re-affixing my signature and the date on an annual basis.

<table>
<thead>
<tr>
<th>Date</th>
<th>Student’s Signature</th>
<th>Supervisor’s Initials</th>
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Preceptor Confidentiality Agreement

As a Preceptor for the Athletic Training Program, I understand that I may be privy to information about a student’s academic progress that is considered confidential. The athletic training students grant permission to the Program Director and Clinical Education Coordinator to discuss their academic progress with the Preceptors on an as needed basis. I agree to discuss this information with the Program Director or Clinical Education Coordinator when requested. I also agree to maintain the student’s privacy with regards to discussing their progress or skills with anyone other than the student, Program Director, or Clinical Education Coordinator. I will maintain the confidentiality of such information and understand that if I do not adhere to a student’s privacy I will not be allowed to supervise athletic training students in the Western Illinois University AT Program.

Signature of Preceptor ____________________ Date ____________________
Permission to Discuss Academic Records

As an athletic training student within Western Illinois University’s Athletic Training Program, I understand the importance of academic guidance and advising. With this importance comes the responsibility of those involved with my academic success to have access to pertinent and appropriate information about my athletic training progress. These individuals include, the Program Director, the Clinical Education Coordinator, specific Preceptors I am assigned to for clinical education rotations, and the Athletic Training Program Review Committee. I grant permission through my signature below, that the above individuals may discuss my academic progress among themselves as deemed necessary and appropriate.

______________________________
Signature of Athletic Training Student

______________________________
Date
**POLICY:** Fair Practice

**PURPOSE:** To ensure fair and reasonable practices among athletic training students within the Athletic Training Program.

**LAST REVIEWED:** August 2007

Western Illinois University
Athletic Training Program

Fair Practice Policy

Western Illinois University maintains fair and reasonable practices in all matters affecting students who enter the AT Program. Athletic training students are not to take the place of an Athletic Trainer at any time. Athletic training students are not to act as athletic/sport managers and/or secretarial support staff. Athletic training students are here for a quality education and should not be asked or expected to perform any duties that will compromise their educational opportunities and experiences.

Athletic training students are not paid for their participation in clinical education and field experiences. The clinical and field experiences are part of the clinical education classes within the AT Program. It is expected that all students enrolled within the AT Program fulfill the educational requirements, which include clinical, off-site, and field work experiences.

This policy also confirms that the AT Program makes every attempt to provide the best educational experiences to all of the athletic training students. Attempts will be made to assure that all opportunities available within the AT Program are available to all students. Please note however, that if an opportunity does not permit all students to participate, that a random drawing will be used to ensure fair and equal assignments in attaining the experience.
POLICY: Orientation

PURPOSE: To provide each athletic training student with the information necessary to understand the process and procedures for the clinical education settings.

LAST REVIEWED: November 2012

Western Illinois University
Athletic Training Program
Orientation Policy

1. All athletic training students (ATSs) will complete an orientation program upon acceptance into the professional phase of the AT Program.

2. All ATSs may also complete an orientation for each new clinical education setting or rotation experience.

3. The ATSs will adhere to the practices, policies, procedures, and confidentiality as established by each specific setting and Preceptor.

4. All ATSs will assist in making the preceptors aware of their level of training and skill development.

5. Athletic training students will only perform skills in the clinical education setting that they have been formally instructed and assessed in the classroom/laboratory.

6. The Preceptor will be responsible for each student’s orientation session per site and abide by the implementation of skills by ATSs who have been instructed and evaluated in the classroom/laboratory settings.

7. The Preceptor may teach the ATSs new skills not associated with the clinical education course. The student will not apply the new skills unless the preceptor has evaluated and documented the student for proficiency.

8. The Preceptor will constantly supervise and evaluate the skill performance and professional training of each ATS under their supervision.

9. The ATS understands the absence request policy and has discussed appropriate communication methods with the Preceptor.

10. The ATS and Preceptor have reviewed the Universal Precautions/Procedures and understand the appropriate actions to take in the event an exposure incident occurs.

11. The ATS and Preceptor have reviewed the specific emergency action plan for the site(s) that the clinical education experiences will take place.

12. The ATS and Preceptor have reviewed what constitutes appropriate and inappropriate behaviors at this clinical education site.
By signing this form, I acknowledge that I have read and have received a clinical education orientation from my supervising Preceptor.

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POLICY: Supervised Clinical Education Hours

PURPOSE: To make students aware of what constitutes supervised clinical education hours and to understand their role as an athletic training student.

LAST REVIEWED: June 2011

Western Illinois University
Athletic Training Program

Supervised Clinical Education Hours

A. Supervised clinical education hours settings:
   1. Primary setting – Athletic Training Room
   2. Secondary settings – Athletic practice & game coverage
   3. Affiliated allied settings – medical clinics/hospitals, physician’s office, & high school setting
   4. All supervised hours should be recorded as such.

B. Supervision by a Licensed and BOC Athletic Trainer:
   1. Supervision involves “constant and auditory interaction between the student and the preceptor at the site of supervision.” The Preceptor instructs, supervises, and assesses the student’s clinical education experience.
   2. The Preceptor must be recognized as a clinical supervisor for the Western Illinois University AT Program.
   3. The supervising Preceptor must be onsite where the athletic training clinical education experience hours are taking place and must be able to immediately intervene on the patient’s behalf.

C. Non-supervised clinical education hours:
   1. Hours supervised by an athletic trainer who is not recognized as a Preceptor in Western Illinois University’s AT Program.
   2. Hours obtained in a setting not designated as a primary, secondary, or an affiliated allied setting of WIU’s AT Program.
3. Hours spent when a Preceptor is not on site. In this case, there should be no athletic training student on-site either.

4. Students not formally accepted into the AT Program may not be supervised by University or affiliated clinical supervisors for the purpose of accumulating supervised clinical education hours.

5. Hours spent traveling with a team, lodging, etc; only those spent at a practice or game, and game preparation may count if a WIU AT is present.

6. Hours earned more than five calendar years prior to the date of the application for the BOC Examination.

D. Recording of supervised clinical education hours:

1. All hours must be recorded on the Clinical Education Hours Log Sheet and signed by the supervising Preceptor.

2. It is the student’s responsibility to properly record daily clinical education hours and total them when the hour form is complete.

3. Students may only record actual clinical education hours completed.

4. The student is not expected to complete more than 20 clinical education hours in any one week. A week is defined as Sunday through a Saturday. If the student approaches the 20 hour mark in one week's time and does not want to exceed the 20 hour per week quota, he/she is to inform the Preceptor so appropriate arrangements can be made. This 20 hour rule does not pertain to days/weeks when school is not in session.

5. The Program Director and Clinical Instructors/Preceptors will randomly check the athletic training student’s written documentation of known clinical education hours. Any discrepancies may subject the athletic training student to disciplinary action.

6. Failure to record clinical education hours may result in those hours not counting toward minimum clinical education hours required.

7. The hour logs become part of student’s permanent record and used for verification and licensure purposes. Therefore, maintain these records in a professional manner. Any falsifying these documents may result in dismissal from the program.
POLICY:    Dress Code and Professional Behavior

PURPOSE:  To outline to athletic training students what constitutes appropriate dress and
behaviors expected while participating in clinical education experiences of the
AT Program.

LAST REVIEWED:  November 2012

Western Illinois University
Athletic Training Program

Dress Code and Professional Behavior

The American Medical Association recognizes Athletic Training as an Allied Health Care
profession. Each athletic training student is expected to present him/herself in a professional manner
through appropriate attire and behavior when representing WIU athletic training in the classroom,
field, and community. Athletic training students should adhere to the following guidelines in dress
and behavior for the various responsibilities within the AT Program. No exceptions are to be made,
remember, you have a professional image to uphold.

1. All athletic training students are expected to wear a WIU Athletic Training shirt, polo shirt,
or dress shirt/blouse while in the athletic training rooms. Polos and shirts should be tucked in.

2. Athletic training students should present themselves in a professional manner. That means,
dressed to look neat, clean, and professional. No jeans, athletic shorts, cut-offs, or sweats
should be worn. Clothing should not have excessive wrinkles, nor a presence of odor, or
stains.

3. Practice good hygiene by keeping hands and fingernails clean. Fingernails should be kept
trimmed and short. Use discretion in the use of make-up and perfume/cologne.

4. The dress code for daily athletic training room and practice is khaki pants or shorts with a
WIU polo or shirt. Name tags are issued by the AT Program and must be worn at all times.
Windbreaker pants are only allowed for outdoor activity coverage. Cargo pants are okay but
not preferred.

5. Pants should fit and not be too baggy or tight. Students are expected to wear a belt when
wearing pants or shorts with the shirt tucked in. At no time should pants hang down to
expose undergarments.

6. Dress for home and away contests should be appropriate for the situation. A collard WIU
Athletic Training polo shirt and khakis may be worn for most outdoor events (depending on
weather conditions). No jeans, athletic shorts, or sweats should be worn. Indoor events such
as volleyball and basketball, dress should consist of a shirt and tie for men and a dress
shirt/blouse and slacks for women. No jeans, athletic shorts, or sweats should be worn.
7. Dress clothes for events must be neat, clean, and professional. No crop/halter tops, low cut tops, form-fitting/shear tops, short hemlines, low cut pants that identifies undergarments when seated, kneeling, or squatting.

8. When traveling, the athletic training student should dress and behave as a staff member. When in doubt, please dress in a manner similar to the coaching staff.

9. No hats, skull caps, or bandannas should be worn while in the athletic training room. Hats may be worn at outdoor practices. If worn, hats must advertise WIU and/or specifically the sport you are covering. Hats may not advertise a fraternity/sorority or other University organization not affiliated with athletic training.

10. No flip-flops, sandals, clogs, heels, slippers, or open-toed shoes should be worn at any time. Solid toe shoes with socks should be worn. Shoes must be relatively clean without rips, soiled, or in disarray.

11. Students may not wear jackets or clothing items that advertise a fraternity/sorority or other University organization not affiliated with athletic training for practice or event coverage.

12. Jewelry should be kept to a minimum as to not interfere with duties. No visible body piercing jewelry is allowed to be worn other than standard earrings.

13. Hair must be neat, clean, and maintained so as not to touch a patient, modality, or interfere while assisting an athlete. Hair should not be in the face or eyes and facial hair must be groomed. Hair must be maintained in a conservative fashion and at a professional length for both men and women.

14. Official athletic training room clothing should not be worn to social events on/off campus, unless sponsored by the athletic training program or approval sought by the Program Director.

15. The AT Program will provide every student with one WIU Polo as part of the admission process. All students have the option to purchase additional clothing each semester.

16. Students should discuss the dress code with their assigned Preceptor to determine whether they are in compliance.

17. Profanity and/or abrasive language will not be tolerated in the classroom, labs, or in the field experience settings. Students should demonstrate respectful behavior when communicating with faculty, staff, graduate assistants, and/or other University or community officials. This includes both oral and non-verbal language.

18. No electronic devices are to be used during the clinical education rotation. Cell phones are allowed but must be turned off (or on silent mode) prior to entering the facility. Cell phones should not be used until the student has completely left the facility for the day.
19. Any student suspected of alcohol consumption or possessing illicit/illegal drugs will be sent home from the clinical education rotation and appropriate disciplinary actions will be taken as per the course syllabus, as well as through the appropriate University channels.

20. Illegal use of alcohol or drugs will not be tolerated by the AT Program. Students should conduct themselves in a manner that adheres to the NATA Code of Ethics and Standards of Professional Practice. Any student in violation of this such as if arrested will be subject to program disciplinary measures, including program probation or dismissal.

21. Conversations while at the clinical education rotations should be appropriate for an allied health facility and learning environment. Students having conversations deemed inappropriate by a University official or found offensive to others will be instructed to discontinue the conversation. Any student not adhering to the professional setting behaviors will be subject to disciplinary actions.

