



Athletic Training

Master of Science in Athletic Training Curriculum Handbook

April 16, 2024

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Section I: Program Information

Vision Statement

To be leaders who positively influence the profession of athletic training through continuous innovation and a culture of excellence.

Mission Statement

To develop clinicians through culturally inclusive, engaging, and complex learning experiences.

Values

- Innovation
- Professionalism
- Cultural & Personal Humility
- Evidence Driven
- Engagement

Goals and Outcomes

Goal 1: Students will demonstrate knowledge, skills, and behaviors of entry-level athletic trainers prepared for professional practice according to the BOC Practice Analysis 7th Edition.

Student Learning Outcomes:

SLO 1.1 – Students will earn a B- or better on all AT courses.

SLO 1.2 – Students will be rated 80% or better on their clinical proficiency skills each semester.

SLO 1.3 – Students will earn an 80% or better on all practical exam assessments (e.g. practicals, standardized patient cases, OSCEs, etc.) within two attempts each semester.

SLO 1.4a – Students will earn a “Level 3” rating on 100% of their clinical skills milestone evaluations by graduation.

SLO 1.4b – Students will earn a “Level 3” rating on 100% of their foundational behavior milestone evaluations by graduation.

SLO 1.5 – Students will demonstrate the ability to provide quality documentation suitable to pursue reimbursement.

SLO 1.6 – Students will rate themselves as confident on each ACES Self-Reporting Assessment competency.

SLO 1.7 – 100% of students will pass the BOC Exam on their first attempt following completion of the program.

SLO 1.8 – After taking the BOC[®] Exam, the majority of students will rate themselves as prepared or well prepared on the BOC Preparedness Survey.

Goal 2: To provide dedicated and qualified professionals who provide a quality learning environment. [Faculty evaluations, preceptor evaluations, program report]

Program Outcomes:

- 2.1 Faculty will earn an average rating of 4 or better on their mean faculty evaluation score.
- 2.2 Preceptors will earn an average rating of 4 or above on each criterion on their preceptor evaluations averaged over the year.
- 2.3 Clinical sites will earn a recommendation for continued use for clinical education by providing frequent learning opportunities (3 or above) and routinely following appropriate policies (e.g. OSHA, NCAA, EAPs, etc.).

Goal 3: To be faculty role models to students who demonstrate a contribution to the advancement of the profession through scholarly activity or service.

Program Outcomes:

- 3.1 Faculty will meet scholarship and service goals annually as determined with AUH on their Faculty Anticipated Activity Plan.
- 3.2 Faculty will lead preceptor training and continuing education to advance professional skills and mentoring abilities of our preceptors that earns an above average rating on the post-workshop survey.

Goal 4: To provide a quality education that prepares students for transition to practice.

Program Outcomes:

- 4.1 The majority of students report feeling prepared or well prepared on all items in the alumni survey.
- 4.2 The program will work to define the key factors that significantly influence team learning and performance when working in interprofessional health care teams in order to develop an interprofessional education assessment tool.
- 4.3 The program will determine how to intentionally infuse simulations/SPs across the curriculum to facilitate and assess critical decision making.

Program Overview

The Athletic Training Program at JMU was approved by the National Athletic Trainers' Association (NATA) in 1982 and is currently accredited by the [Commission on Accreditation of Athletic Training Education \(CAATE\)](#). JMU's program was the first accredited undergraduate program in the Commonwealth of Virginia and maintains a rich tradition of producing outstanding athletic training clinicians and educators. The ATP holds accreditation through 2029-2030, the next scheduled re-accreditation evaluation cycle.

For more information regarding the JMU MSAT program, including prerequisite and admission requirements, please refer to the following website:

<https://www.jmu.edu/chbs/healthprof/at/index.shtml>

MSAT Faculty

Follow the link below for a current listing of current faculty in the MSAT program:

<https://www.jmu.edu/chbs/healthprof/at/directory.shtml>

Kirk Armstrong	Professor Academic Unit Head
Jamie Frye	Professor Program Director
John Goetschius	Associate Professor
Thomas M. Newman	Assistant Professor Clinical Education Coordinator
Connie L. Peterson	Associate Professor

Non-Discrimination Statement

University Statement on Non-Discrimination and Non-Retaliation¹

James Madison University does not discriminate and prohibits discrimination in its employment, programs, activities, and admissions on the basis of age, color, disability, gender expression, gender identity, genetic information (including family medical history), marital status, military status (including veteran status), national origin (including ethnicity), parental status, political affiliation, pregnancy (including childbirth or related medical conditions), race, religion, sex, sexual orientation, or on any basis protected by law, unless otherwise permitted or required by law.

Retaliation Prohibited

Intimidation, threat, coercion, or discrimination against any individual for the purpose of interfering with any right or privilege under this policy, or because the individual has made a report or complaint, testified, assisted, or has participated in any manner with an investigation, proceeding, or hearing regarding alleged violations of this policy is prohibited and may result in sanctions separate from, and not dependent on, the outcome of any report or formal complaint under this policy.

Link: Policy 1302 Equal Opportunity and Non-Discrimination

<https://www.jmu.edu/jmu-policy/policies/1302.shtml>

MSAT Statement

James Madison University does not discriminate on the basis of race, color, national origin, religion, gender, age, veteran status, political affiliation, sexual orientation or disability. The MSAT Program also does not discriminate on any of the above bases, however, enrollment in the MSAT Program does require the ability of the student to meet the Technical Standards for the duration of the program ([see Technical Standards section of the Handbook](#)).

Definition of Terms

Preceptor – A certified/licensed professional who teaches and evaluates students in a clinical setting using an actual patient base.

Athletic Training Student (ATS) – A student formally enrolled in the professional phase of the athletic training curriculum.

Clinical Education – A broad umbrella term that includes three types of learning opportunities to prepare students for independent clinical practice: athletic training clinical experiences,

simulation, and supplemental clinical experiences. Clinical education may occur for a minimum period of two academic years (4 semesters) and be associated with course credit.

Direct Supervision – Direct supervision refers to the close monitoring of the athletic training student during the clinical experience. The preceptor must be physically present and have the ability to intervene on behalf of the athletic training student and the patient. Only clinical hours that occur under the direct supervision of a preceptor are recognized by CAATE and JMU's Athletic Training Program. Radio or cell phone contact **does not** constitute direct supervision and is an infraction of JMU's clinical policies.

Clinical Education Requirements – Students must complete a variety of clinical experiences that incorporate varied client/populations through the lifespan (for example, pediatric, adult, elderly), different sexes, different socioeconomic statuses,, varying activity and athletic ability (for example, competitive and recreational, individual and team activities, high- and low-intensity activities), and who participate in non-sport activities (for example, participants in military, industrial, occupational, leisure activities, and performing arts). Simulation may be used to meet portions of these experiences.

Clinical Setting – A clinical setting is a clinical environment where health care services are provided. The clinical setting shall include the athletic training facility, athletic practices, competitive events, physician's clinics, physical therapy clinics, hospital emergency rooms, and various allied health care settings. The student must be supervised by an appropriate preceptor while in these settings.

Clinical Proficiencies – The entry-level athletic training clinical proficiencies define the common set of skills that entry-level athletic trainers should possess. Proficiencies require the students' integration of individual pieces of knowledge and skills (educational competencies) in a decision-making situation. The clinical proficiencies demonstrate learning over time. Whenever possible, proficiencies are assessed in a real-time environment/situation such as evaluating a real patient. Simulated evaluations are used to supplement real-time learning situations.

Simulation – An educational technique, not a technology, to replace or amplify real experiences with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner. Simulation may be facilitated by a preceptor in a clinical environment or may be completed in a class environment when directed by a faculty member.

Use of Athletic Training Professional Terminology

The field of Athletic Training is frequently misunderstood among other health care professions/professionals regarding our educational preparation, roles and responsibilities, credentials, etc. To help raise the level of awareness of our profession, we ask that all students, staff, and faculty always use proper professional terminology when referring to our profession and our clinical settings. This includes referring to ourselves as “athletic trainers” who work in “athletic training rooms or clinics” rather than using terminology such as “trainer” and “training room.”