22. If any student observes inappropriate behaviors while at the clinical education rotation, they will report it immediately to the supervisor, Clinical Education Coordinator, or Program Director. Students should understand that failure to report violations of professional behaviors by others is just as serious as their own violation.

NOTE: If a Preceptor feels that the student’s dress is inappropriate for the activity, he/she will send the student home for a change in attire. Dress Code violations will affect the clinical education grade as described on the syllabus.
**POLICY:** Off-Site Dress Code and Professionalism

**PURPOSE:** To outline to athletic training students what constitutes appropriate dress and behavior while participating in off-site clinical education experiences of the AT Program.

**ATTACHMENT:** AT Program Off-Site Dress Code and Professional Policy Informed and Acknowledged Statement Form

**LAST REVIEWED:** August 2008

Western Illinois University
Athletic Training Program

**Off-Site Dress Code and Professionalism**

During the off-site clinical education rotations, athletic training students are guests in work settings of physicians and other health care professionals. These professionals in the community are volunteering their time and expertise in order to enhance the student’s educational opportunities. When the student visits these sites, these health care providers are in their work setting and their primary consideration must remain the patients in their care or clients that they are supervising. These health care providers have invited the student to participate in their daily activities to better understand a variety of health care settings and professions that the athletic trainer may be affiliated with. The health care providers’ have high expectations for the students to utilize these learning experiences to the fullest potential. As guests, students should conduct themselves in the highest professional standards by following the guidelines below.

1. Students must wear clean, neat, and laundered khaki or black pants. Pants must be an appropriate length and a suitable fit.

2. A suitable fit for professional dress means that the pants cover the students’ behind especially when performing activities such as bending, squatting, kneeling, or reaching, so that no skin or undergarment is revealed. Appropriate length means that the pants are not dragging on the floor or under the shoe when standing/walking. The hem line of the pant legs should not be tattered, ragged, or torn. Appropriate length pants also means that the pants must be long enough to touch the top of the shoes.

3. Pants must be worn on the waist with a black or brown belt. This means that the pants should not be baggy or falling too low in the inseam.

4. No shorts or capris of any kind are allowed at any time.

5. Western Illinois University Polos or a collared dress shirt or blouse may be worn.

6. Shirts or blouses must be a button-up to the neck style and of a conservative nature. They must be clean, wrinkle-free, laundered, and appropriately fit.

7. A suitable fit for professional dress means that the shirts/blouses do not pucker
at the buttons, covers all skin from the waist to the neck, excluding the elbows to the wrists as in wearing a short-sleeve shirt. There must be enough length in the shirt that when the student bends or reaches the midsection, stomach, behind, or undergarments do not become exposed.

8. Only dress shoes are allowed to be worn. Shoes must be closed-toed, should be black or brown, and not be tattered or in excessive wear/poor condition. Soles must be intact and in good condition. No rips, tears, holes, or excessive stains should be evident.

9. No flip-flops, crocs, clogs, sandals, heels, slippers, or open-toed shoes should be worn at any time.

10. Socks or hose must be worn and should match the pants or shoes worn.

11. Students must practice good hygiene daily. Hair and fingernails must be kept clean/washed, neat, and maintained. Teeth should be brushed daily and no gum is allowed. Students must shower daily prior to attending the off-site rotation. Body odor should not be offensive (i.e. smell like smoke, bar, fast food, grease, dirty hair, etc). Cologne or perfume should not be strong or used as an alternative to showering. No writing or markings should be visible on the student’s skin. Makeup should be used conservatively.

12. Hair must be neat, clean, and maintained so as not to touch a patient, modality, or interfere while participating in the clinical education rotation. Hair should not be in the face or eyes and facial hair must be groomed. Hair must be maintained in a conservative fashion and at a professional length for both men and women.

13. Jewelry should be kept to a minimum as to not interfere with duties. No visible body piercing jewelry is allowed to be worn other than standard earrings.

14. No hats are allowed at anytime you are going to or attending an off-site clinical education rotation. Do not carry a hat into the facility with you; leave it in your car or at home.

15. No sunglasses are to be worn or taken into the facility with you.

16. No iPods or other electronic devices are to be taken into the off-site facilities. Cell phones are allowed but must be turned off prior to entering the facility and remain off the entire time you are at the facility. Cell phones should not be used or turned on until the student has completely left the building.

17. Students are expected to arrive at their off-site clinical education rotation a minimum of 5-10 minutes prior to the assigned start time and check in with the receptionist. Plan ahead and coordinate your schedule so you may meet all of your commitments.

18. Failure to attend and meet your off-site clinical education rotation obligations will result in disciplinary actions as identified in the AT Program Handbook and
clinical education syllabi.

19. Students are expected to be respectful, courteous, and use professional language and manners at all times when addressing physicians, staff, patients, and other professionals in the setting. Foul language is never acceptable and will not be tolerated.

20. Students are expected to actively engage and participate in the off-site clinical education rotation by coming prepared to ask questions and demonstrate intellectual curiosity. Use every opportunity as a chance to learn. Students should take every opportunity to participate in their setting. Students must take the initiative to participate through early communication and interactions with the assigned physician or health care provider. Students who appear drowsy, inattentive, or bored will be sent home and disciplinary actions may result through the AT Program and clinical education course.

21. During “down” time, take opportunity to read resource materials available through the medical professional if offered.

22. Abide by the Confidentiality clause at all times.

23. If the student is aware of an absence or an unforeseen conflict arises, the student must follow the procedures outlined by the Clinical Education Coordinator. The procedure typically consists of the student immediately contacting the assigned off-site clinical education rotation contact person prior to the assigned time, followed by reporting the absence to the Clinical Education Coordinator. The expectation is that the student will make up the missed hours for the specific rotation within the same semester.

24. The physician or health care provider reserves the right to remove any student from the off-site clinical education rotation due to inappropriate dress, behavior, attitude, etc at any time. If a student is removed from the rotation, he/she may lose any future privileges to return if deemed a significant violation of conduct and disciplinary actions may result through the AT Program and clinical education course.

25. If any student observes inappropriate behaviors while at the off-site clinical education rotations, they will report it immediately to the supervisor, Clinical Education Coordinator, or Program Director. Students should understand that failure to report violations of professional behaviors by others is just as serious as their own violation.

26. Students must sign the Informed and Acknowledgement Statement Form prior to the start of each off-site clinical education rotation.

NOTE: Successful completion of all off-site clinical rotations is a requirement of the AT Program and must be fulfilled prior to the Internship experience.
Western Illinois University
Athletic Training Program

Informed and Acknowledgement Statement Form

AT Program Off-Site Dress Code and Professionalism Policy

I, ________________________________, hereby ACCEPT, and
ACKNOWLEDGE RECEIPT OF the Off-Site Dress Code and Professionalism Policy and
Procedures of Western Illinois University’s Athletic Training Program. I understand that failure
to comply and abide with this policy may result in disciplinary actions taken by the AT Program
(and clinical education course instructor) as well as forfeiture of further off-site clinical
education opportunities with the stated facility. I also understand that the off-site clinical
education rotations associated with this policy are a requirement of the AT Program and must be
completed prior to the Internship experience.

/  
Athletic Training Student & Date  AT Program Director & Date

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**POLICY:** Equal Exposure Opportunity

**PURPOSE:** To assure equal clinical education rotation opportunities to all athletic training students.

**LAST REVIEWED:** August 2007

Western Illinois University
Athletic Training Program

Equal Exposure Opportunity Policy for Clinical Education Rotations

1. Athletic training students will be given the opportunity to work with a variety of sports and Athletic Trainers during their clinical education experiences as a student in the WIU AT Program.

2. An Excel Sheet is maintained by the Clinical Education Coordinator and Program Director to ensure that all students are exposed to the following: Lower Extremity high risk sports, Upper Extremity high risk sports, Equipment Intensive sport, and a General Medical clinical experience.

3. In addition to the above exposures, every effort is made to ensure that students have equal opportunity to work with male athletes, female athletes, team, and individual sports.

4. Some students are involved in intercollegiate athletics as well as being in the WIU AT Program. Every effort is made to ensure that these students receive the same exposure opportunities in the AT Program and as their schedule allows.

5. The equipment intensive experience is completed either at the local high school or through the WIU intercollegiate team. The selection process for this clinical education rotation includes but not limited to the following:
   
   a. Students may request their preference to the Clinical Education Coordinator, however, this does not guarantee such placement.

   b. Athletic training students will be assigned to the Preceptor covering WIU football first, based on the need foreseen by that Preceptor.
c. If the number of students that need the equipment rotation is greater than the ratio allowed or the discretion of the WIU Preceptor for Football, the additional students will then be assigned to the Preceptor at the high school.

d. If the number of students requesting either one of the football rotations is greater or less than the ratio available with WIU, then a random drawing will be implemented to assign the specific site for the equipment-intensive rotation regardless of the student's specified request.

e. An athletic training student on academic or program probation will be excluded from the WIU football rotation.

f. The equipment-intensive rotation may also be influenced by the students' academic schedules.
POLICY: Personal Transportation

PURPOSE: To inform athletic training students of their transportation responsibilities during the off-campus clinical education experiences.

LAST REVIEWED: August 2009

Western Illinois University
Athletic Training Program

Personal Transportation Policy

All athletic training students participating in observational hours or clinical education rotation experiences as requirements for the AT 211, AT 301, AT 311, AT 401, and AT 411 courses, may be assigned to one or more off-campus clinical education sites. Athletic training students will be responsible for providing their own transportation to and from the off-campus site(s). Public (WIU’s free bus system) or personal transportation (bicycle, motorcycle, automobile, etc) are acceptable sources for meeting this requirement, therefore, lack of a personal vehicle or driver’s license, will not be tolerated as an excuse for tardiness or failure to complete an off-site clinical education rotation/experience. The city of Macomb provides free public bus transportation that has routes to all of the affiliated sites.

If an athletic training student uses personal transportation, he/she will be responsible for gas and maintenance for the vehicle. There will be no reimbursement for gas or mileage. It is also assumed that the student carries insurance on the vehicle and therefore, in case of an accident, the University and/or Athletic Training Education Program will not be held liable.

If public or personal transportation cannot be obtained by the athletic training student for any reason, it will be his/her responsibility to make arrangements with outside sources to arrive on time and safely at the off-campus site. All athletic training students should be aware of this policy of personal transportation. Please discuss with the Clinical Education Coordinator any problems with transportation to or from an off-site clinical education rotation experience.
POLICY: Absence from Clinical Education Experience

PURPOSE: To inform athletic training students of the process for requesting time off from the clinical education experiences.

ATTACHMENT: Request for Absence From Clinical Education Experience Form

LAST REVIEWED: August 2008

Western Illinois University
Athletic Training Program

Absence from Clinical Education Experience Policy

All athletic training students must complete an absence request form for advance approval of specific dates wanted off from the clinical education experiences. The clinical education experiences are an integral part of the AT Program and must be appreciated as such. Therefore, students must complete the absence request form, obtain the appropriate signatures, and submit the form to preceptor. The requests are maintained by the Program Director in each student’s permanent file.

Students who have medical or family emergencies arise are to call their preceptor to inform him/her as to the nature of the illness or emergency. Students are NOT to use text messaging as the sole method to deliver this message. A personal call to the supervisor must be made so verbal communication and verification can be noted by the Preceptor.

Violations of this policy or procedure for securing time off will affect the clinical education grade as described on the syllabus.
ATHLETIC TRAINING STUDENT REQUEST FOR ABSENCE FROM CLINICAL EDUCATION EXPERIENCE

This form is to be completed for advance approval of a specific date(s) that is desired off from the clinical education rotation. This form must be submitted two weeks in advance of the date requested off. It is the responsibility of the student to find a suitable replacement to assist with the assigned clinical education responsibilities. Once the student completes this form, it is to be submitted to the supervising Preceptor for signature approval, and then given to the Program Director to be filed in the requesting student’s permanent folder.