Section II: Curriculum Aspects

Upon Admission to the Program and Accepting The Graduate School Offer:

1. Complete the Newly Admitted Graduate Student Requirements found at: <https://www.jmu.edu/grad/newly-admitted-students.shtml>
2. Complete the New Graduate Student Checklist: <https://www.jmu.edu/grad/current-students/orientation/new-student-checklist.shtml>
 - a. Course Enrollment Dates: <https://www.jmu.edu/advising/enrollment/datesdeadlines.shtml>
 - b. Summer I 4-week Courses to Register for:
 - i. ATEP 511 Foundations of Athletic Training (3 credits)
 - ii. ATEP 526 Therapeutic Interventions I (3 credits)
 - c. Summer II 6-week Courses to Register for:
 - i. ATEP 525 Lower Extremity Orthopedic Examination (3)
3. Register with Office of Disability Services (If you received accommodations while obtaining your undergraduate degree, we recommend registering with ODS when you accept your admission offer.): <https://www.jmu.edu/ods/getting-started.shtml>
4. Review The Graduate School Orientation: <https://www.jmu.edu/grad/current-students/orientation/index.shtml>

Potential Additional Requirements Once Admitted to the AT Program

Students admitted to the AT Program *may* also be required to submit the following additional information:

- Provide proof of Student Malpractice Insurance coverage. Students enrolled in a clinical practicum have liability coverage through the Commonwealth of Virginia, however, it is strongly recommended that students purchase additional liability insurance. This insurance is available through the following agencies:
 - **Healthcare Providers Service Organization (HPSO)**
<http://www.hpso.com/individuals/professional-liability/student-malpractice-insurance-coverage-description?refID=WW2GWi>
1-800-982-9491
 - **Proliability**
<https://www.hpso.com/Insurance-for-you/Students-recent-graduates?refID=WW2GWi>
1-800-375-2764

Athletic Training Program Fees

Students in the AT Program will encounter additional annual expenses associated with the program. All costs are based on annual estimates yet could be subject to vendor changes. Those expenses include:

- Apparel: Due to the rising cost of athletic training apparel and the number of students in the AT Program, students should be prepared to purchase JMU Sports Medicine apparel. (Approximately \$30 - 75). Students may elect to purchase additional clothing.
- Travel expenses to clinical sites: Students must provide their own transportation to their clinical sites. Expenses for this travel are the student's financial obligation and may be up to \$500 per semester. Travel costs will vary due to gas costs, distance to site, and personal vehicle fuel efficiency. There may be public transportation available to assist students to some of the off campus clinical sites.
- Annual CPR certification renewal: These rates vary annually due to inflation of American Red Cross certification and recertification rates. (approximately \$30/year if taken through the AT Program + \$11 for a CPR mask).
- (Highly Recommended) Personal liability insurance: Provide proof of Student Malpractice Insurance coverage. Students enrolled in a clinical practicum have liability coverage through the Commonwealth of Virginia; however, it is strongly recommended that students purchase additional liability insurance. Estimates from Proliability by Mercer for student malpractice insurance are approximately \$50 per year. Students obtaining clinical education experiences outside of Virginia may be required to purchase personal liability insurance.
- Criminal Background Check & Fingerprinting Fees: if required by a clinical site. If background checks/fingerprinting are required at any point for the student to gain clinical access or to remain in the program, the cost of those tests are the student's responsibility. Costs will vary but are estimated to be between \$20-100. Students may encounter these costs multiple times while in the program.
- Drug Screening: if required by a clinical site. If drug screens are required at any point for the student to gain clinical access or to remain in the program, the cost of those tests/screens is the student's responsibility. Costs will vary but are estimated to be approximately \$80. Students may encounter these costs multiple times while in the program.
- Tuberculosis Test: if required by a clinical site. The University Health Center offers TB tests for \$10.
- Meals: Students may need to supply their own meals while on campus for orientation, pre-season, and during the semester.
- BOC certification exam: In the final semester of the program while enrolled in ATEP 664 Clinical IV: Transition to Practice, most students sit for their national certification examination through the Board of Certification. Exam and application fees range between \$450 (NATA Student Members) and \$475 (Non-NATA Members).
- NATA dues: Students are encouraged to become and remain members of the NATA for the duration of the Program. Annual membership for a student's costs varies by state but range between \$50-115.
- ACES workshop: Year 2 students are required to participate in the ACES exam prep workshop as part of Clinical Education IV. Exact fees may fluctuate yearly but will be approximately \$160 and may be tied to a course fee.

Financial Assistance

Financial assistance information is found in the Graduate Catalog at:

<http://catalog.jmu.edu/content.php?catoid=13&navoid=434>

Annual Requirements

Students must complete the following items annually once accepted to the AT Program:

- CPR/AED training and re-training
- Bloodborne Pathogens re-training
- HIPAA & FERPA re-training
- Maintain immunizations up-to-date; complete a TB screen
- Technical Standards verification form
- Communicable Disease Policy form
- Commitment to Excellence form
- Confidentiality form
- Personnel Contact information form

Orientation

All students accepted into the athletic training curriculum are required to take part in orientation and clinical experiences that occur during pre-season. During this time, athletic training students are formally introduced to policies and procedures related to the JMU AT Program. Orientation may be offered in asynchronous and synchronous distance learning formats or in person.

Students entering the program that foresee a conflict in scheduling with any aspect of the orientation/pre-season (i.e. wedding, study abroad, etc.) should contact the Program Director in writing as soon as possible asking for a request for absence. The athletic training faculty and staff will review the appeal request and make a decision regarding a potential absence during pre-season. Only under special circumstances are absences granted (i.e. vacations will not qualify for exemptions from pre-season). If an exception is approved, circumstances will be discussed so that the student has an opportunity to plan accordingly. If the request is denied, the student must attend orientation and pre-season or has the option of deferring enrollment until the following year. Submitting an appeal for a pre-season waiver does not affect the AT Program admission decision.

Course Sequence*

The following schedule is the curriculum plan for AT students.

Summer I	Fall I	Spring I
ATEP 511 Foundations of Athletic Training (3)	ATEP 512 Emergency Management of Injuries & Illnesses (3)	ATEP 613 Clinical Applications of Human Gross Anatomy (5)
ATEP 525 Lower Extremity Orthopedic Examination (3)	ATEP 535 Upper Extremity Orthopedic Examination (3)	ATEP 624 General Medicine for the Athletic Trainer Part I (3)
ATEP 526 Therapeutic Interventions I (3)	ATEP 536 Therapeutic Interventions II (3)	ATEP 646 Therapeutic Interventions III (3 credits)
ATEP 520 Pre-Season Clinical Education Experience I (1)	ATEP 521 Clinical I: Psychosocial Concepts and Cultural Sensitivity (3 credits)	ATEP 632 Clinical II: Nutrition & Exercise (3 credits)

Total credits = 9-10	Total credits = 12	Total credits = 14
Summer II	Fall II	Spring II
ATEP 647 Evidence Based Practice in Athletic Training (3) ATEP 660 Administration in Athletic Training (3) ATEP 652 Pre-Season Clinical Education Experience II (1) Total credits = 7	ATEP 634 General Medicine for the Athletic Trainer Part II (3) ATEP 653 Clinical III: Professional Development (6) Total credits = 9	ATEP 664 Clinical IV: Transition to Practice (6) ATEP 657 Applications in Evidence Based Practice (1) ATEP 645 Hip, Pelvis and Spine Orthopedic Examination & Rehabilitation (2) Total credits = 9

**This list is provided as an advising resource only. Official curricular requirements are listed in the JMU Graduate Catalog. In case of discrepancies, the University Catalog is the official curriculum students must follow. This document was reviewed by Jamie Frye and Kirk Armstrong on May 30, 2023.*

Simulation Requirements

- **Simulation definition:** Educational techniques used to replace or amplify real experiences that evoke or replicate substantial aspects of the real world (i.e. practicals, SPs, OSCEs, CPR checks, etc.)
- **Clinical Education Simulation Score Requirements:** Students must achieve 80% on all practical examinations given in the professional phase of the AT Program, which also includes their CPR/AED re-checks. If a student fails to achieve a grade of 80% on an exam, he/she must repeat the exam within a set time (usually within one week). The grade on the initial practical exam will be used to calculate the course grade. Passing grades for all clinical education simulations must be earned to pass each course. Only one retake is allowed per clinical education simulation. Not passing on the second attempt will prohibit you from passing the course.
- **Exam Retakes:** Students may fail/retake up to five practical exams without penalty during the professional phase of the AT Program. After the fourth failed practical exam, the student will be placed on probation. If a sixth practical exam is failed, the student will be dismissed from the program.

Capstone Project

Completion of the Capstone Project is a graduation requirement of the program. Project completion requirements are outlined in the [Capstone Project Handbook](#). Students begin working with their assigned faculty member to outline the project in the spring of year 1 and continue working on it during the rest of the program.

Professional Conduct

The athletic training student is expected to abide by the code of conduct established in this curriculum manual, the James Madison University Student Standards of Conduct, the NATA Code of Ethics, and policies set forth by the student's clinical education site.

Any student who violates the law (including local ordinances), JMU Standards of Conduct, or AT program professionalism or conduct standards is subject to disciplinary action in accordance with applicable law or policy. James Madison University and the Athletic Training Program reserve the right to hold students accountable for certain types of behavior outside of the clinic and classroom environment. Disciplinary action will result if a student's behavior compromises the educational atmosphere or mission of the institution in the classroom and at clinical placements. Examples of such unprofessional behavior would include, but not be limited to, public intoxication, crimes of violence, sexual misconduct and/or alcohol or drug violations, as determined by the Office of Student Accountability & Restorative Practices or the AT Program, as appropriate. Students are required to disclose legal charges or violations to the Athletic Training Program as these charges or violations may prohibit placements at clinical sites or the ability to sit for the Board of Certification Exam.