NAME: ___________________________ DATE: _________

Date Requesting Off: ___________________________

Reason for Absence: ___________________________

Activity: ___________________________

ATS Replacement: ___________________________

ATS Replacement Signature: ___________________________

Requesting ATS Signature: ___________________________

Decision: Approved ( ) Disapproved ( )

Preceptor’s Signature: ___________________________ DATE: _________

Program Director’s Signature: ___________________________ DATE: _________
**POLICY:** Requirements for Graduation

**PURPOSE:** To inform athletic training students of all graduation requirements.

**LAST REVIEWED:** August 2007

Western Illinois University
Athletic Training Program

**Graduation Requirements**

Western Illinois University confers a Bachelor of Science degree to athletic training students who have met all of the requirements listed here:

1. Complete all of the General Education Curriculum requirements.

2. Earn a minimum overall grade point average of 3.00 for all credited work and 3.00 grade point average for credited work in the athletic training major.

3. Complete the department major requirements for semester hours.

4. Fulfill the Writing in the Discipline (WID) requirement for the major.

5. Earn a minimum of 120 semester hours of credit. At least 60 of those hours must be from a four-year college or university; at least 42 must be earned in upper division courses (numbered 300 and above) from a four-year institution.

6. Complete at least 30 hours while in residence at WIU, at least 15 of which must be taken in the year prior to graduation. No more that 10 of these hours can be taken in pass/fail or noncredit courses. Credit earned by proficiency examination does not satisfy residence requirements.

7. Count no more than 30 semester hours toward credit for graduation by military credit, external testing, or a combination of these.

8. Complete the First Year Experience Requirement.

9. Demonstrate ability to use baccalaureate-level skills in mathematics.

10. File an application for graduation in the Office of the Registrar during the last semester as a junior.

11. Clear all financial and administrative obligations to the University before proof of degree will be provided.

12. Complete the Internship experience.
13. Accumulate 800 direct supervision hours from an Athletic Trainer.

14. Pass all AT Program courses, including the competencies as noted in the NATA Educational Competencies.

15. Satisfy all Kinesiology Department criteria for graduation. The department core courses include Motor Behavior, Anatomy & Physiology I, Sport & Exercise Psychology, Physiology of Exercise, and Biomechanics.
**POLICY:** Grievance

**PURPOSE:** To allow a systematic pathway for grievances to be filed and resolved within the Athletic Training Program and Western Illinois University.

**LAST REVIEWED:** August 2008

Western Illinois University
Athletic Training Program

Grievance Policy

1. Grievance definition: A complaint or allegation by an individual, that there has been a violation, misinterpretation, or improper application of specific provisions.

2. Whenever possible, disputes should be resolved informally at the lowest administrative level. This shall be done without fear of retaliation.

3. While encouraging informal resolution, this policy applies primarily to those cases where a more formal grievance procedure is necessary. Each student has the opportunity to formally resolve a grievance against anyone in the AT Program.

4. All grievances will be in written form with your name, the person the grievance is against, and a complete description of the grievance.

5. The written grievance will be given to the AT Program Director to review. If the grievance is filed against the AT Program Director then the grievance will be submitted to the Department Chairperson.

6. A meeting will be made between the individual who is submitting the grievance and the AT Program Director or Department Chair to discuss the content of the grievance.

7. If warranted a second meeting will be scheduled between the AT Program Director or the Department Chair and the individual who the grievance is filed against to discuss the content of the grievance.

8. If unresolved after individual meetings, a third meeting will occur between the AT Program Director or the Department Chair and both individuals involved with the filed grievance to resolve any and all issues associated with the grievance.

9. If there is an academic grievance please refer to the University Policy Manual.
10. If warranted, disciplinary action may occur within the AT Program as in the form of verbal and written action. A disciplinary policy form is in place for the AT Program.

11. If warranted, the grievance may be forwarded to WIU’s Judicial Affairs for consideration.

Note: The Program Director or Department Chairperson may request the grievance be reviewed and/or heard by the AT Program Review Committee for advice or recommendation.
POLICY: Disciplinary Actions

PURPOSE: To inform athletic training students of the systematic pathway for handling violations of the AT Program policies and procedures.

LAST REVIEWED: January 2011

Western Illinois University
Athletic Training Program

Disciplinary Policy

1. All athletic training students are expected to follow the policies and procedures established by the AT Program.

2. Violations of the policies and procedures will result in academic penalty as described on the clinical education course syllabi.

3. A student who violates any of the policies or procedures of the AT Program is subject to a formal reprimand by the Program Director.

4. Upon the first offense, the student receives a verbal warning that the violation has occurred. The clinical education syllabus is also reviewed to determine if the violation will result in consequences to the student’s course grade.

5. Upon a second offense, the student receives a written warning that identifies a continual problem or that a new violation has occurred. The clinical education course syllabus is also reviewed to determine if the violation will result in consequences to the student’s course grade.

6. Upon the third offense, the student is placed on a probationary status in the AT Program. At this time the student must meet with the AT Program Review Committee to discuss the seriousness of the continual breaches in conduct. The clinical education course syllabus is also reviewed to determine if the violation will result in consequences to the student’s course grade.

7. Upon the forth offense, there are sufficient grounds to dismiss the student from the AT Program.

8. Depending on the specific violation by the student, an action or behavior may be deemed as a minor infraction or a major infraction. The minor infractions will follow the disciplinary actions as stated on the clinical education syllabus or will be at the discretion of the Clinical Education Coordinator, Program Director, or Preceptor. A major infraction may result in failure of the clinical education course, a probationary status in the AT Program, or dismissal from the program.
Examples of major infractions include but are not limited to: Falsifying clinical education hours, sexual harassment, racism or discriminating behaviors, being removed from a clinical education rotation experience, deceitful behaviors or out-right lying to supervisors, purposeful undermining of the AT Program, & discontinuance of clinical education rotations without prior approval.
POLICY: Relationships with Athletes, Coaches, Faculty/Staff, Physicians, and other Athletic Training Students

PURPOSE: To provide athletic training students with guidelines for appropriate professional conduct.

LAST REVIEWED: August 2007

Western Illinois University
Athletic Training Program

Relationships Policy

1. Relationships with Athletes
   In working closely with athletic teams, friendships may arise between athletic training students and athletes/patients. A professional demeanor should be exercised at all times. In the clinical education setting, you are responsible for the care of the athletes as well as looking for opportunities to learn and increase your athletic training skills.

   Athletic trainers dating athletes can lead to very compromising situations and therefore is highly discouraged. If, however, a situation arises where an athletic training student is dating an athlete, this relationship should not become evident in the athletic training room. If this becomes a problem and the athletic training student cannot perform his/her duties, the student may be reprimanded or removed from assigned clinical education rotation. The Program Director, Clinical Education Coordinator, or supervising athletic trainer, has the discretion to reassign a student if it is felt to be in the best interest of all parties.

2. Relationships with Staff Athletic Trainers
   The staff athletic trainer is your immediate supervisor and Preceptor. You are responsible to this person at all times. Feel free to discuss anything with the staff athletic trainers as they are here to assist in your professional growth and development as an entry-level athletic trainer. Maintain a professional relationship at all times in both your actions and communications.

3. Relationships with Coaches
   Your relationship with the coaches is a very important one. He/She relies on your decisions concerning players. The staff athletic trainer is directly responsible for the sport and the decisions regarding an athlete’s playing status. As your Preceptor during the clinical education rotation experience, they will inform you of your responsibilities when dealing with coaches. You should communicate with him/her of all pertinent injuries and the status of injured athletes that you have assisted with in rehabilitation or evaluation.
4. **Relationships with Physicians**
The AT Program and Athletics Department have relationships with several physicians. These physicians are all highly qualified and should be treated with the utmost respect. Please do not second-guess their decisions regarding athletic injuries as this is extremely unprofessional. Make every effort to learn from them, ask questions, and assist where needed.

5. **Relationships with other Athletic Training Students**
A professional demeanor should be exercised at all times when functioning in the clinical education and field experiences. Athletic training students often develop close friendships and relationships with other athletic training students. If two athletic training students begin dating, this relationship should not become evident in the athletic training rooms or clinical settings. If this becomes a problem, or an uncomfortable setting for others, or the athletic training student cannot/does not perform his/her duties as part of the learning environment, one of the students will be removed from assigned clinical education rotation. The Program Director, Clinical Education Coordinator, or Preceptor, has the discretion to reassign a student if it is felt to be in the best interest of all parties.
POLICY: Athletic Training Student Mentor

PURPOSE: To expose the prospective student to the duties and responsibilities of the athletic trainer and to serve as a means to evaluate potential success in the AT Program.

LAST REVIEWED: August 2007

Western Illinois University
Athletic Training Program

ATHLETIC TRAINING STUDENT MENTOR PROGRAM

The primary purpose of the student mentor program is to expose the prospective student to the duties and responsibilities of the athletic trainer. The program will also serve as a means by which the student is evaluated for his/her potential as an athletic trainer and as criteria for admission into the AT Program.

Upper classmen, when available, will serve as student “mentors” for the program. From the onset, it is clearly understood that the prospective student (usually from AT 110) is to serve primarily as an observer. Although the student can perform minor duties, discretion should be used in assigning tasks or when allowing the student to assist in tasks.

Guidelines for the Mentor Program:

1. Each AT 110 student will complete up to 30 hours of clinical observation experience. These hours are to be compiled by observing the athletic training rooms at WIU or one of the intercollegiate athletic teams. Students reapplying for admission may complete up to 20 hours and are invited to take part in the Mentor Program.

2. Each student will be assigned to an upperclassman in the AT Program. If there are not enough upperclassmen available, the Clinical Education Coordinator will use discretion and select other suitable program representatives.

3. All hours will be recorded on the Clinical Education Hour Log Sheet and verified by the signature of the upperclassmen student mentor or an athletic trainer.

4. Good judgment on the part of the student is necessary with respect to the attire worn in the athletic training rooms or on the athletic fields of play. See dress code guidelines provided by the Clinical Education Coordinator, or refer to the Dress Code Policy of the AT Program.

5. The manner in which a professional presents himself/herself is essential to the integrity of that person. It is absolutely critical that each student present himself/herself in an exemplary manner. Remember, you are not only representing yourself, but also the AT Program, the Kinesiology Department, and WIU.
6. The AT 110 student will be responsible for writing a summary of clinical observation hours experienced for each assigned rotation. They will also may be invited to evaluate their Student Mentor and the clinical education rotation site they experienced.

Responsibilities of the Student Mentor:

1. To determine an appropriate schedule for clinical observation hours for the assigned mentee.
2. To instruct the student on proper record keeping procedures.
3. To familiarize the student with the athletic training room and supplies.
4. To demonstrate and explain pre- and post-practice management responsibilities.
5. To assist the student in the mastery of AT 110 material and taping/wrapping proficiencies.
6. To verify student clinical observation hours by signing the Clinical Education Hour Log Sheet.
7. To encourage professional participation such as attending ATSA meetings and activities.
8. To always be a professional role model for the future athletic training student.
**POLICY:** Athletic Training Room

**PURPOSE:** To identify to athletic training students the policies and procedures that apply to the Western Illinois University athletic training rooms in order to make their function organized, OSHA compliant, and efficient.

**LAST REVIEWED:** January 2011

Western Illinois University  
Athletic Training Program

Athletic Training Room Policy

*Consult with individual Preceptors for the specific policies and procedures at each site.*

General Guidelines:

1. All athletes are responsible for purchasing their own medicine. However, you may dispense such common over-the-counter medications as aspirin, acetaminophen, throat lozenges, and cold tablets to athletes in over-the-counter dosages. All medication that is dispensed must be logged in the medication log form. A one-dose amount is all that can be given out. See Medication Policy.