The Athletic Training Program Director, and in some situations the JMU Associate AD for Integrated Health & Sports Performance or Office of Student Accountability & Restorative Practices, is responsible for imposing any and all penalties for infractions of athletic rules/regulations, academic violations, or professional misconduct. The source of the penalty depends on the type of infraction (AT program-related, Athletic Department, or University related).

If the Athletic Training Program Director and/or the JMU Associate AD for Integrated Health & Sports Performance allege a violation of University or athletic department rules/regulations or unprofessional behavior, the athletic training student may be suspended from the clinical assignment pending an investigation. If found responsible for a violation, the student may be permanently dismissed from the clinical assignment. In most cases, the student will also be suspended or dismissed from the athletic training curriculum. In these cases, and for episodes of unprofessional conduct, documentation will be placed in the athletic training student's permanent file. The athletic training student may appeal the suspension/dismissal. The route taken is determined by whether the violation is an athletic training curriculum matter or an athletic matter (see *Appeal/Grievance Process*).

Dismissal from a clinical site jeopardizes the ability to be placed at other clinical sites. Clinical education is a mandated part of the athletic training curriculum. It is the student's responsibility to maintain professionalism in all aspects of life. Failure to maintain professionalism will result in dismissal from the program.

Classroom Conduct Expectations

In order for all of JMU students to benefit maximally from the classroom experience, everyone must behave in a mature, professional manner. The following guidelines are provided to assist in making the classroom experience beneficial for all students.

1. Follow General Regulations outlined by The Graduate School. See: <http://catalog.jmu.edu/content.php?catoid=43&navoid=1744>

2. Follow the Master of Science in Athletic Training (MSAT) Curriculum Handbook.
See: https://healthprof.jmu.edu/at/documents/MSAT_CurriculumHandbook.pdf
3. Class attendance is mandatory for all courses in the MSAT degree program.
4. Attend classes prepared and eager to engage in the learning process. This entails being mentally present and having assignments completed. It is essential to minimize distractions, such as inappropriate use of technology, side conversations, disruptive eating or drinking, or excessively leaving the classroom.
5. Breaks in classes are meant to be “bio breaks” to attend to restroom breaks, getting a quick drink or a quick snack. They are not technology breaks. Be quick to resume to class activities.
6. Bring a mature, professional demeanor to each class and professional interaction.
7. It is expected that you have prepared for the day’s class by reading the material posted for that day’s class content and that you participate in class activities.
8. Be respectful – Remember that classmates and teachers are real people. It is essential to keep in mind the feelings and opinions of others, even if they differ from your own. If you wouldn’t say it to someone’s face, don’t say it online either.
9. Communicate professionally including professional language, professional tone in person and in writing.
10. Don’t post or share (even privately) inappropriate material that could damage your professional reputation.
11. Additional rules and regulations associated with student conduct are detailed in the University’s Student Handbook.
12. Failure to abide by all of these rules and regulations may lead to a variety of disciplinary actions including but not limited to:
 - i. A failing grade
 - ii. Removal from this class
 - iii. A summons to appear before the Judiciary Council
 - iv. Being placed on probation
 - v. And/or expulsion from the university

Retention Requirements

The following outlines retention requirements established by The Graduate School for all graduate students.

Satisfactory Progress

If, at any time, a graduate student fails to make satisfactory progress toward the degree, the student may be denied permission to continue in the program. Such a decision may be based on grades, grade point average, comprehensive examination, thesis or dissertation performance, or other factors relevant to the student's academic program. Recommendations regarding satisfactory progress may be made by the student's adviser, graduate program director, academic unit head or The Graduate School. Recommendations are referred to The Graduate School for final action.

Remediation

All students must meet minimum MSAT program benchmarks on written exams and clinical education simulations assessments (see benchmarks below). If a student does not meet minimum program benchmarks on an assessment, they will be required to complete remediation for that assessment. The grade earned on initial assessment attempts will be used to calculate the course grade. Students will have one remediation attempt to meet the benchmark.

- Written Examinations: >70%
- Clinical Education Simulations: >80%
 - Ex. practicals/standardized patients/OSCEs

Academic Warning

A graduate student will receive a notice of academic warning upon receiving a grade of "C" in any two graduate courses or if the student's grade point average falls below 3.0. This academic warning will be noted on the student's transcript. All credits attempted and all grades earned, whether passing or failing, will be used to calculate a student's grade point average.

Academic Dismissal

A student will be dismissed from the degree program if the student receives an "F" or "U" in any graduate course or the student receives a total of three "C" grades. A student dismissed from the degree program may not enroll in any graduate-level courses for a period of one year. Students who want to return to the university must reapply and be re-accepted in the usual manner.

Disciplinary Action

Academic Warning and Dismissal

Students are placed on academic warning and may be dismissed from the AT Program if they fail to maintain satisfactory progress in the program. Satisfactory progress and the resulting consequences of failing to maintain satisfactory progress are below. Failure to make progress in more than one area while in the program will result in AT Faculty review to determine probation or dismissal actions.

Situation/Scenario	Consequence/Action
A student earns a score of <70% on written exams or <80% on clinical education simulations.	The student is required to complete remediation as outlined by the course instructor.
A student earns two "C" grades.	The student is placed on academic warning.
A student fails 4 simulations, including CPR/AED re-checks	The student is placed on academic warning.
A student fails 6 simulations, including CPR/AED re-checks	The student is automatically dismissed from the AT Program.
A student receives an overall clinical <u>midterm</u> evaluation of "needs remediation" by preceptors	The student is required to have a meeting with program administration and an action plan will be put in to place to address concerns and is likely to include academic warning.
A student receives an overall clinical <u>final</u> evaluation of "needs remediation" by preceptors	AT Faculty will assess reasoning for unsatisfactory clinical evaluation grade and will determine further action. The action taken may result in remediation, academic warning, dismissal from the AT program. Overall performance in the program will be considered when determining actions.

A student commits either a single act of extreme unprofessionalism or repeated acts of general unprofessionalism.	Egregious unprofessionalism will result in immediate dismissal from the AT Program. Repeated acts of general unprofessionalism will result in probation with possible dismissal thereafter.
A student is dismissed from their clinical site.	Dismissal from a clinical site will be evaluated by AT Faculty and will minimally result in academic warning and most likely in dismissal from the AT Program.
Note: A student may be dismissed from the Athletic Training Program for unethical behaviors or practices. Examples of such behaviors include, but are not limited to, cheating or other academic dishonesty, stealing, blatant disrespectful behavior toward faculty, staff, or fellow students, misrepresentation of oneself in the profession, blatant disregard for JMU's Athletic Training professional policies, unprofessional acts on and off campus, under the influence of any substance, intoxication, sexual harassment or misconduct, or criminal behavior resulting in the involvement of local law enforcement.	

Academic Warning

An academic warning is imparted on students who fail to meet appropriate academic or professional standards of the AT Program. The probationary period serves as a monitoring and remediation period for the student as well as a warning to students that they must improve their performance to remain in the program. The following helps define probation.

A student on probation:

- May be restricted from travel with teams.
- May have limited clinical hours per week in the clinical settings and would not be allowed to volunteer for additional clinical hours.
- May be restricted from game day participation.
- May be required to participate in study tables or complete remedial work with the academic graduate students, etc.
- May be required to repeat a semester/year prior to progressing further in the AT Program (due to course offerings and reason for being on probation).
- Will be dismissed from the AT Program for failure to correct problem areas for a second consecutive semester.
- Will have his/her case reviewed by a committee of AT faculty. The committee may decide individual restrictions or requirements for the clinical settings during the probationary period, depending on the reason for probation. In some instances, a student on probation may be limited to observation hours only, with continued skills practice on peers only.
- Will be required to improve deficient areas. A remediation contract will be established by the AT faculty. Contracts will be constructed according to the individual student's needs.

Dishonesty

Athletic training students are held to a high standard in regard to honesty and integrity. Any student found to be dishonest with regard to academic or clinical work will be dealt with firmly, most likely resulting in dismissal from the AT Program.

Appeal / Grievance Process

All grade review appeals must be done through The Graduate School to activate the formal grade review process. Those procedures are found at:

<https://catalog.jmu.edu/content.php?catoid=13&navoid=425#grade-review-procedures>

After a disciplinary decision (academic, clinical, or professional) has been imposed, a student may file an appeal. Procedures are listed below.

The appeal/grievance process for the AT Program is as follows:

- The student must make his/her appeal/grievance in writing to the AT Program Director within *two weeks* of being notified of disciplinary action. The student must state the basis for the appeal and include all materials that may substantiate the appeal.
- Once an appeal is received, a committee will be assembled. The committee will be formed on an as-needed basis and will be comprised of five members. Members will include Athletic Training faculty, department faculty, and/or clinical preceptors. The committee will review the appeal within two weeks from the date of receiving the appeal/grievance and will notify the student of their decision in writing within five business days of the meeting date.
- If the student disagrees with the committee's decision and wishes to take further action, the student must then appeal, in writing, to the Academic Unit Head (AUH) within five business days of receiving the AT Appeals Committee's decision. The AUH will issue a decision within three days of receiving the student's appeal.

AT Faculty will review continuance within the academic program or clinical education during the appeal process on a case-by-case basis.

Graduation Requirements

The athletic training student is expected to meet all Graduate Degree Completion Requirements. These are found in the Graduate Catalog at:

<http://catalog.jmu.edu/content.php?catoid=13&navoid=425#graduation>

Section III: Clinical Aspects

Clinical Education Experience/Requirements

The faculty and staff in the Department of Health Professions, Athletic Training Program, and the Department of Sports Medicine at James Madison University make every effort to promote educational and positive learning opportunities for athletic training students. Clinical education experiences provide an opportunity for the athletic training student to integrate the knowledge learned in the classroom into the clinical setting. To benefit maximally from the classroom and the clinical education settings, athletic training students should communicate regularly with their instructors and preceptors. Regular communication helps enhance the student's ability to utilize psychomotor, cognitive, and affective skills related to athletic training proficiencies and promotes the greatest amount of learning and growth.

Students are assigned to clinical experiences by the AT Program Clinical Education Coordinator in consultation with the AT faculty, the Director of Sports Medicine, and the preceptors. Clinical assignments take into consideration several factors including, but not limited to, the students' goals, previous assignments (site and preceptor), personalities, strengths and weaknesses, and clinical experience needs. The majority of each student's clinical experience will be under the supervision of an athletic trainer. JMU AT students must complete clinical experiences that involve the clients/patients:

- Throughout the lifespan (e.g. pediatric, adult, elderly)
- Of different sexes
- With different socioeconomic statuses
- Of varying levels of activity and athletic ability
- Who participate in non-sport activities

Also, it is a desire of the JMU AT Program to ensure its students gain experience in a variety of clinical experiences. Thus, most AT students, if not all, will at some point be assigned to an off-campus setting. It is the students' responsibility to meet with their preceptor at the beginning of their clinical experience to map out their approximate schedule for that clinical rotation (i.e. approximate clinical schedule, days off, and potential scheduling problems such as exams or classes). In addition, students must review the emergency action plans of their assigned venue and review all professional behavior or policy expectations with their preceptor at the beginning of each clinical rotation.

Students should practice previously learned skills and knowledge and incorporate their knowledge and skills into the clinical settings. Athletic training students must be instructed on athletic training clinical skills prior to performing those skills on patients.

The information below addresses several clinical areas, these standards are the minimum standards for students. If any sites incorporate higher standards, the student is to abide by those higher standards set by the individual clinical site. Alternatively, if any site's standards are more lenient than the AT Program's, students must follow the standard maintained by the program.

Failure to abide by professional standards may result in dismissal from the clinical site, failure of the associated Clinical course, and/or dismissal from the AT Program.

Year 1:

One credit hour of clinical education equals a minimum of 80 hours/semester. First year Clinical courses devote 2 credits to clinical education, thus the minimum clinical hour expectation is 160 hours to minimally pass the course. Year 1 clinical rotations are for the full 15-week semester. Students should expect to be at their clinical education site approximately 12-15 hours per week, thus expecting a variable range of accrued hours between 180-225 hours (students may exceed 225 hours). Students should expect to exceed 160 hours; thus, it is not appropriate to obtain 160 hours and discontinue attending your clinical assignment. All students should be given at least one day per week off.

If students wish to obtain more than 20+ hours per week to meet their professional goals, students can apply for additional volunteer hours with the Clinical Education Coordinator using the Volunteer Hour Application which asks the student to clearly outline their goals and how they can appropriately complete the additional hours while managing academic requirements. The student's application will be reviewed by the program faculty. Students in good academic standing, demonstrating strong progress in the program, and who have both faculty and preceptor support will be considered for additional clinical hours. The application can be found within practicum course materials and eValue documents.

Year 2:

Pre-Season Clinical Education Experience

All students must complete ATEP 652 Pre-Season Clinical Education Experience II, beginning on approximately August 1 for a total of four weeks while enrolled in a clinical course devoted only to clinical education. One credit of clinical education equals a minimum of 80 hours/semester, thus students must complete a minimum of 80 clinical hours and four weeks of clinical education to earn credit for the course, however, should anticipate earning approximately 200 clinical hours to see the totality of care for pre-season patient care and must complete all four weeks of the clinical experience.

Full and Semi-Immersive Clinical Education Experiences

One credit hour of clinical education equals a minimum of 80 hours/semester. Second year Clinical courses devote 6 credits to clinical education; thus, the minimum clinical hour expectation is 400 hours to minimally pass the course. The final two clinical courses in Year 2 involve immersion experiences: a full-immersion for half each semester (approximately 7-8 weeks) that will provide students exposure to the totality of care while taking minor coursework (i.e., one clinical course) and a semi-immersive clinical experience for half of each semester (approximately 7-8 weeks) that prioritizes clinical education while taking reduced didactic coursework (i.e., one clinical course and one full didactic course).

- Full-Immersion: Students are expected to aim for 240 hours per full-immersive portion of the semester (averaging about 30-35 hours per week).
- Semi-Immersion: Students are expected to aim for 160 hours per semi-immersive portion of the semester (averaging about 23-28 hours per week).

- Total Immersion Semester: Within the 15-week semester, the students must complete all 15 weeks of clinical education and obtain a minimum of 400 hours per semester (variable range of 23-35 hours per week). Students who elect to accrue hours outside of the academic semester (i.e., basketball clinical education during winter break) may apply these hours to their semester totals and may have decreased clinical time at the end of the semester if clinical sites are not active.
- The student must spend enough time at the clinical site for the preceptor to expose the student and evaluate them on the totality of care by being at the site full-time.
- All students should be given at least one day per week off during a Sunday-Saturday period.
- If immersion students wish to obtain more than 40+ hours per week to meet their professional goals, students can apply for additional volunteer hours with the Clinical Education Coordinator using the Volunteer Hour Application which asks the student to clearly outline their goals and how they can appropriately complete the additional hours while managing academic requirements.

Year	Semester	Clinical Course	Expected Clinical Hours Per Week*	Required Clinical Education Opportunities
1	Summer	No Clinical Experience in Summer, Year 1		
	Fall	ATEP 521: Clinical I	12 – 15 hours	15 weeks
	Spring	ATEP 632: Clinical II	12 – 15 hours	15 weeks
2	Summer	ATEP 652: Pre-Season Clinical Experience II	30 – 35 hours	~ 4 weeks
	Fall	ATEP 653: Clinical III	Full Immersive (First Half) 30 – 35 hours Semi-Immersive (Second Half) 23 – 28 hours	15 weeks
	Spring	ATEP 664: Clinical IV	Semi-Immersive (First Half) 23 – 28 hours Full Immersive (Second Half) 30 – 35 hours	15 weeks
Total	5 Clinical Experiences		Min = 1,200, Max = 2,400	64 weeks

**These expected clinical hours are an estimated range of hours that students historically complete during each week of the semester associated with a specific clinical course. Some students will complete more than the expected clinical hours per week listed above.*

Beginning Clinical Assignment

During the semester, the Clinical Education Coordinator will release a clinical assignment announcement. At this time, unless otherwise directed by the Clinical Education Coordinator, it is the student's responsibility to contact their clinical preceptor. Contact information for each preceptor will be sent out by the Clinical Education Coordinator.

Absence from Clinical Setting

Presence at clinical rotations is a critical component of the educational success of the athletic training student. Therefore, students are expected to attend their clinical assignments according to their pre-determined schedule set by the preceptor during their initial conference with the student. Students should expect to attend most practices and competitions with the team/preceptor to which they are assigned. Students should communicate regularly with their preceptor to determine their arrival/departure times, schedules, and potential conflicts. If an emergency situation arises that a student cannot attend a scheduled clinical experience, they should contact their preceptor and notify them of the situation *immediately*. Repeated absences or tardiness will not be tolerated and will be reflected in the Practicum evaluation and, therefore, the Practicum grade. Excessive tardiness or absence may result in probation, dismissal from the clinical site and/or an “unsatisfactory” grade in the Practicum. Excessive absences are any absences not communicated to the preceptor and missing more than three scheduled clinical experiences.

Injury During Clinical Education

Should a student be injured during their Clinical Education report the injury to their preceptor and the education program immediately. Depending on the severity of the condition and the time of day, students should seek appropriate care (i.e. University Health Center, ER, etc.). The program will follow-up with an incident report.

Outside of the Semester Requirements

Students may elect to continue their clinical assignments during these times. Examples include winter break and post-season play that falls outside of the assigned clinical semester.

Outside Employment and Athletic Training

Outside employment during the MSAT Program is very difficult. Athletic training requires many hours in the classroom as well as in the clinical setting. We do not prohibit outside employment; however, we suggest students limit outside employment to a maximum of 15 hours per week when possible. Please communicate your plans to work with the program and your Preceptor to determine the feasibility of obtaining quality clinical education experiences while pursuing outside employment.