2. Cleats, spikes, and turf shoes are not allowed in the athletic training rooms.

3. The athletic training rooms are coed. Please be sure proper attire is worn at all times.

4. Profanity will not be tolerated by anyone in the athletic training rooms.

5. No cups are provided in the athletic training rooms for beverage consumption.

6. Tobacco is not to be smoked or chewed in the athletic training rooms.

7. A record of all procedures with athletes/patients must be documented.

8. Athletes’ belongings are to be placed outside of the athletic training rooms when necessary (i.e. shoulder pads, helmets, basketballs, baseball bats, etc.).

9. Athletic training students are required to fill out an evaluation form on new injuries, be certain the clinical supervisor is aware of the evaluation taking place, and forward the written documentation to the staff athletic trainer/Preceptor.

10. Athletic training students are required to record all SOAP notes on injuries and rehabilitation notes on injured athletes and forward it to their clinical Preceptor. Self-treatments are not allowed.

11. Athletic training students are required to follow athletic training room universal precautions and specific precautions for sport. See Universal Precaution Policy.
12. Athletic training students are required to be a “team” member of the athletic training staff and take pride in yourself, the athletic training room, and the Athletic Training Program.

13. Athletic training room closing responsibilities include:
Clean tables and countertops, clean pillows and bolsters, whirlpools and hydro areas are to be cleaned if dirty, wipe down carts, restock band-aids, gauze, etc., check water level of hydrocollator units, and make sure door is locked and shut.

14. No one is to be in the athletic training room without supervision.

15. Nothing (equipment, supplies, tape, records, etc.) is to be taken from the athletic training room without permission.

16. The athletic training room is a place of business and learning; NOT a lounge.
Although people will come to sit and talk, roughhousing or any other activity that interferes with our purpose and operation will not be tolerated. Please do not allow loitering when the room is crowded.

17. All personal items of the faculty/staff and athletic training students (books, jackets, files, etc.) are to be left in the storage room or office.

18. There is NO reason to be messy or sloppy. Straighten things up when you have a break.

19. Do not leave supplies and equipment (tape, towels, ice bags, etc.) lying on the tables and countertops.

20. Athletes, faculty, staff, and students are NOT allowed in any supply room, cabinets, or drawers unless directed to do so. These should only be accessed by the athletic training faculty, staff, and athletic training students.

21. No one is to administer his/her own treatment (ice cup massage is allowable).

22. No consumption of food in the athletic training rooms is allowed.

23. Do not put ice packs, sodas, food containers, etc. in the ice machines.

24. No shoes are allowed on the treatment tables.

25. Athletic training students are not allowed in the staff offices unless invited to do so.

26. Athletic training students are not to lie down on the treatment tables and should refrain from sitting on the tables. Always look for something to do to improve yourself and increase your learning opportunities.
**POLICY:** Football Athletic Training Facility

**PURPOSE:** To identify to the athletic training students who are at the football rotation, the policies, procedures, and expectations that apply to the Western Illinois University football athletic training facility.

**LAST REVIEWED:** August 2007

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**Western Illinois University**
**Athletic Training Program**

**Athletic Training Room Policy**

I. **Staff Expectations**
- Be intellectually inquisitive
- Enthusiastic and self-motivated
- Possess good communication skills
- Be a good listener
- Have empathy
- Accept constructive criticism
- Respect all of those around you
- Treat people how you would like to be treated

Western Illinois University athletic training personnel are expected to be honest and forthright in all aspects, and display dedication, loyalty, and commitment to the healthcare of WIU student-athletes, as well as the WIU Athletic Department, and Athletic Training Department.

Insubordination, disloyalty, breach of duty, unprofessional behavior, theft/vandalism, sexual harassment, and substance abuse will not be tolerated.

Keep in mind most problems result from a lack of communication. Become familiar with all policies, procedures, and expectations of the Department of Athletic Training and the Athletic Training Room.

II. **Professionalism**
- As an athletic training student at WIU you are a representative of the university, athletic department, athletic training department, and the team for which you are assigned.
- Athletic training students should adhere to the NATA Code of Ethics.
- Do not publicly express opinions of medical care rendered by a physician or Athletic Trainer.
- Information heard or discussed at team meetings, practices, games, etc… by coaches, administrators, or medical staff is considered confidential and should not be discussed with other individuals.
• Avoid confrontations if possible, and if a problem develops notify an administrator or Athletic Trainer immediately.

III. Dress Code
• Appropriate items
  o Khaki/tan pants
  o Khaki/tan shorts
  o WIU Athletic Training clothing
  o WIU Clothing
  o Leatherneck Athletic clothing
  o WIU Football clothing

• Prohibited Items
  o Jean Shorts
  o Sweat Pants
  o Jeans
  o Excessively “baggy” pants or shorts
  o Excessively “tight” shirts, pants, or shorts
  o Tank tops, spandex
  o Flip flops, sandals
  o Excessive body piercing, tongue piercing
  o Clothing with holes, stains
  o Apparel promoting alcohol, tobacco, or sexual items
  o Apparel from other schools and universities

IV. Field Experience Competency Rules and Regulations for Football
• Athletic training students should only perform the clinical skills they have passed in AT Program courses, unless directed otherwise by a staff athletic trainer
• Students should ask their supervisor if they have a question regarding their duties in the ATR
• Athletic training students must never perform a medical evaluation, treatment, or rehabilitation on their own, unless supervised and directed by a staff member

V. Philosophy, Key Points, and Miscellaneous
• Have a positive attitude
• Respect the staff and your fellow classmates
• Always be willing to help, and do the “little things”
• Be positive and patient when working with student-athletes. Get to know them personally, but keep it at a professional level. Always remember you are part of a medical team and your main duties are to provide first-class healthcare to injured individuals. Be friendly, but do not become a friend.
• Make sure the athletic training room is clean and organized at all times. I believe the ATR should be as clean and organized as a hospital!
• Be on time, and let a staff person know in advance if you need time off, except in emergencies
VI. What To Expect From The Head Football Athletic Trainer

- Treat you with dignity and respect
- Give you responsibilities and duties
- Assist with any problems you may have
- Listen to ideas, suggestions, concerns, and comments
- Acknowledge hard work
- I will do whatever I can to help you in your next professional step

VII. WIU Football Athletic Training Student Responsibilities and Duties

1. Report on time to the athletic training room

2. Set up equipment and supplies for conditioning, practice, and competition
   a. Coolers
   b. Water
   c. Aqua Lift
   d. Stationary bike
   e. Kool Zone etc…

3. Assist with treatments and rehabilitation when asked by a staff member

4. Clean up after taping, treatment, and rehabilitation sessions

5. Clean up post-practice, competition etc…

6. Make ice bags/empty ice bags

7. Re-stock cabinets with supplies and equipment

8. Clean whirlpools

9. Clean coolers and cups/Dry coolers when finished and put away properly

10. Clean treatment tables regularly

11. Keep the ATR clean and organized at all times

VIII. Gator Policy

- Athletic training students will be required to drive the John Deere Gator for football practice and game set-up.
- You must be 16 years of age and have a valid driver’s license to operate the Gator.
- Only two people can be in the Gator at one time.
- No standing or sitting in the back allowed.
- There is to be no speeding while driving the Gator.
- Drive at a slow to moderate speed while traveling to and from the football fields.
• Obey all traffic signs when driving the Gator across the street

IX. Football Practice Set-Up

1. Set up should begin approximately 2.5 hrs before practice starts
2. Set-up coolers and Aqua Lifts
   a. 6-Aqua Lifts w/ fully charged batteries
   b. 6-10 gal cooler of water filled half way with ice
   c. Small coolers with ice towels
   d. Portable tables
   e. Tent
   f. Emergency equipment (AED, inhalers, oxygen, WBGT, Skyscan, spine board, DDI Chair)
   g. Gator (keep emergency equipment on Gator)
   h. 1 box of Kleenex
   i. 1 biohazard supply kit (fully stocked)
   j. Stationary bike
   k. 7 gal cooler with ice, ice bags, and saran wrap
   l. Make ice bags 10 min before the end of practice
   m. Fanny packs (assorted tape, scissors, band-aids, gloves, CPR pocket mask, mouthguard, gauze, triple antibiotic, mini-hand sanitizers, sun block)

X. Things to Remember While Covering Practice

✓ Be alert at all times
✓ No sitting down during practice
✓ Refill the Aqua Lifts; water bottles
✓ Never set the water bottles down near the playing fields
✓ Keep the area of play clear of obstacles at all times
✓ Help the coaches or managers with drills etc… if needed
✓ Give coaches water
✓ Be ready to help
✓ Always have your fanny packed stocked
✓ Be alert for signs of heat illness
✓ Ask questions regarding treatments, rehab protocols, injuries etc…
✓ Remember, nobody is a waterboy/girl, you are keeping the athletes hydrated to prevent injury, fatigue, and heat illness
POLICY: Over-the-Counter Medications

PURPOSE: To provide the athletic training student with the duties, responsibilities, and proper handling of over-the-counter medications.

ATTACHMENT: Medication Administration Log

LAST REVIEWED: July 2004

Western Illinois University
Athletic Training Program
Over-the-Counter Medications Policy

1. All athletes are responsible for purchasing their own medicine. However, if the Clinical Preceptor deems an athlete may be provided an OTC, you may dispense such common over-the-counter medications as aspirin, acetaminophen, throat lozenges, and cold tablets.

2. When providing an athlete with an over-the-counter medication, only a single dose may be given at any one time.

3. All medication that is dispensed must be logged on the Medication Log Form. A one-dose amount is all we can legally give out. See Medication Log Form below.

4. Be certain to ascertain the following:
   a. That the athlete does not have any preexisting conditions or taking any medications that would contradict taking the medication requested.
   b. Obtain a history of injury or illness prior to dispensing.
   c. Understand the actions of and the types of medication being dispensed.
   d. Follow medication directions for dispensing medication.
   e. Ask/inquire: Is the individual allergic to any medications?
      Has the individual ever taken this medication before?
   f. Aspirin should not be given to a young individual with flu-like symptoms or chicken pox, because of the possibilities of developing Reye's Syndrome, or with any type of head injury to the athlete.
   g. No more than one dose may be dispensed at one time. A physician's evaluation is recommended if an athlete seeks additional days or multiple dose applications.
   h. A label must be attached to the container from which the medicine is dispensed and must contain, legibly, the following information:
      1. The name of the product (medication).
      2. The name of the manufacturer and its location.
      3. The symptoms and/or problems that it is used to treat.
      4. The medication strength and its recommended dosage.
      5. Specific instructions for taking the medication.

*Remember the NCAA List of Banned Medications*
Name: _______________  Date: _________  Complaint / Symptoms: ________________

_____________________________________________________________________________

Medication: _____________________  Quantity Administered: _____________

Method of Administration: _______________  Time Administered: _______________
**POLICY:** Universal Precautions

**PURPOSE:** To identify the appropriate procedures when dealing with blood and body fluids.

**LAST REVIEWED:** July 2004

**Western Illinois University**
**Athletic Training Program**

**Universal Precaution Policy**

1. Gloves should be worn when contact with blood or other body fluids are anticipated. Gloves should also be worn for touching mucous membranes or non-intact skin (e.g. abrasion, dermatitis) of all athletes and for handling items or surfaces soiled with blood or body fluids. Gloves should be changed after contact with each athlete.

2. Hands and other skin surfaces should be washed immediately and thoroughly if contaminated with blood and other body fluids. Hands should also be washed after gloves are removed. Athletes should shower immediately after competition. Wash hands with soap between treatments.

3. Surfaces contaminated with blood or body fluid should be cleaned with a solution known to inactivate the various potential viruses after each exposure or as needed.

4. To minimize contact, mouth-to-mouth resuscitation masks or other ventilation devices should be available for use in emergencies.

5. Soiled linen, towels, uniforms, etc. should be tagged and washed in hot water with a detergent that is known to inactivate HIV and HBV. When possible, disposable towels should be used and proper disposal procedures employed for soiled materials.

6. All athletes in greatest risk sports should be required to wear mouthpieces, and it should be strongly recommended for athletes competing in moderate risk sports.

7. Spittoons or receptacles where bloody sputum or saliva may be spit into should contain a solution known to inactivate blood-borne pathogens.

8. Sports should be interrupted when an athlete has a wound where a large amount of exposed blood is present, to allow the blood flow to be stopped, and to clean the area and athlete.
9. Athletes who have an open lesion, wound, dermatitis etc. should cover them with a dressing that will prevent contamination from other sources.

10. Where possible, athletes and officials in the greatest risk sports, should wear protective eyewear to reduce the possibility of blood or bloody body fluids entering the eyes.

11. Review the athlete’s medical history to make sure that all routine vaccinations including tetanus and MMR (Measles, Mumps, Rubella) are up to date.

12. Biohazardous containers should be used for needles and scalpels or biohazardous bags for gloves, gauze, band-aids, etc., which have contacted bodily fluids.

13. For additional protection wear gowns to prevent contamination of clothing.

**DISINFECTION OF SURFACES AND EQUIPMENT**

During practice and competition, surfaces and equipment may become contaminated with blood and other body fluids. Because potentially dangerous microorganisms can survive on these contaminated surfaces for various periods of time, it is necessary to apply disinfecting procedures to interrupt cross-infection.

A solution of sodium hypochlorite (household bleach) at a 1:10 dilution is recommended, but not required as the agent of choice for cleaning hard surfaces after all spills of blood or body fluids. These solutions should be prepared fresh, and not older than 24 hours. It is not recommended to use sodium hypochlorite solutions on carpets or rugs; however, sanitary absorbent cleansers may be used on these items. Agents labeled as "hospital disinfectants" are also acceptable cleaning agents and will eliminate the human immunodeficiency virus (HIV) & hepatitis B virus (HBV). HIV and HBV are resistant to many commonly used agents. Common agents that eradicate HIV and HBV include, but are not limited to: Lysol, hydrogen peroxide, betadine, glutaraldehyde, isopropyl alcohol, and Np-40 detergent. Chemical germicides registered with the Environmental Protection Agency (EPA) as sterilants are recommended for high-level disinfecting.

The mechanics of scrubbing are much more important in eliminating organisms than selected cleansing agent. The end result of scrubbing and rinsing should be the thorough removal of all contaminated materials.

The following simple precautions set forth the necessary elements for handling spills of blood or other body fluids:

1. Wear impermeable gloves, usually latex.

2. Contain the spill in the smallest area possible by absorbing the spill with paper towels.
3. If the spill is on a hard surface, decontaminate with a (1:10 dilution) of hypochlorite bleach or comparable solution.

4. Re-clean area with fresh towels.

5. If the spill is on a rug or carpet, use a sanitary absorbent agent according to directions.

6. Place all soiled waste in a moisture resistant bag.

7. Remove gloves and wash hands.

8. Trash and waste contaminated with blood or bloody body fluids should be regarded as potentially infectious and treated as biohazardous material.

9. Soiled linens and uniforms should be handled as little as possible to prevent microbial contamination of the air and persons handling the linen and uniforms. All soiled material should be bagged where it was used, double bagged if there is a chance of leakage, and transported to the laundry. If hot water is used, the soiled articles should be washed with detergent in water at least >70 degrees Celsius/126° F and with solutions known to inactivate the HIV/HBV virus should be used.

See the Blood Borne Pathogens Policy and Exposure Control Plan in the AT Program Handbook for more information.
POLICY: Athletic Team Travel

PURPOSE: To provide athletic training students with appropriate information if given an opportunity to travel with an athletic team.

LAST REVIEWED: August 2008

Western Illinois University
Athletic Training Program

Athletic Team Travel Policy

Athletic training students at WIU may be granted several opportunities to travel with the intercollegiate or high school teams as one of the benefits to your involvement with the athletic programs. If you are granted this opportunity, you are expected to do so and you must conduct yourself with the utmost professionalism. Remember, you are not only representing yourself, but the Athletic Training Program, and WIU as well. You are to adhere to the dress code as stipulated by the coach or Preceptor. If no guidelines have been established, it is important that students dress properly as you are representing the athletic training profession.

Athletic training students will not travel without the accompaniment of an athletic trainer. Travel requirements are at the discretion of the Preceptor of the clinical education rotation. If the Preceptor requires students to travel with their respective teams, then the athletic training student is expected to discuss each travel opportunity with their respective professors and make arrangements for any missed work. Only 5 academic days are allowed to be missed in each semester per the University policy. Students, who refuse to travel, if the Preceptor’s policy for that clinical education rotation requires travel, will be referred to the Program Director for disciplinary action.

When traveling, you are required to use the transportation provided by the institution (i.e. WIU Athletics bus or high school bus) for that particular team or event. You are also required to carry a kit, emergency numbers, and insurance information. If an athlete is transported to the hospital, you may be asked to accompany the athlete. Be sure to take the athlete’s insurance information with you and request copies of all doctor visits, emergency room discharge papers, and x-ray/lab results.
**POLICY:** Transporting Athletes to Medical Facilities

**PURPOSE:** To provide athletic training students with appropriate information regarding transporting athletes to medical facilities.

**LAST REVIEWED:** September 2005

Western Illinois University
Athletic Training Program

Transporting Athletes to Medical Facilities Policy

There are situations that may arise where an athlete needs to be transported to a medical facility while in the care of an athletic trainer. An injury or illness may occur that is life threatening and is considered an emergency situation. An injury or illness may occur that is not life threatening but still requires medical attention. There may be still other situations where an athlete has a follow-up care appointment with a physician but does not have his/her own means of transportation. The athletic trainers are considered the primary care providers for the specific athletic team, therefore, it is their responsibility to provide transportation for athletes in need while under their direct care. The following is an explanation of the specific situations that may arise.

I. Emergency Situations (Always Follow Emergency Action Plan for Specific Site)

An emergency is any situation in which an injury or illness occurs that is life or limb threatening. The following steps should be taken by the athletic trainer and athletic training student in order to provide proper transportation for an athlete in an emergency situation:

A. Identify the situation as an emergency and call 911. Provide all required information to ensure that the ambulance will arrive as quickly as possible. NEVER TRANSPORT THE ATHLETE YOURSELF IN AN EMERGENCY SITUATION. Always rely on the Emergency Medical System for transportation in an emergency.

B. When the ambulance arrives, direct it towards the location of the athlete.

C. The athletic trainer (AT) is responsible for accompanying the individual to the hospital. In the event that the AT is unable to go, s/he is responsible for locating a coach or upper level (411/401/311) athletic training student to accompany the athlete to the hospital. If the parent of the athlete is present, s/he may accompany the athlete instead.
II. Non-Emergency Situations

An example of a non-emergency situation is when the athlete suffers an injury or illness that is not life or limb threatening but still requires immediate medical attention. The following steps should be taken by the athletic trainer and athletic training student in order to provide proper transportation for an athlete in a non-emergency situation:

A. The athletic trainer is responsible for the transportation of the athlete to the medical facility.

B. If the athletic trainer cannot leave due to responsibility of covering the rest of practice or competition, s/he is responsible for finding another Athletics staff member to transport the athlete to the medical facility, or call the Office of Public Safety.

C. In more serious cases, such as if the athlete is unable to walk, call the Office of Public Safety.

D. A licensed University vehicle must be used to transport an athlete so that the Athletics staff driver is covered under the University’s liability insurance. PERSONAL VEHICLES SHOULD NEVER BE USED WHEN TRANSPORTING AN ATHLETE.

E. There will be one set of keys in each athletic training room for the University vehicle. The keys should be kept in the top desk drawer in the office of each athletic training room. The keys are only to be removed when using the University vehicle and put back as soon as they are done being used.

F. The University vehicle should be parked in Brophy Hall parking lot or in the faculty section of Q lot.

G. Only the athletic trainer or Athletics Department staff members are allowed to drive the University vehicle.

H. **No athletic training student shall transport an athlete to a medical facility at any time.**

III. Physician Appointments

There may be times when the athlete is unable to provide their own transportation to a physician’s office for an appointment that was arranged by the University athletic training staff. The following steps should be taken by the Athletic Trainer in order to provide transportation for an athlete to a physician’s office.

A. If the athletic training staff has made an appointment for an athlete locally and
the athlete is unable to provide transportation, it is the responsibility of the athletic trainer to transport the athlete to the appointment.

B. If the athletic trainer is unable to transport the athlete, s/he is responsible for finding another staff member in the Athletics Department to transport the athlete to the appointment.

C. If the athletic training staff has made an appointment for an athlete out of town, it is the responsibility of the athletic trainer to transport the athlete to the appointment.

D. If the athletic trainer is unable to transport the athlete to the out of town appointment, it is his/her responsibility to find another athletic trainer to transport the athlete to the appointment.

E. If another athletic trainer cannot be found to transport the athlete to the out of town appointment, it is the responsibility of the athletic trainer to then find another Athletics Department staff member to transport the athlete.

F. A licensed University vehicle must be used to transport the athlete so that the driver is covered under the University’s liability insurance. PERSONAL VEHICLES SHOULD NEVER BE USED WHEN TRANSPORTING AN ATHLETE.

G. There will be one set of keys in each athletic training room for the University vehicle. The keys should be kept in the top desk drawer in the office of each athletic training room. The keys are only to be removed when using the University vehicle and put back as soon as they are done being used.

H. The University vehicle should be parked in Brophy Hall parking lot or in the faculty section of Q lot.

I. Only the athletic trainer or Athletics Department staff members are allowed to drive the University vehicle.

J. No athletic training student shall transport an athlete to a physician’s appointment at any time.
POLICY: Record Keeping

PURPOSE: To provide athletic training students with the expected guidelines for medical records and proper documentation for the AT Program.

LAST REVIEWED: July 2004

Western Illinois University
Athletic Training Program

Record Keeping Policy

Record keeping is a very important role of the athletic trainer and AT Program. It is your responsibility to learn the necessary forms and the proper way to complete each form. The following is a list of the types of records that will be used in the athletic training rooms: 1) daily treatment record-a checklist of all treatments received in the athletic training room; 2) rehabilitation report-a record of all rehabilitation exercises performed by the athlete; 3) injury report/evaluation-a report of an injury that occurs that requires follow-up care.

All athletic training students are expected to maintain accurate and up-to-date documentation. This includes daily treatment logs, injury evaluation/reports, and daily rehabilitation exercises. Accurate record keeping is an important, often overlooked facet of athletic training. It is necessary to protect the student-athlete and ourselves. No medical file is permitted to leave the athletic training room. Complete all documentation before you leave for the day.

Athletic training students are encouraged to do new evaluations if they feel comfortable with the injury present. However do not hesitate to ask the Preceptor for assistance. You can begin a new evaluation even if you do not know how to do the whole evaluation. Start with a thorough medical history and then proceed with the HOPS method for the evaluation process. Specific key elements of AT Program record keeping are as follows:

1. An Injury Report or Evaluation must be completed for any injury that was evaluated.

2. A report must be filled out regarding that athlete by the end of the same day the evaluation was completed.

3. All reports are to be checked and initialed by the Preceptor.

4. Filling out reports is a necessary learning tool and reduces liability.

5. The athletic training student must sign the report as well as the Preceptor or consulting MD.
6. All athletes with an injury/illness must have it documented in the medical record.