Conduct with Patients/Athletes

Athletic training students must understand that individuals they meet during clinical experiences are their patients or potential patients. A professional demeanor should be exercised at all times in and out of the clinical setting.

Dating/Fraternizing with Patients/Athletes

Athletic trainers dating or fraternizing with athletes (i.e. their patients) can lead to compromising situations and is highly discouraged. In the event an athletic training student is dating an athlete or has a relationship beyond the professional level, this relationship should be disclosed to the program. The Associate A.D. for Integrated Health & Sports Performance and the AT Program Clinical Coordinator of Education or Program Director must be made aware of such relationship immediately so that appropriate actions can be taken to avoid potentially contentious

circumstances. Under NO circumstance should the relationship manifest itself (i.e. physical, verbal, emotional) while in the athletic training room, at clinical venues, while traveling with the team, or while otherwise engaged in AT-related activities with the team. Failure to comply with this policy could result in dismissal from the program.

Dating/Fraternizing with AT Graduate Assistants or Staff

The graduate assistant and staff athletic trainers are in supervisory roles over athletic training students. This supervision includes completing evaluations, assigning evaluation scores, providing mentoring, etc. Athletic training students should refrain from dating or closely fraternizing with the graduate assistants or staff members since these relationships can lead to compromising situations.

Travel with Teams

It is a privilege to travel with a team and the preceptor. While traveling with a team, the athletic training student is to carry themselves professionally and abide by all team rules and regulations, including conduct, punctuality, and dress code. If an athletic training student plans to travel either to or from an athletic event apart from the team, they are expected to receive advance clearance from the coach and staff athletic trainer for their plans. In all cases, though individual travel is not encouraged, the student must notify the Clinical Coordinator of Education of the decision to travel separately and must understand they are traveling under their own liability. When traveling with a team, the athletic training student is expected to conduct themselves in a manner that will reflect positively on the University, the team, and the individual.

In addition, students planning on traveling with a team should *request* permission from their professors to miss class in order to travel. Students should never simply *tell* a professor they will be missing a class. The request should be done in person and with plenty of advanced notice whenever possible. Faculty members have the right to deny the request or count it as a class absence. Students are expected to submit any assignments that are due prior to departure. As well, it is the student's responsibility to make up missed work or assignments immediately upon return.

General Professional Conduct

- Be professional, behave ethically, and demonstrate integrity in all professional settings (i.e., athletic training facilities, classrooms, on campus, when traveling, etc.).
- Stay alert at practices. Students should not be sleeping, conversing excessively, messing around, on cell phones, etc. during practices.
- Be quick to find ways to help patients, preceptors, or each other. Seek ways to be involved.
- Maintain professionalism when airing complaints and frustrations you may have.
- Speak professionally avoiding crude or offensive language.
- Avoid discriminating remarks or anything that could be taken as discriminating by

someone. The Athletic Training Program does not discriminate on the basis of race, color, national origin, religion, gender, age, veteran status, political affiliation, sexual orientation or disability (in compliance with the Americans with Disabilities Act) with respect to employment or admissions or in connection with its programs or activities. Any inappropriate comments or actions will be addressed immediately with the individual(s) involved and could result in dismissal from the program. Athletic training students alleging misconduct by a coach, staff member, or student should follow [University guidelines](#) to report incidents and receive support.

- Refrain from conversations involving personal matters (i.e. dates, parties, etc.) while in the athletic training room or while working in any of your clinical settings. Inappropriate conversations may result in dismissal from the clinical site and may jeopardize future clinical placements.
- Be considerate and respectful to all with whom you interact, including athletes, staff, faculty, coaches, team officials, and fellow students. At no time should the athletic training student challenge or otherwise become disrespectful to a staff, faculty member, or game official. Failure to maintain respectful composure may result in disciplinary action.
- Students within the MSAT will work with observation students at the clinical sites. Professional phase students should always treat the observation students respectfully. Professional phase students should act as a student mentor by showing the students around the clinical site, politely challenging their current knowledge level, and introducing them to the profession of Athletic Training. Failure to facilitate a respectful relationship may result in disciplinary action.

Smoking, Tobacco, and Alcohol and Drug Policy

A zero-tolerance policy is in effect with respect to consumption and drug use (including smoking or vaping) in all professional settings (i.e., athletic training facilities, classrooms, on campus, when traveling, etc.) so that sound, rational decisions can be made at all times. Any athletic training student violating this policy may be dismissed from the clinical site and/or the entire Athletic Training Program.

Cell Phone Use

The use of personal cell phones is permitted for clinical and emergency purposes only while at clinical sites. It is clearly recognized that some individuals will use their cell phones as a means of communication for clinical and emergency purposes, and, therefore, they will be allowed to carry their phones and keep them on. However, if it is determined that an individual is using a cell phone inappropriately (personal phone calls, text messaging, etc.) during clinical times, personal cell phone usage will be revoked from that individual and disciplinary action may occur for repeated violations. Cell phones should be turned onto vibrate while you are at your clinical site.

Social Media & Dating Apps

Athletic training students are highly encouraged to set all social media sites to private to avoid any potential issues in the clinical setting or classroom environment. Athletic training students who are currently enrolled in a clinical course should not be friends with or following the patients/student-athletes/coaches from their clinical site on any form of social media which includes, but is not limited to, Facebook, Twitter, SnapChat, Instagram, FaceTime, TikTok, Twitter/X, LinkedIn, dating apps, etc. Any situation that is deemed as an unprofessional act on social media is subject to action by the AT Program that may result in probation or dismissal from the program.

Dress Code

Each athletic training student is expected to present themselves in a manner that promotes a professional physical appearance and represents JMU in a highly professional manner. Acceptable dress when assigned to clinical experiences is as follows. These are the minimum acceptable standards; however, a preceptor may require that you comply with higher standards.

Acceptable dress includes:

- JMU Sports Medicine apparel
- Chino style shorts/pants (neutral colors such as khaki, navy, gray, black)
- Technical pants (i.e., jogger or straight leg style pants made with technical fabric in neutral colors)
- Close toed shoes
- Prescribed game day attire

Clothing must have professional coverage and fit that is not tattered or restrictive. At no time may an athletic training student wear: blue jeans, sweatpants, leggings, gym shorts, torn, tattered, restrictive, or inappropriate clothing when at their clinical sites. The dress requirement may only be elevated by a preceptor. Personal hygiene should be well maintained. Jewelry should be kept minimal to prevent interfering with patient care. Clinical sites may ask students to remove or cover jewelry or tattoos.

Identification

Professional phase athletic training students must wear identification during clinical education to identify their role as an athletic training student on and off-campus. The name tags should be worn on either the shirt collar or pants waistband but must be readily visible when providing patient care.

Identification is provided by the Athletic Training Program. Students are responsible for replacing lost identification. In the event you lose your identification, you should notify the Clinical Education Coordinator. You have one week to find or purchase your new identification. Failure to wear identification can result in removal from your clinical site.

Off-duty Attire

JMU Athletic Training/Sports Medicine apparel should only be worn when a student is representing themselves as an athletic training student in assigned clinical settings. Official athletic training room clothing should not be worn to social events on/off campus.

Direct Supervision Policy

It is the policy of the JMU AT Program that all affiliated sites directly supervise all athletic training students. The preceptor must be physically present and have the ability to intervene on behalf of the athletic training student and the patient. In the event that a preceptor is unable to provide direct supervision the athletic training student must discontinue care until direction supervision resumes.

Clinical Education Experiences Documentation

All clinical hours are documented in eValue. Hours should be entered on a daily basis, including off-days. Students should request that their preceptor approve their hours on a weekly basis. Preceptors should also record any pertinent information regarding the student's behavior/performance (praises or concerns).

Confidentiality of Records

Confidentiality of the patients' medical records must be maintained at all times, as these are considered legal documents. Records are not permitted to leave the clinical site. Any questions or concerns from the press, professional scouts, or others must be directed to the preceptor. The records may not be taken out of the facility or photocopied under any circumstances. Anyone with access to medical documents will fully comply with all regulations set forth by the Health Insurance Portability and Accountability Act (HIPAA). Athletic training students must remember that discussing the status of a patient with others is forbidden. This is considered a breach of confidentiality. The athletic training student must be aware of their surroundings at all times when the health status of a patient is being discussed. This is a serious program violation and will minimally result in academic warning and will most likely result in dismissal from the program.

Communicable Disease Policy

If a student becomes ill with something that is highly contagious (flu, chicken pox, mononucleosis, conjunctivitis, COVID-19, etc.), they are to notify their supervising preceptor and the team physician so precautions can be taken to prevent infecting others. Arrangements will also be made to alter their clinical experience as is appropriate. We do not wish to infect patients or other athletic trainers, so, depending on the nature of the student's illness, they may be excused from the clinical rotations until they are no longer contagious.

Clinical sites may have vaccination requirements for athletic training students. Vaccines may need to be acquired and verified prior to the start of clinical education.