7. All athletes reporting to the athletic training room & receiving treatment/rehabilitation must be logged.

8. All medications/drugs issued to anyone must be logged in medication log or medical record.

9. All athletes’ appointments with physicians must be documented.

10. All telephone conversations with an athlete’s physician should be documented.

11. All athletic training students should use only those modalities with which they have been formally instructed/competent and under the direct supervision of a Preceptor.

12. The use of every modality must be documented in the athlete’s medical record with the specific parameters and location.

13. Always briefly re-evaluate every athlete receiving treatment—before & after treatment; do not get caught up in a routine.

14. To correct error in any medical record, you should put a single line through the error and then write your initials above the corrected error. Do not scribble out or use white out to correct an error.

15. Make sure you sign and date each entry and have it co-signed by your Preceptor.

16. The name of the athlete should be on every sheet of the medical records.
POLICY: Environmental Hazards

PURPOSE: To provide the AT Program staff a safe and reliable plan to handle environmental emergencies.

LAST REVIEWED: July 2004

Western Illinois University
Athletic Training Program

Environmental Hazards Policy

The following guidelines delineate the policies used by Western Illinois University’s Athletic Training Program to minimize the risk of injury from environmental hazards such as lightning, heat/cold exposure, or severe weather. These guidelines have been derived from NATA Position Statements (www.nata.org), OSHA guidelines (www.osha.gov) and the 2003-2004 NCAA Sports Medicine Handbook (www.ncaa.org). The guidelines are as follows:

Lightning Safety Policy:

While the probability of being struck by lightning is extremely low, lightning is a dangerous phenomenon that should be taken seriously by the athletic trainer and athletic teams that practice and compete outdoors. To minimize the risk of injury from a lightning strike, Western Illinois University’s Athletic Training Program has developed the following lightning safety policy to help in the education and prevention of this environmental hazard.

Chain of Command

Designated Weather Watcher:

- If inclement weather is forecasted for or sighted in Macomb and its surrounding areas, a member of WIU’s Athletic Training Staff (Athletic Trainer or Athletic Training Student) or a WIU equipment manager will actively monitor for the signs of threatening weather by internet via the National Weather Service.
- The Designated Weather Watcher will be responsible for notifying the activity supervisors/coaches if the severe weather becomes dangerous.

Activity Supervisors:

- The Athletic Trainer, the head coach, and/or his/her designee, and game official(s)/umpire(s) will be notified of the potential for a lightning strike or severe weather by the Designated Weather Watcher.
- The Athletic Trainer will be responsible for making the recommendation that all activities stop immediately and all individuals be removed from the field or activity.
• The responsibility for terminating an athletic activity in the event of lightning or severe weather lies with the WIU Athletic Trainer during practices or the WIU game official(s)/umpires(s) during competitions.
  o If a coach and/or game official(s)/umpire(s) continue to practice and/or continue with a contest or other activity despite a National Severe Weather Warning, the cancellation of classes, and/or verbal instruction by the WIU Athletic Trainer, they will be doing so against the recommendations of the WIU Athletics Department, and will be personally liable for any and all injuries.

Criteria to Suspend Activity & Evacuate Practice/Game Site:
The following criteria will be monitored and used by the Athletic Trainer covering the practice/game to determine suspension of an activity and evacuation of the practice/game site.

Lightning Detector
• Range for detector will be set at 3-8 miles
• Two subsequent readings on the detector in the 8-20 mile range regardless of the presence of visible lightning (This device is portable and will be in the possession of WIU’s athletic training staff) warrants all athletes and personnel must evacuate the fields and tennis courts and seek immediate shelter.

and/or

Flash-to-Bang Method
• Count the seconds from the time the lightning is sighted to when the clap of thunder is heard.
• Divide this number by 5 to obtain how far away, in miles, the lightning is occurring.
• If your calculation reveals lightning to be within 6 miles (a 30 sec. count between the flash of lightning and the bang of thunder) activity is to be suspended and everyone should seek shelter immediately.

Prior To Competition
A member of the Athletic Training staff will greet the officials, explain that we have a means to monitor lightning, and offer to notify the officials during the game if there is imminent danger from the lightning.

Announcement of Suspension
Once it has been determined that there is danger of a lightning strike, the Athletic Trainer will notify the head coach and/or official and subsequently immediately remove all athletes, coaches, and support staff from the playing field or practice area.

Evacuation of the Stands
During a competition, once the decision has been made to suspend activity, a representative of the Athletic Department will announce via the PA system something along the lines of: “Fans, we have been notified of approaching inclement weather. In the event of lightning, thunder, or
other severe weather, it is the policy of the WIU Athletic Department that all spectators immediately evacuate the bleachers and surrounding field/court areas. Fans are advised to immediately seek shelter in the nearest enclosed, grounded shelter (Baseball-Western Hall, Football-Western Hall, Soccer-Brophy Hall, Softball-Brophy Hall, Tennis-Brophy Hall). Although protection from lightning is not guaranteed, you may seek shelter in a hard-topped automobile until it has been determined that it is safe to return to the playing field/court and bleachers. Thank you for your prompt cooperation.”

Evacuation of the Playing Field
All athletes, coaches, officials, athletic training staff, and other personnel are to evacuate to the nearest enclosed grounded structure. A safe structure or location represents “any sturdy, fully enclosed, substantial, and frequently inhabited building that has plumbing and/or electrical wiring that acts to electrically ground the structure”.

• The nearest safe shelters for each WIU outdoor athletic activity are:
  o Cross Country Practice: Nearest suitable structure
  o Baseball Game or Practice: Western Hall
  o Football Practice: Brophy Hall
  o Football Game: Western Hall
  o Soccer (M & W) Game or Practice: Brophy Hall
  o Softball Game or Practice: Brophy Hall
  o Tennis Game or Practice: Brophy Hall

• Unsafe locations that commonly DO NOT meet the “safe structure” criteria include:
  o Baseball/softball dugouts
  o Baseball/softball “covered” batting cages
  o Canopy/ awning/ tent
  o Outside storage sheds
  o Under the bleachers

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

• If no safe structure or location is within reasonable distance, personnel should seek safety in the following locations:
  o Fully enclosed vehicles with a hard metal roof, rubber tires, and completely closed windows (no convertibles or gold carts)
    ▪ DO NOT touch the sides of the vehicle!
  o Thick grove of small trees surrounded by taller trees
    ▪ Minimize contact with the ground by assuming a “lightning-safe” position = crouched down position with feet together,
weight on balls of the feet, head lowered and ears covered.  
(NATA Position Statement, 2000)

- DO NOT LIE FLAT!
  
  o Flat area - do not choose open area where you will be highest object
    
    • Minimize contact with the ground by assuming a “lightning-safe” position = crouched down position with feet together, weight on balls of the feet, head lowered and ears covered.  
    
    (NATA Position Statement, 2000)

- DO NOT LIE FLAT!
  
  o Dry ditch without water (last resort)
    
    • Minimize contact with the ground by assuming a “lightning-safe” position = crouched down position with feet together, weight on balls of the feet, head lowered and ears covered  
    
    (NATA Position Statement, 2000)

- DO NOT LIE FLAT!

- If unable to reach safe shelter
  
  o Stay away from the individual trees, light poles, flag poles, or other tall objects
  o Stay away from all metal objects (fences, bleachers, lightning rods, etc.)
  o Stay away from standing pools of water or open fields
  o Do not stand in groups
  o Maintain 15 feet between each athlete, coach, etc.
    
    • Minimize contact with the ground by assuming a “lightning-safe” position = crouched down position with feet together, weight on balls of the feet, head lowered and ears covered  
    
    (NATA Position Statement, 2000)

- If a person feels his/her hair standing on end, skin tingle, and/or hears “crackling noises”
  
  o Immediately Minimize contact with the ground by assuming a “lightning-safe” position = crouched down position with feet together, weight on balls of the feet, head lowered and ears covered  
    
    (NATA Position Statement, 2000)
  o This sensation means that the person is in the lightning’s electric field and is going to be struck by lightning.

- If a person is struck by lightning
  
  o If an athlete, coach, umpire or any other person is struck by lightning, activate the Emergency Action Plan by calling 911.
  o A person struck by lightning does not carry an electrical charge and is safe to handle, so immediately survey the scene for safety and move the victim to a safer location (if needed).
  o Immediately begin CPR/AED to treat the “apparently dead” victim (if needed).
  o Apply First Aid as needed for common injuries from lightning strikes:  
    - hypothermia, shock, fractures and burns.
  o Get emergency help promptly
• **Activities to avoid during thunderstorm activity**
  o Taking showers and using plumbing facilities
  o Using land-line telephones except in emergency situations
    ▪ Cordless or cellular telephones are safer to use when emergency help is needed, as long as the person and antenna are located within a safe structure
  o Contact with metal objects

Criteria to Resume Activity and Return to Practice/Game Site
The following criteria will be used by the Athletic Trainer and officials/umpires to determine resumption of activity and return to the practice/game site.

**Activity may resume under the following conditions:**

  o Thirty (30) minutes AFTER the last lightning strike within an 8-20 mile range on the lightning detector.
    • Two consecutive readings on the lightning detector at the 20-40 miles away range and no activity in the 3-8 mile range is desired.

  o Thirty (30) minutes AFTER the last lightning strike or activity using the Flash-To-Bang method is recorded as being greater than 30 sec or within a 6-mile range.
    • Each time the “flash/bang” count goes below 30, lightning is observed and/or thunder is heard, the “30-minute clock” is to be reset
  o During a game situation, the activity will resume once the Athletics’ representative, Athletic Trainer, and officials have conferred and the above criteria have been met.

Off-Campus Athletic Venues and/or Non Supervised Activities
Examples: Athletes using facilities off-campus, in the off-season, or outside of regular practice hours.

In the event that athletes are using off-campus athletic venues or on-campus facilities without supervision, the following policies have been identified to educate the athletes in the use of the Flash-to-Bang method to determine the approximation of the distance of a potential lightning strike and other ways to keep themselves safe from severe weather. **NO METHOD OF LIGHTNING DETECTION CAN DETECT EVERY STRIKE.**

**Flash-to-Bang Method of Lightning Detection**

  • Count the seconds from the time the lightning “flash” is sighted to when the clap of thunder “bang” is heard.
  • Divide this number by 5 to obtain how far away in miles the lightning is occurring.
  • Ex.: If 20 seconds are counted between seeing the “flash” and hearing the “bang”
    o 20 divided by 5 = 4
Therefore the lightning is approximately 4 miles away.

- If the time between seeing the “flash” and hearing the “bang” is between 15-30 seconds (3-6 miles), teams should take precautions and seek safe shelter.
- The National Severe Storms Laboratory recommends that by the time the spotter obtains a “flash-to-bang” count of 15 seconds, all individuals should have left the athletic site and reached “safe shelter”.

**Keeping Safe from Severe Weather**

- Proceed indoors whenever you see thunderclouds forming
- Remain indoors until the storm passes
- Recognize warning signs of severe weather
  - Sudden decrease in temperature
  - Sudden change in humidity
  - Increase in air movement
  - Visible dark storm clouds
    - these may not be present during a lightning strike

**Heat Exposure:**

Heat stress is a serious but preventable issue when dealing with athletes who are working out or competing in a hot and humid environment. With proper education and recognition of signs and symptoms these risks can be dramatically reduced.

**Heat Exposure Conditions:**

1. **Heat Rash (Prickly Heat):** Occurs when skin is continuously wet with unevaporated sweat and is usually localized to areas of the body covered with clothing.
2. **Heat Syncope (Heat Collapse):** Occurs with rapid physical fatigue during overexposure to heat.
3. **Heat Cramps:** Extremely painful muscle spasm caused by excessive loss of water and electrolytes.
4. **Heat Exhaustion:** Occurs from an inadequate replacement of fluids lost through sweat. An athlete may develop heat cramps, become disoriented, light headed and have a noticeable decrease in physical performance prior to the onset of heat exhaustion.
5. **Heat Stroke:** **Serious, life threatening EMERGENCY.** The body loses its ability to dissipate heat through sweating. It occurs suddenly and without warning. The risk of death is reduced if the body temperature is lowered to normal within 45 minutes. Could result in permanent brain damage.

**Prevention of Heat Stress:**

1. **Maintain Hydration**
   - An average of 1.5 to 2.5L of water may be lost per 1 hour of activity.
   - Make sure there is an unlimited access to water.
   - Use a sport drink containing 5% glucose when activity lasts longer than 1 hour.
2. Gradual Acclimatization
   a. Requires work in the heat
   b. Graduated training program for first 7 to 10 and other abnormally hot and humid days.
3. Identify Susceptible Individuals
   a. Athletes with large muscle mass
   b. Athletes who are overweight
   c. Eager athletes who constantly compete at capacity
   d. Ill athletes who have an infection, fever, or gastrointestinal disturbance.
   e. Athletes who receive immunization injections and subsequently develop temperature elevations.
4. Clothing and Uniforms
   a. Lightweight, loose fitting at the neck, waist and sleeves; shorts and tee shirt at beginning of training
   b. Avoid excessive padding and taping
   c. Avoid use of long socks, long sleeves, double jerseys and other excessive clothing.
   d. Avoid use of rubberized clothing or sweat suits.
   e. Provide clean clothing daily – all items.
5. Weight Records
   a. Measure before and after; replace all lost body weight (20oz. per. 1lb. lost)
   b. At 2-3% loss of body weight an athlete is at risk of a health threat.
6. Temperature/Humidity Readings
   a. Wet Bulb Global Temperature before and during activity
      - Combination of heat humidity and bright sunshine
      - \[ \text{WBGT} = 0.1 \times \text{DBT} + 0.7 \times \text{WBT} + 0.2 \times \text{GT} \]

<table>
<thead>
<tr>
<th>Range</th>
<th>Signal Flag</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>82-84.9</td>
<td>Green</td>
<td>Alert for possible increase in index</td>
</tr>
<tr>
<td>85-87.9</td>
<td>Yellow</td>
<td>Active practice curtailed (unacclimatized)</td>
</tr>
<tr>
<td>88-89.9</td>
<td>Red</td>
<td>Active practice curtailed (except most acclimated)</td>
</tr>
<tr>
<td>90+</td>
<td></td>
<td>All training stopped, skull session only (demonstration)</td>
</tr>
</tbody>
</table>

Early Recognition of Heat Stress – Heat Rash:
1. Red, raised rash
2. Sensations of prickling and tingling during sweating

Care for Heat Stress – Heat Rash:
1. Keep skin dry by continually toweling the body
2. Move athlete to a cool environment and allow fluids
Early Recognition of Heat Stress – Heat Syncope:

1. Dizziness
2. Fainting
3. Nausea

Care for Heat Stress – Heat Syncope:

1. Lay athlete down in cool environment
2. Replace fluids

Early Recognition of Heat Stress – Heat Cramps:

1. Profuse sweating
2. Over exertion in heat
3. Cramping in calf or abdomen most common, but may occur in any muscle

Care for Heat Stress – Heat Cramps:

1. Immediate ingestion of large quantities of water
2. Mild stretching
3. Ice massage
4. *Taking salt tablets is not recommended*

Early Recognition of Heat Stress – Heat Exhaustion:

1. Excessive thirst
2. Dry tongue and mouth
3. Fatigue
4. Weakness
5. Lack of Coordination
6. Mental dullness
7. Small urine volume
8. Slightly elevated body temperature (~102°F)
9. Dizziness
10. Hyperventilation
11. Rapid pulse

Care for Heat Stress – Heat Exhaustion:

1. Ingestion of large quantities of water possibly intravenously
2. Place athlete in cool shaded area and sponge with cool water
3. Monitor body temperature (ideally rectal) to differentiate from heat stroke
4. Keep record of body weight to ensure fluid replacement
**Early Recognition of Heat Stress – Heat Stroke:**

1. Sudden onset, preceded by headache, vertigo, fatigue and flushed, hot skin
2. Probable loss of consciousness
3. Relatively less sweating than seen with heat exhaustion
4. Rapid, strong pulse (may reach 160-180 b/m)
5. Respiration increases but shallow
6. Blood pressure seldom rises
7. Rapidly increased body temperature to 105° - 106°F
8. Diarrhea and vomiting may occur
9. Circulatory collapse may produce death

**Care for Heat Stress – Heat Stroke**

1. Medical Emergency – Call 911
2. Monitor ABC’s, checking core temperature
3. Lower body temperature as quickly as possible using water immersion
4. Move athlete to cool environment
5. Strip athlete of all clothing
6. Sponge athlete with cool water and fan air over body
7. Massage limbs

**Cold Exposure:**

Although far less commonly seen and discussed than conditions from heat exposure, cold exposure can become a life-threatening condition if prevention and recognition methods are not properly addressed by the athletic training staff, student-athletes, and coaches. Therefore it is the responsibility of WIU’s AT Program to educate our student-athletes and coaches about the ways to help reduce the risk of cold exposure illnesses and the early warning signs of cold exposure conditions.

**Cold Exposure Conditions**

1. **Wind Chill** – can make activity uncomfortable and can impair performance due to declines in muscle temperature.

2. **Frostbite** – the freezing of superficial tissues, usually of the face, ears, fingers, and toes.

3. **Hypothermia** – a significant drop in body temperature, occurs with rapid cooling, exhaustion and energy depletion. Leads to failure of the temperature-regulating mechanisms of the body.

   *MEDICAL EMERGENCY*
Prevention of Cold Stress

1. Clothing
   a. Dress in layers
   b. Try to stay dry
   c. Wear wicking fabric (Polypropylene or wool) next to the skin of the body, hands, and feet
   d. Add lightweight pile or wool layers for warmth
   e. Use a windblock garment to avoid wind chill
   f. Wear a hat or cover the head
   g. Wear mittens to cover the hands (mittens are warmer than gloves)

2. Energy/Hydration
   a. Eating well-balanced regular meals and energy snacks
   b. Drink plenty of fluids including carbohydrate/electrolyte sports drinks
   c. Avoid alcohol, caffeine, nicotine, and other drugs

3. Fatigue/Exhaustion
   a. Maintain a regular sleep schedule
   b. Get plenty of rest and sleep

4. Warm-Up
   a. Warm-up thoroughly and keep warm throughout the practice or competition
   b. Time warm-up to lead almost immediately into competition
   c. After practice/competition add clothing to avoid rapid cooling

5. Partner
   a. Never train alone
   b. Avoid isolated trails

Early Recognition of Cold Stress – Frost Bite
1. Numbness and pain in the fingers, hands, toes, feet, ears, or nose
2. Burning sensation in the fingers, hands, toes, feet, ears, or nose
3. Pale, waxy-white skin color
4. Skin becomes hard and numb

Care for Cold Stress – Frost Bite
1. Move athlete to a warm dry area
2. Remove any wet or tight clothing that may cut off blood flow to the affected area
3. **DO NOT** rub the affected area (rubbing causes damage to the skin and tissue)
4. **Gently** place the affected area in a warm (105°F) water bath
5. Monitor the water temperature to **slowly** warm the tissue
   a. Warming takes about 25-40 minutes
   b. Do Not pour warm water directly on the affected area – it will warm the tissues too fast causing tissue damage
6. When normal feeling, movement, and skin color have returned, the affected area should be dried and wrapped to keep it warm
7. Seek medical attention as soon as possible

Early Recognition of Cold Stress - Hypothermia

1. Uncontrolled Shivering – means for the body to generate heat
2. Numbness and pain in the fingers and/or toes
3. Burning sensation of the ears, nose, or exposed flesh
4. Drop in core body temperature (below 95°F)
5. Cool, bluish skin
6. Sluggishness, poor judgment, and disoriented
7. Irritable, irrational behavior
8. Slowed and slurred speech
9. Clumsy movements
10. Fatigue or Drowsiness
11. Victim wants to lie down and rest

Care for Cold Stress – Hypothermia

1. Medical Emergency - Call 911
2. Monitor ABCs
3. Move athlete to warm, dry area
4. Remove any wet clothing
5. Replace with warm, dry clothing and wrap athlete in warm blankets
6. If athlete is alert, hydrate with warm, sweet beverages (sugar water or sports drinks)
   a. Avoid drinks with caffeine (coffee, tea, or hot chocolate) or alcohol
7. Have athlete move their arms and legs to create muscle heat
8. Place warm bottles or hot packs in the arm pits, groin, neck and head areas
   a. DO NOT rub the person’s body
   b. DO NOT place athlete in warm water bath
POLICY: Student Employment

PURPOSE: To provide students with the expectations of the AT Program with regards to employment.

LAST REVIEWED: August 2007

Western Illinois University
Athletic Training Program
Student Employment Policy

The Athletic Training Program will abide by the Western Illinois University Student Employment Handbook regarding this issue. However, as an athletic training student you are expected to be present and active in all assigned academic and clinical education experiences as part of the overall athletic training education and that failure to do so compromises your educational experiences. With this said, you may hold a part-time job outside of the AT Program only if the job does not interfere in any way with your assigned clinical education or educational responsibilities as determined by the AT Program staff.

If after reviewing your clinical education assignments and current semester course load, you choose to seek part-time employment, you agree to inform the AT Program Director in writing of this decision. You also understand the requirements, duties, and expectations listed in the Athletic Training Program Handbook. The following are two excerpts from the Handbook with regard to obtaining clinical education experience hours:

1) Each athletic training student must spend time in the athletic training rooms. To be eligible for Internship placement an athletic training student must have a minimum of 800 hours in the clinical education rotations under the direct supervision of an athletic trainer/Preceptor. Of these hours, each student must have experienced an upper extremity intensive sport, a lower extremity intensive sport, an equipment intensive sport, and have done a general medical rotation.

2) For a Western Illinois University AT Program student to accumulate 800 hours, the student would need to spend approximately 10-15 hours per week in the athletic training room during the 5 clinical education rotation courses. The athletic training student should expect to spend many evenings and weekends covering athletic events at Western Illinois University and the local high school. Our athletic training students will be expected to travel with some of the athletic teams from Western and the high school.
POLICY: Equipment Inspection

PURPOSE: To provide for the safe utilization of therapeutic equipment in the AT Program.

LAST REVIEWED: July 2004

Western Illinois University
Athletic Training Program

Equipment Inspection Policy

All equipment owned by the AT Program will undergo an annual safety inspection. This inspection includes the AT Program faculty and staff visual inspection of the item’s quality, durability, and therapeutic value based on the application of the equipment. The inspection also includes an annual safety inspection and calibration from an outside agency that specializes in medical equipment. Any equipment found unsafe, outdated, or in disarray will be removed from the clinical education settings.
POLICY: Clinical Instructor Ratio

PURPOSE: To provide students the assurance that their clinical education is of primary importance to the AT Program.

LAST REVIEWED: June 2011

Western Illinois University
Athletic Training Program

Athletic Training Student to Clinical Instructor Ratio Policy

1. It is the philosophy of Western Illinois University’s Athletic Training Program to provide students with a premier academic experience.

2. The clinical education aspect of the AT Program is of vital importance to the student’s educational experience.

3. Athletic training students are assigned to a Preceptor for the clinical education and field experience settings.

4. The ratio of athletic training students to Preceptor will not exceed 5:1 at any given time.
POLICY: Professional Growth

PURPOSE: To provide support to members of the AT Program staff for professional growth.