The entire Communicable Disease Policy is located in the [Forms Section](#) of this document.

Bloodborne Pathogen Exposure Policy Overview

See full exposure control plan in Section IV.

All students are required to complete annual online JMU Bloodborne Pathogen Training. A quiz follows the online training to document the students' competency in this area. Documentation of completion of the training and quiz will be kept in the program's student academic record.

Bloodborne pathogens are microorganisms present in blood or other body fluids that can cause diseases including AIDS, Hepatitis B, and Hepatitis C.

To protect yourself from exposure to these disease agents:

- Obtain the Hepatitis B vaccination series
- Follow Standard Precautions
- Treat all human blood, tissue, and body fluids as infected.

Emergency Procedures

In an emergency situation involving a bloodborne pathogen, always use Universal Precautions and minimize your risk for exposure by wearing appropriate personal protective equipment and using the safe practices that you have been trained to use during your annual Bloodborne Pathogen Training.

What to do if you are exposed

If eyes, nose, or mouth become contaminated, use eye wash stations, drench hoses, or a running water source to flush the contaminated area. If you don't have access to an eyewash station following an exposure, flush at a regular sink.

Flush as soon as possible and continue to flush for a **full 15 minutes**. Always try to flush away from the nose to prevent contamination of the other eye. After flushing, go to University Health Center if open or to Sentara RMH Medical Center for medical consultation.

For exposed skin surfaces, wash the exposed area thoroughly with soap and water. Use a non-abrasive, antibacterial soap if possible. Again, after washing, seek medical attention at University Health Center if open or to Sentara RMH Medical Center for medical consultation.

Report the exposure to your Preceptor, Program Director/Clinical Education Coordinator, and the Director of Sports Medicine (if applicable) within 24 hours of the exposure. Documentation of the exposure will be made and kept in your permanent record.

The full Exposure Control Policy is located in Section IV in the handbook, eValue, and the AT Program Website.

Health Insurance Portability & Accountability Act (HIPAA) Training

All students are required to complete annual HIPAA Training. This training is provided through the Athletic Training Program using an online format. A quiz follows the online training to document the students' competency in this area. Documentation of completion of the training and quiz will be kept in the program's student academic record.

Family Educational Rights & Privacy Act (FERPA) Training

All students are required to complete annual online FERPA Training. This training is provided through the Athletic Training Program using an online format. A quiz follows the online training to document the students' competency in this area. Documentation of completion of the training and quiz will be kept in the program's student academic record.

Dismissal From Clinical Site

Dismissal from a clinical site does not guarantee your placement at other clinical sites. Students cannot graduate from the athletic training program without meeting their clinical education requirements.

Section IV: Technical Standards

Taken/adapted from the NATA Education Council Guidelines

History and Rationale:

The landmark Americans with Disabilities Act of 1990, P.L. 101-336 (“ADA” or “the Act”), enacted on July 26, 1990, provides comprehensive civil rights protections to qualified individuals with disabilities. The ADA was modeled after Section 504 of the Rehabilitation Act of 1973, which marked the beginning of equal opportunity for persons with disabilities.

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

Given the intent of Section 504 and the ADA, the development of standards of practice for a profession, and the establishment of essential requirements to the student’s program of study, or directly related to licensing requirements, is allowable under these laws.

In applying Section 504 regulations, which require individuals to meet the “academic and technical standards for admission,” the Supreme Court has stated that physical qualifications could lawfully be considered “technical standard(s) for admission.”

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

The following guidelines embody the physical, cognitive, and attitudinal abilities an Entry-Level Athletic Trainer must be able to demonstrate in order to function in a broad variety of clinical situations; and to render a wide spectrum of care to athletes and individuals engaged in physical activity.

The guidelines serve to recognize abilities essential to the development of these Entry-Level abilities. Further, the guidelines reflect the necessary and required skills and abilities identified for the Entry-Level Athletic Trainer as detailed in the NATA Athletic Training Educational Competencies and the Practice Analysis, 8th Edition, Board of Certification, Inc

Master of Athletic Training Program Technical Standards for Enrollment & Retention

The Athletic Training Program (ATP) at James Madison University is a rigorous and intense program. Students complete a professional education program that is both intellectually and physically challenging. The purpose of these Technical Standards is to articulate the demands of this program to students applying for admission to the program so they may compare their own capabilities to these demands. Secondly, it serves to articulate the requirements needed for retention once admitted to the program.

Applicants to this program are asked to verify that they understand the demands of the program and that they understand they will be required to complete the tasks, with or without reasonable accommodations, associated with performance as an athletic training student. Reasonable accommodation refers to the way in which James Madison University can assist students with disabilities to accomplish these tasks (i.e. providing extra time to complete an examination, enhancing the sound system in a classroom or providing a push cart for a student who may not have the strength to carry a heavy item for moderate distances).

Reasonable accommodation does not mean that students with disabilities will be exempt from certain tasks; it does, however, mean that the athletic faculty/staff will work with students with disabilities to determine whether there are ways to assist the students towards completion of these tasks while continuing to maintain the integrity of the Athletic Training Program and protecting the safety of all involved.

After acceptance into the professional phase of the program, a student who needs reasonable accommodation for disability must make a formal request to the ATP Director and must be prepared to provide documentation substantiating the claimed disability to the Office of Disability Services. A student may be administratively withdrawn if it becomes apparent that the student cannot complete essential tasks even with stated accommodation/s, the accommodations needed are not reasonable and would cause undue hardship to the program and institution, or that fulfilling the functions would create a significant risk of harm to the health or safety of others.

Students who have questions about this document or who would like to discuss specific accommodations should make an inquiry both with the Athletic Training Program Director and the James Madison University Office of Disability Services.

The following are considered Essential Tasks required for ATP Students to complete the Athletic Training Program:

Intellectual & Communication: A student must have sufficient intellectual competence and communication skills to complete the following essential tasks:

- Students must meet class standards for course completion throughout the curriculum.
- Students must communicate honestly.

- Students must be able to read, write, speak, and understand English at a level consistent with successful course completion, having the ability to communicate with athletes and successfully complete medical records.
- Students must complete readings, assignments, and other activities outside of class hours.
- Students must gather decision-making pieces of information during an injury assessment activity in class or in the clinical setting without the use of an intermediary such as a classmate, Graduate Assistant, or certified athletic trainer.
- Students must perform treatment and rehabilitation activities in class or in the clinical setting by direct performance or by instruction and supervision of intermediaries.
- Students must apply critical thinking processes to their work in the classroom and in the clinical setting, and must exercise sound judgment in the class and in the clinical setting.
- Student must possess the ability to make and execute quick, appropriate and accurate decisions in a stressful environment.
- Student must be able to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm.
- Students must be able to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this include, but is not limited to, the ability to establish rapport with athletes, communicate judgments and treatment information effectively
- Students must be able to record the physical examination results and a treatment plan clearly and accurately

Motor Function & Sensory: A student must have sufficient motor function, neuromuscular strength, coordination, sensory awareness, and stamina to complete the following essential tasks:

- Students must be able to sit and stand for long periods on a daily basis.
- Students must be able to ambulate indoors and outdoors over various terrains.
- Students frequently stand and walk while providing support to an injured patient.
- Students must frequently independently lift equipment or provide lifting support to an injured patient.
- Students frequently exert force to push or pull objects, sometimes while ambulating long distances.
- Students must be able to frequently twist, bend, and kneel on the floor for extended periods.
- Students frequently coordinate verbal and manual activities with gross motor activities.
- Students must use auditory, tactile, and visual senses to receive classroom instruction and to evaluate and treat injured patients.
- Students may work within an electrical field.
- Students must have adequate vision to correctly see activities across the field, mat, or court.
- Students must have basic neurological function to perceive hot, cold, change in contour of surface/body part.
- Students frequently need bladder and bowel control to perform assigned duties.
- Students must have sufficient postural and neuromuscular control, sensory function, and strength and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely, and efficiently use equipment and material during assessment and treatment of patients.

Behavioral & Emotional: A student must possess the ability to act professionally and have the emotional and mental health required to complete the following essential tasks:

- Students must maintain professional standards set in place by James Madison University and the JMU Athletic Training Program in addition to State and National ethical and professional standards of conduct.
- Students must follow safety procedures established for each class and clinical setting.
- Students must attend classes and clinical assignments punctually.
- Students must have the capacity to maintain composure and continue to function well during periods of high stress.
- Students must be able to remain focused and demonstrate emotional stability in the academic and clinical setting.
- Students must have the perseverance, diligence, and commitment to complete the athletic training program as outlined and sequenced.
- Students must demonstrate affective skills (i.e. emotions and attitudes) and appropriate demeanor and rapport that relate to professional education and quality patient care.
- Students must be able to maintain professional relationships with program constituents (patients, fellow students, faculty, staff, preceptors, graduate assistants, etc.).
- Students must respect the rights, welfare, and dignity of all program constituents and not display discriminatory practices.
- Student's behavior during class and clinical education must not be a distraction to other program constituents.
- Students must maintain a professional personal appearance and hygiene representative of a healthcare provider in the classroom and clinical setting.
- Students must be substance free when attending all classes and clinical assignments.