LAST REVIEWED: August 2007

Western Illinois University
Athletic Training Program

Professional Growth Policy

It is the policy of the Western Illinois University AT Program to provide monetary support for professional growth to its faculty and staff when available. The ATEP faculty and staff may receive money for attending conferences, workshops, etc. Monetary values are based on budget as well as position in the AT Program. The AT Program works closely with the Athletic Training Student Association and encourages student attendance at state, district, and national conferences. The AT Program has provided funding for student attendance at conferences and will continue to assist in this manner as funds allow.

Students are strongly encouraged to become a member of the Illinois Athletic Trainers Association (IATA) as well as the National Athletic Trainers’ Association (NATA). Membership to the NATA provides automatic membership to both the Great Lakes Athletic Trainers’ Association (GLATA) and the state association (IATA).
POLICY: Annual Review of AT Program

PURPOSE: To review various facets of the AT Program in order to support continual growth and improvement.

LAST REVIEWED: July 2004

Western Illinois University
Athletic Training Program

Annual Review Policy

The Athletic Training Program will be reviewed annually at the end of each school year by the AT Program faculty and staff. The annual review materials will consist of educational objectives, the off-campus site evaluations, didactic and clinical education evaluations, senior exit evaluations, student evaluations, Preceptor evaluations, BOC examination results, and placement results. In addition, the AT Program faculty and staff will discuss the previous year in terms of successes and failures in the classroom, clinical education setting, and field experiences. Based on the annual review and assessment, a plan will be developed to move the program forward in a positive fashion.

The educational/program objectives will be reviewed and based on the results of the review these objectives may be revised, modified, or developed. The purpose of the yearly review and assessment is to improve student achievement.
POLICY: Student-Athlete

PURPOSE: To provide AT Program expectations and guidelines for athletic training students who are also student-athletes.

ATTACHMENT: Student-Athlete Agreement Form

LAST REVIEWED: August 2007

Western Illinois University
Athletic Training Program

Student-Athlete Policy

1. It is the philosophy of Western Illinois University’s Athletic Training Program to allow students an opportunity to participate on an intercollegiate team if selected through the normal recruiting/try-out process.

2. The participation on an intercollegiate team will not factor into the admission decisions for the AT Program.

3. The clinical education aspect of the AT Program is of vital importance to the student’s educational experience and will not be sacrificed due to athletic team participation.

4. Student-athletes accepted into the AT Program must complete the Student-Athlete Agreement form to assure the athlete and the athlete's coaches understand and agree to cooperate with the AT Program to meet the program criteria for graduation.

5. The student-athletes admitted or seeking admission are encouraged to initiate conversation and explanation with their respective coaches regarding the AT Program’s educational requirements.

6. If requested, the AT Program Director will assist the student-athlete in discussing the educational requirements with the coaching staff.

7. Student-Athletes who are unable to make arrangements with their respective coaches/teams and do not achieve adequate progress toward gaining clinical education experience opportunities may require a/an additional semester(s) to complete their academic program.

8. Student-athletes admitted to the AT Program are encouraged to limit their participation on the intercollegiate teams to the traditional season only.
9. Student-athletes admitted to the AT Program are held to the same retention and graduation requirements as non-student-athletes admitted into the program.
STUDENT-ATHLETE AGREEMENT

I understand that by accepting admission into WIU's Athletic Training Program, I will be held accountable for the AT Program's, Kinesiology Department's, and University's retention and graduation requirements. Understanding this, I know that I will be responsible for participating in a minimum of 5 clinical education courses which have requirements for field experiences with WIU's intercollegiate teams, the Macomb High School interscholastic teams, and several off-site rotations to obtain valuable experience which will help prepare me for the Board of Certification examination.

I further understand that by participating on an intercollegiate team, I may not be able to acquire the appropriate (800) clinical education experience hours to be cleared for internship after my 6th semester in the AT Program. If this occurs, I understand that I will be required to take additional clinical education courses in order to complete my educational experiences.

I have discussed my intentions with my WIU coach(s) and provide signature verification below. I, too provide my signature as verification that I have read and understand the AT Program Policy for Student-Athletes.

____________________________________  ____________________________
Student-Athlete/AT Program Student     Date

____________________________________  ____________________________
WIU Athletic Team Coach                Date

____________________________________  ____________________________
AT Program Director                    Date

Dev 8/07
Western Illinois University
Athletic Training Program

Blood Borne Pathogens Policy and Exposure Control Plan

The following guidelines have been developed to be used by Western Illinois University’s Athletic Training Program to eliminate or reduce occupational exposure to blood or other body fluids. These guidelines have been comprised from the OSHA guidelines (www.osha.gov), NATA Position Statement (www.nata.org), and the 2004-05 NCAA Sports Medicine Handbook (www.ncaa.org). This policy covers both the sites of the Brophy Hall Athletic Training Room, Western Hall Athletic Training Room, Football Athletic Training Room, as well as the football fields, track, baseball/softball diamonds, tennis, and soccer fields.

Definitions

Blood Borne Pathogen - pathogenic microorganisms that can be potentially transmitted through blood contact and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and the human immunodeficiency virus (HIV).

Contaminated Laundry - laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.

Contaminated Sharps - any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

Contamination - the presence of blood or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

HBV - hepatitis B virus

HIV - human immunodeficiency virus

Exposure Incident - a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee’s/student’s duties.

Personal Protective Equipment (PPE) - specialized clothing or equipment worn for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts) not intended to function as protection against a hazard are not considered to be personal protective equipment.

Universal Precautions - an approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other blood borne pathogens.
Control Methods

Control methods include all the practices, precautions, equipment, and procedures to control pathogen exposure to employees and students. These control methods apply to all Western Illinois University sites but specific standards for each site will be explained in detail.

Universal Precautions
This concept requires that all athletic trainers and students assume that all human blood and other body fluids are infectious for HIV, HBV, and other blood borne pathogens. These precautions should be treated accordingly.

Universal Procedures
When performing tasks that involve body fluids and/or blood, athletic trainers/students must adhere to the following procedures:

1. Report any needle punctures, injury, or exposures to supervisor immediately.

2. Immediate access to cleaning supplies must be available for athletic trainers/students. Wash hands after contact with body fluids, blood, or articles containing body fluids or blood.

3. Protective gloves on both hands must be worn by athletic trainers/students during the handling of blood, body fluids, or articles containing body fluids or blood. Gloves should be disposed of immediately following each use. Wash hands immediately after removing gloves.

4. Wear a protective apron if body fluids or blood are in a large enough quantity to get clothing wet.

5. Wear a full-face mask or shield if there is a potential for splashing blood.

6. Remove contaminated substances immediately by placing the article in an appropriate container (e.g., biohazard container, sharps container).

7. All athletic trainers/students must take precautions when handling needles or sharp objects to prevent injuries or accidental punctures. A brush and dustpan should be used to handle these materials.

8. Soiled linens should be placed in impervious bags with as little handling as possible. Soiled linens should be bagged at the site where it was used and brought to laundry services.

9. Trash cans should be in visible sight with covered tops. Impervious bags should be used in the trash cans to avoid leakage or contamination.

10. Surfaces or containers that have been contaminated with body fluids or blood should be cleaned and disinfected.
**Personal Protective Equipment (PPE)**

Personal Protective Equipment (PPE) is a specific article of clothing or equipment, worn by the athletic trainers/student, to protect against body fluids or blood. The PPE should be at no cost to the athletic trainers/student and training for use of equipment should be provided by the University.

The following are types of PPE that may be used by athletic trainers/students:
- Gloves
- Gowns
- Masks
- Face shields
- Eye protection (goggles)
- Resuscitation bags
- Mouthpieces

These items are available at each athletic site in the following locations:
- Brophy Hall Athletic Training Room (located in cupboard marked Biohazard)
- Brophy Hall Pool (located in medical kit)
- Softball/baseball diamonds (located in medical kit or Brophy Hall Athletic Training Room)
- Tennis courts (located in medical kit or Brophy Hall Athletic Training Room)
- Soccer fields (located in medical kit or Brophy Hall Athletic Training Room)
- Western Hall Athletic Training Room (located in cupboard marked Biohazard)
- Football Athletic Training Room (located in cupboard above sink)
- Western Hall Arena (located in Western Hall Athletic Training Room)
- Hanson field/Track (located in medical kit, Western Hall Athletic Training Room, Football Athletic Training Room)

Other pieces of equipment are available for use by all employees/students, for proper disposal of contaminated items:
- OHSA approved disinfectant bleach or spray
- Designated receptacles
  - **Sharps Container:** Red, capped, puncture-resistant containers located on the countertops in Western and Brophy Hall Athletic Training Rooms
  - **Contaminated Waste Bins:** Covered garbage cans lined with biohazard bags located under taping tables in the Football, Western, and Brophy Hall Athletic Training Rooms

**Clean-up/Spills**

**General Procedure**
- Major body fluid or blood spills are cleaned up by the custodial staff by calling the Physical Plant (298-1834) and telling them the location of the spill.
- Small amounts of blood on surfaces may be handled by the athletic trainers/student.
- Gloves should be worn while disinfecting areas.
- Disinfectants like alcohol or chemicals containing a germicide should be used.
- Thoroughly wash all contaminated surfaces with disinfectants.
- Discard all contaminated towels in the contaminated waste bins.
- Towels or uniforms that contain a minimal amount of blood or body fluid can be treated with an OSHA approved product used to treat organic stains and then send to the laundry.
- Articles of clothing or towels soaked in blood or body fluid should be removed and placed in a biohazard bag or contaminated waste bin.

**Procedure for Waste Removal**

When contaminated waste bins are full at each location, bring the sealed bag to the BEU Health Center for disposal.

Please follow the Universal Precautions and Procedures when handling contaminated items.

**Specific Spills in Designated Locations**

**Western and Brophy Hall and Football Athletic Training Rooms**

Any surface area contaminated with blood or body fluid should be cleaned in the following manner:

- Wear latex gloves, remove blood or body fluid from area, and disinfect surface area with an approved OSHA disinfectant.
- Disposable needles or sharp objects should be placed in a sharps container (located on countertop).
- Contaminated dressings and bandages should be placed in contaminated waste bins (located under taping tables).

**Brophy Hall Pool**

In water: For blood or body fluid, call 298-1834 for clean-up. Swimming can resume after clean-up is completed.

On deck area: Block of area, call Physical Plant (298-1834) for clean-up. Disinfect area after clean-up.

**Baseball/Softball Diamonds/Football Practice Fields/Tennis Courts**

For all blood or body fluid: Clean area and disinfect area, call Physical Plant (298-1834) for clean-up if needed. Put all contaminated items in biohazard bags (located in medical kits) and bring into Brophy Hall Athletic Training Room (softball, tennis) and Western Hall Athletic Training Room (baseball, football). Place biohazard bags in contaminated waste bin.

**Hanson Field/Track**

For all blood or body fluid: Clean area and disinfect, call Physical Plant (298-1834) for clean-up if needed. Put all contaminated items in biohazard bags (located in medical kit) and bring to Western Hall Athletic Training Room. Place biohazard bags in contaminated waste bins.
**Exposure Evaluation Plan**

In the event an exposure incident occurs, these procedures should be followed:

1. The athletic trainer/student should report the incident immediately to the supervisor.

2. First aid should be applied if needed, as well as proper disposal of contaminated items.

3. If a chance of HIV or HBV, have the source individual’s blood tested. The athletic trainer’s/student’s blood may also be tested to rule out possible infection.

4. If infection of HIV or HBV occurs, counseling should be recommended as well as medical evaluation.

5. All first aid, medical evaluation, and counseling should be provided by: BEU Health Center

6. All important information about the exposure should be documented and reported to the healthcare professional including:
   - A copy of the standard
   - A description of the athletic trainer’s/student’s duties
   - Medical history
   - Information relative to the exposure incident