Annual Requirements: A student in the professional phase must complete the following essential tasks annually:

- 1) Students must annually demonstrate passing competency in cardiopulmonary resuscitation (CPR) at the Healthcare Provider Level (formally Professional Rescuer Level).
- 2) Students must annually complete OSHA-regulated Blood borne Pathogen Exposure Training and complete the Hepatitis B Vaccine Series or have a written denial on file.
- 3) Students must annually complete HIPAA and FERPA Training.
- 4) Students are required to comply with clinical site requirements (i.e. obtaining finger printing, background checks, TB tests, completing necessary paperwork, etc.).

It is the policy of James Madison University that all opportunities are to be made available to qualified individuals on the basis of merit and without discrimination against any employee, applicant for employment, student, or applicant for admission because of race, color, religion, gender, disability, age, national origin, or sexual orientation.

Candidates for selection to the Athletic Training Program will be required to verify they have read and understand these technical standards and that they believe that they can meet (with or without accommodation) the technical standards tasks as outlined above. Compliance with the program's technical standards simply allows continued enrollment in the ATP and does not guarantee a student's eligibility for the BOC's certification exam.

All technical and academic standards must be met throughout enrollment in the Athletic Training curriculum. It is the student's responsibility to notify the Athletic Training Program Director if, during enrollment, circumstances occur and he/she can no longer meet the technical standards or needs reasonable accommodation, at which time he/she will be referred to the Office of Disability Services. Failure to continue to meet the Technical Standards, with or without accommodation will prevent the student from continuing in the Athletic Training Program.

Reviewed and approved by J.W. Myers, Associate Vice President for Academic Resources 12/3/2015 (signed original on file in Athletic Training Program office)

James Madison University

Technical Standards Verification Statement

This form accompanies the Technical Standards document for the Athletic Training Program found on-line at <https://healthprof.jmu.edu/at/documents/TechnicalStandards.pdf>. Students who have been accepted into the Athletic Training Program must complete this form in order to officially enroll in the program. Enrollment in the professional phase of the program is contingent on receipt of this document. Please return this verification statement to the AT Program Director with your Statement of Intent to accept your admission offer.

Student Statement:

I certify that I have read and understand the Athletic Training Technical Standards, and I believe to the best of my knowledge that **I can meet each of these standards with or without accommodation**. I also understand that if I am unable, or become unable, to meet the standards with or without accommodation, I cannot continue enrollment in the Athletic Training Program.

I am also aware that if the need for accommodations for disability arises, I must contact the Office of Disability Services (Wilson Learning Center, Room 107) to submit documentation and have my need for accommodation reviewed. To have requests for accommodations considered, I understand I will need to work with the Athletic Training Program Director and the Office of Disability Services to determine potentially reasonable and appropriate accommodation options.

Signature of Student

Date

Student Name (Printed)

Section V: Forms

James Madison University Athletic Training Program

Athletic Training Student's Commitment to Excellence

The Athletic Training Program at James Madison University is committed to providing students with the best education possible. An important component of the acquisition of learning includes the clinical education experiences in which a student partakes. As such, each athletic training student enrolled in the program plays a key role in determining one's own success. In an effort to assure learning over time transcends from the classroom to the clinic, each student must accept his/her role in the clinical education component of the athletic training program.

In order for optimal clinical learning environments to take place, it is the belief of the Athletic Training Program that each of the following must occur between the athletic training student and preceptor:

- *Initial establishment of expectations, roles, responsibilities and limitations*
- *Introduction of policy and procedure for respective facilities*
- *Identification of student's clinical education goals and plans to meet such goals*
- *Recognition of student's current level of knowledge and agreement that students clinically practice only those skills previously completed in formal classroom settings*
- *Constant visual and auditory supervision of the student by the preceptor in order to intercede on behalf of the athlete and student*
- *Regular, ongoing, constructive feedback appropriate to situations at hand*
- *Formal and timely written mid-term and final evaluations discussed between student and preceptor*
- *Open and honest communication when potential conflicts may arise*
- *Delivery of truthful, accurate and factual information related to both clinical content and professionalism*
- *Mutual respect for one another on both a personal and professional basis*

By signing below, I, _____ (print name) acknowledge my support to James Madison University's Athletic Training Program's Student's Commitment to Excellence, and agree to do everything that I can to assure each of the aforementioned items take place between myself and any preceptor to whom I am assigned.

(signature)

(date)



Patient Confidentiality Form

As part of your interaction with those seeking coverage and care by your Preceptors (through the Department of Sports Medicine or at off-campus sites), you will be exposed to information regarding individuals medical record and health status. All of this information is considered to be confidential and remains the private rights of the individual being treated.

By signing this document, you are agreeing to keep confidential between only you and your immediate supervisor all interaction, knowledge, communication, and exposure that you have with student athletes and patients as the information relates or has the potential to relate to their health status, previous medical history or potential prognosis regarding any situation.

Only under circumstances whereby a student athlete and/or patient has granted specific written permission to divulge information as it relates to a specific illness and/or injury and designates to whom such information can specifically be shared are allowed to disseminate any information, formal or informal regarding one's health status.

Furthermore, any interaction that you have with any medical provider or other entity that includes verbal, written or any other form of information sharing must be done in compliance with the Health Insurance Portability and Accountability Act of 1997.

Any breach of confidentiality and/or privacy will not be tolerated and will result in your immediate removal from any clinical rotation permanently. This may include being banned from the athletic venue permanently. Additional penalties may also be imposed, including, but not limited to, those administered by James Madison University and the United States Federal Government.

I, _____ (print name), have read the above stated information regarding compliance with confidentiality and privacy of information regarding student athletes and patients during my interaction and exposure with JMU Department of Sports Medicine. By signing below, I am acknowledging that I have read, understood and will abide by all rules and regulations set forth here within. I agree that if I have any questions regarding confidentiality and/or privacy issues that I will address such questions with appropriate supervisors to assure proper action at all times.

Signature/Date

Revised, 5/31/19

**OSHA Exposure to Bloodborne Pathogens
29 CFR 1910.1030**

**James Madison University
Athletic Training Program**

Exposure Control Plan

OVERVIEW

The purpose of this Exposure Control Plan is to establish a system that will assure that athletic training students in the Athletic Training Program who have potential contact with blood/body fluids are protected from infectious agents. The plan is intended to reduce the risk athletic training students who may have clinical education exposure with human blood and other potentially infectious materials during the performance of their clinical education. OSHA has defined occupational exposure as meaning any “reasonably anticipated” skin, eye, mucous membranes or parenteral contact with blood or other potentially infectious material (OPIM) through such events as administering first aid or assisting injured patients.

**I. Exposure Determination
a. Anticipated Risk Groups**

Members of the Athletic Training Program are considered by this plan to be “reasonably anticipated” to be exposed to blood and OPIM in the performance of clinical education associated with Athletic Training Program requirements.

TASKS FOR WHICH EXPOSURE MIGHT OCCUR

- Administering first aid
- Assisting injured patients out of the field of play
- Collecting used dressing or other biohazard materials
- Decontaminating surfaces or equipment
- Laundering contaminated items

**II. Methods of Compliance:
a. ENGINEERING CONTROLS**

The administration of first aid during patient care and athletic events limits the opportunities for engineering controls. However, whenever possible, the use of engineering controls that are available should be a consistent and habitual practice. This would include:

- The use of hand-washing stations
 - Wash hands with soap and warm water for 20 seconds before and after patient care.
 - If soap/water are not available, use waterless cleanser for 20 seconds (e.g. hand sanitizer, towelette).
- The use of personal protective equipment (PPE; e.g. gloves)
- The use of cutting tools such as scissors or knives or other sharps equipment with designs that protect the cutting edge or point from unintentional injury.
- The use of medically proven techniques demonstrated to reduce sharps related injury.
- The use of brooms and other handled tools to clean up broken glass or sharps hazards.
- The proper use and management of biohazard containers (e.g. receptacles, red bags, biohazard stickers) to discard soiled items.
- The proper use and management of sharps containers to discard items.
 - All blades, needles, etc. should be disposed of in sharps containers.
 - Housekeeping is responsible for removing full containers.
 - Do not bend, break, remove or recap needles.
- The incorporation of medical techniques or practices designed to prevent infection into injury management activities.
- Disinfect work surface/equipment/instruments that may have been contaminated and between each patient.
- If disinfectant is not available, use soap and water or 10:1 water to bleach solution (1 quart water to 1 tablespoon bleach).

B. WORK PRACTICE CONTROLS

STANDARD PRECAUTIONS

Standard Precautions are a set of rules intended to prevent the transmission of bloodborne pathogens from body fluids and human tissues. Athletic activities frequently present an exposure to someone else's bodily fluids. The below standard precautions (#1-#8) must be followed in preparation for (and in response to) an incident involving blood and other potentially infectious materials. Potentially infectious materials include:

- Blood
- Any bodily fluid which cannot be identified or contains blood
- Semen
- Vaginal secretions
- Cerebrospinal fluid
- Synovial fluid
- Pericardial fluid
- Peritoneal fluid

- Amniotic fluid

The following fluids do not contain enough HIV/HBV to cause infection and are therefore not part of the bloodborne pathogen standard:

- Normal saliva
- Feces
- Urine
- Sputum
- Vomit
- Tears
- Sweat
- Nasal secretions

Understand that personal hygiene should still be considered when handling the above materials. Hands should be thoroughly washed with soap and water after any contact. Also recognize that in circumstances in which differentiation between bodily fluid types is difficult or impossible, all blood, body fluids and tissues shall be considered potentially infectious material.

Standard Precautions applicable to athletic events include the following actions that will reduce the likelihood of transferring bloodborne pathogens:

1. Prior to the beginning of any athletic event, cover or otherwise protect any open or damaged skin. This precautionary measure should include all skin areas not covered by clothing plus adjacent areas such as the wrist and forearm. Wear long clothing whenever possible.
2. The kit containing first aid and other personal protective equipment (see below) assigned to the athletic event should be inspected routinely as to ensure it contains the appropriate items. Restocking of this kit should occur immediately following the use of any item.
3. In the event a player is injured, Personal Protective Equipment (see below) should be used to prevent direct contact to a patient's blood or body fluids. Hands or other protected skin areas should be washed immediately after the removal of PPE. Washing means the use of soap and water. In situations where running water is not immediately available, prepackaged towelettes or bottled disinfectants may be used, but washing with soap and running water should be done at the next available opportunity.
4. Cutting tools such as scissors or knives should be selected with designs that protect the cutting edge or point from unintentional injury.
5. Contaminated PPE should be disinfected before use on another patient. Disposable items should be placed immediately after use into the biohazard collection box.

6. If possible, ask the patient to hold dressings in place or to remove their own dressings and place them directly into a collection bag.

7. The need to launder contaminated material should be avoided whenever possible. Disposable wipes such as paper towels should be used to clean contaminated surfaces and materials rather than cloth towels.

8. Contaminated wound dressings or clean-up materials should be placed in the proper collection containers and brought to the athletic training room for addition to the biohazard box directly after use.

9. Contaminated uniforms, clothing or other items for laundry should be properly identified and collected separately from non-contaminated items. The items must be laundered separately from the non-contaminated items.

Personal Protective Equipment

The Athletics Department will provide Personal Protective Equipment of the proper type and size needed to minimize contact with infectious material.

- Disposable (single-use) gloves must be replaced as soon as possible when contaminated or when their ability to function as a barrier is compromised. Removal should be done by pulling the interior of the glove over the exterior, contaminated surface. Once removed these glove should be placed directly into a collection bag.
- Re-useable utility gloves can be reused if decontaminated, but must be discarded if cracked, discolored, punctured, or showing signs of deterioration.
- CPR Mouthpieces should be used for all resuscitation attempts. They should be decontaminated after use or disposed of as a biohazard.
- Masks, gowns, face shields and other personal protective equipment should be available for use in the event of a severe injury

Laundry procedures

Personally owned clothing items that become contaminated during clinical education related activities will be removed and placed in a biohazard bag until it can be laundered. If possible, the clothing will be washed at the clinical education site and loaded directly into a washing machine to prevent further contamination.

- Contaminated clothing and towels will be transported to the equipment room in a container other than those used for clean laundry. These soiled laundry carts should be easily identifiable and not be used for any other purpose.

- Use of gloves when handling soiled laundry. This procedure means: Wearing gloves when handling soiled laundry until it has completed the wash cycle, properly removing gloves, and washing hands after glove removal.
- Laundry will be washed at high temperature (160°F or higher) or at a lower temperature with a separate rinse cycle containing a chlorine bleach.

Education Programs

Training on Bloodborne Pathogens and Standard Precautions must be completed at the initial time of the clinical education assignment and at least annually thereafter. or clinical education placement held by the Athletic Training Program. All students must complete the JMU Health Center training designed to meet the training requirements of the Occupational Safety and Health Administrations Bloodborne Pathogen Standard, 29 CFR 1910.1030. Students must earn 80% to pass the test. Training is found at: <http://www.jmu.edu/bbp/>

Hepatitis B Vaccine

Commonwealth of Virginia Law requires that the certificate of immunization and TB screening be completed and submitted to the University Health Center prior to enrollment at James Madison University. The list of immunizations includes the series of 3 Hepatitis B Immunizations. Declination of immunizations may be made by signing a waiver.

Upon entrance to the Athletic Training Program, any students who may have chosen to decline their Hepatitis B immunization are encouraged to get the vaccination at the time of program admission. It is up to the student to make the decision to obtain or decline the vaccination.

NOTICE: It should be understood that the HBV vaccination does not completely eliminate the possibility of acquiring HBV. Employees must use Standard Precautions, personal protective equipment, and other appropriate procedures. Failure to do so may cause an individual to acquire HBV, even though they may have been vaccinated.

Exposure Determination, Immediate Care, & Post-Exposure Reporting

Determination

- OSHA defines an exposure incident as a specific eye, mouth, other mucous membrane, non-intact skin or parenteral (e.g., needle-stick, human bites, cuts or abrasions) contact with blood or other potentially infectious material (OPIM) that results from the performance of a student's clinical education.
- The JMU has two types of exposure:
 - *An exposure incident without Injury*
 - **An exposure incident with Injury (needle-stick, etc.)**

Immediate Care

- If exposure occurs, the following steps should be taken immediately:

- Wash needle-sticks, cuts, and exposed skin with soap and water or hand sanitizer.
- Flush splashes of blood or OPIM to the nose, mouth or skin with water.
- Irrigate eyes with clean water, saline or sterile irrigants

Post-Exposure Reporting (without or with an injury)

- Athletic Training Preceptors and Students should report an Exposure Incident to the Athletic Training Program
- Exposure incident must be reported to the Supervising Preceptor (& the Director of Sports Medicine if at JMU) and the Athletic Training Program Director or Clinical Education Coordinator within 24 hours both verbally and in writing.
- Program Director/Clinical Education Coordinator will fill out the Risk Management Accident Investigation Report, submit it to the Department Academic Unit Head to be submitted to JMU Risk Management, and a copy will be maintained in the student's program file. The Accident Investigation Report is located at: <https://www.jmu.edu/riskmgmt/pia.shtml>

James Madison University Athletic Training Program

Communicable Disease Policy

According to The Center for Disease Control and Prevention (www.cdc.gov) communicable diseases are illnesses that spread from one person to another or from an animal to a person. These diseases and illnesses can be contracted through daily life, but exposure may increase as a health care provider. Common transmission methods include direct contact with a sick person, breathing airborne viruses and bacteria, contact with blood or other body fluids, or contact with contaminated surfaces or objects.

Examples of Common Communicable Diseases:

- *Conjunctivitis (pink eye)*
- *Diphtheria (upper respiratory infection)*
- *Herpes Simplex*
- *Hepatitis*
- *HIV*
- *Fungal Infections*
- *Meningococcal Infections*
- *Mononucleosis*
- *Pertussis (whooping cough)*
- *Streptococcal Infection*
- *Herpes Zoster (shingles)*
- *Mumps*
- *Rubella*
- *Tuberculosis*
- *Varicella (chicken pox)*
- *Viral Infections (Influenza, colds, etc.)*

Athletic training students (ATS) have the potential to be exposed to such diseases during their clinical rotations or throughout their normal daily routines which may cause them to become ill throughout the semester. The following policy has been developed to delineate the appropriate action, should an ATS be ill.

Prevention of Communicable Diseases:

In attempt to prevent the transmission of such diseases, each athletic training student will complete the following on an annual basis:

- Bloodborne Pathogen Training
- Review of Bloodborne Pathogen Exposure Policy
- TB Screening/Testing

Students are also required by the university to have the following immunizations or denial waiver on file:

- COVID-19
- Tetanus

- Hepatitis B
- Meningococcal
- MMR
- Poliomyelitis
- TB Screening/Test

Recommended, but not required immunizations include:

- HPV
- Hepatitis A
- Varicella
- Influenza

Each clinical site is equipped with a universal precautions kit that includes protective eyewear, gloves, and gowns. Clinical sites also have posted signage that indicates proper care of biohazard material and proper hand-washing steps.

If an ATS believes they have a communicable disease, the following actions should occur:

1. The ATS should contact their clinical preceptor(s) and academic professors before they are absent from clinic or class
2. The ATS should immediately be seen in the University Health Center, by the team physician for evaluation, or at another health care facility (i.e. MedExpress Urgent Care)
3. The ATS should not return to clinic or class until they are no longer contagious as determined by a healthcare professional
4. The ATS must provide documentation verifying their appointment for absences to be deemed excused. Making up missed work is the responsibility of the ATS.

By signing this form, you confirm that you have been made aware of this policy.

Name (Print): _____ Date: _____

Signature: _____