



Athletic Training Program

Student Handbook
2020-2021

Table of Contents 1
Welcome 5

I. INTRODUCTION

Athletic Training Profession 6
Standards of Ethical Conduct..... 6
NATA Code of Ethics 7
Regulation of Athletic Training 8
Essential Functions of an Athletic Trainer..... 9

II. ACADEMIC PROGRAM

Program Mission, Vision and Core Values..... 11
Learning Outcomes 11
Personnel and Responsibilities..... 11

III. ADMISSION and PROGRAM REQUIREMENTS

Prerequisite Courses 14
Application Process and Admission Criteria 14
Technical Standards 15
Criminal Background Checks 15
Athletic Training Program Requirements 18
Application, Admission and Matriculation Requirements 18
Program and Retention Requirements 18
Graduation Requirements 19
Plan of Study 19
Cost of Attendance 20
Program Fees and Required Costs 20
Additional Student Expenses 20

IV. ATHLETIC TRAINING CURRICULUM at MSUBILLINGS

Accreditation 21
Curricular Design 21
Interprofessional Education 21
Research Project/Thesis 21
Clinical Education /Field Experience Requirements 22
Clinical Rotation Plan 22
Clinical Education Experience Policy and Guidelines..... 22
Clinical Education Supervision..... 22
Clinical Education Experience Rotations 23
Hours 23
Clinical Site Orientation..... 24

Name Badges	24
Student Travel	24
Fair Practices	24
Social Media and Electronic Communication	25
Cell Phone Use	25
Clinical Education Affiliated Site Information	26

V. STUDENT POLICIES AND PROCEDURES

Transfer Students	27
Withdrawal and Refunds	27
Athletic Training Program and Academic Standards	27
Disciplinary Actions, Grievances and Appeals	27
Academic Dishonesty	28
Warning Policy and Process	28
Probation Policy and Process	28
Dismissal Policy and Process	29
Grievance Policy	29
Appeals Policy	30
Attendance	30
Dress Code and Personal Appearance	30
Confidentiality	31

VI. SAFETY

Calibration and Maintenance of Therapeutic Equipment	32
Electrical Safety	32
Radiation Exposure	32
Hand Washing	32
Training and Hazardous Materials Management	33
OSHA, BBP, Infection Control	33
Bloodborne Pathogen Exposure/OSHA Form	39
Immunodeficiencies and Other Communicable Disease	40
Immunizations	44
Health and Safety	44
Accidents	44
Emergency Action Plans	44
Emergency Cardiac Training	44

VII. GRADES, ASSESSMENT and EVALUATION

Grade Policy	45
Student Evaluations	45
Athletes Student Self Evaluations	45
Program Journaling	45

Clinical Preceptor and Clinical Site Evaluation	45
Faculty/Lab Instructor Evaluations	45
Master Program Assessment Plan.....	46

VIII. STUDENT SUPPORT and RESOURCES

Reference Material	49
Athletic Training Lab Equipment	49
Computer Equipment	49
Lab Use	49
MSU Billings Campus Resources	49
Counseling and Guidance Services	49
Student Clubs	49
Health Insurance.....	49
Liability Insurance	50
Student Athletes, Graduate Assistantships, Outside Work Commitments	50
Non-Discrimination Policies	50
Sexual Harassment Policies	50
Financial Aid, Awards and Scholarships	51

IX. STUDENT RECORDS

Student Records	52
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Dear Athletic Training Student

Welcome to the Montana State University Billings (MSUB) Master of Science in Athletic Training Program! This handbook has been developed in order to help you in becoming a successful Athletic Training Student. The handbook provides an overview of the professional athletic training program, defines the policies and procedures of our program, and gives you a brief outline of what will occur during the next two years.

In March 2006, MSU Billings ATP was granted an initial five year full accreditation by the Commission on Accreditation of Athletic Training Education (CAATE) and in the August 2011 the Athletic Training Program was reaccredited through 2020-2021. Current accreditation status does not guarantee the program will receive continuing accreditation status through yearly reports so we must all continue the work to maintain accreditation. Documents, forms and evaluative processes should contribute to continuous improvement in the quality of the Athletic Training program.

We believe the professional athletic training program at MSUB is of high quality and recognition. During the first year of the program, students will take majority of their classes on campus in face to face format and most of the courses during the second year are taught online by MSUB ATP faculty. During the first year, all of the clinical education experiences occur in the Billings area, however student may have the option of apply for an off-site clinical rotation during their second fall semester. All students are required to participate in two immersive clinical education rotations. The first one is between summer and fall semesters of the first year. The second immersive clinical experience is a semester long rotation during the second fall semester.

In order to accomplish our goal of quality education and preparation for highly competent professional practice, faculty, staff, and Athletic Training students must all work together. This handbook allows you to become familiar with the roles and responsibilities that you have as an Athletic Training student as well as increase your awareness of proper policies and procedures for the program.

Following orientation and review of this handbook, please read and sign the “Health, Safety and Policy and Procedure Commitment Form”. Please return a copy of this signed form so it may be place into your record folder. This will indicate that you have a copy of the handbook and have reviewed all aspects of the education program.

Once again welcome to the MSUB Athletic Training Program. We look forward to working with you as you work towards becoming a competent certified athletic trainer.

Sincerely,

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Please beware that the policies and procedures within the ATP student handbook are subject to change due to changes including but not exclusive to CAATE standards, university, college, department and program curriculum and administrative policies and procedures.

Last update: Updated May 2020

I. INTRODUCTION TO ATHLETIC TRAINING AND ATHLETIC TRAINING EDUCATION

This MSUB ATP Athletic Training Student Handbook:

This handbook includes the information, policies and procedures, and documentation and forms which will help you have a successful tenure in the Athletic Training program. Please read the handbook carefully and refer back to it throughout the Athletic Training Program (ATP).

Athletic Training Profession

Athletic Training “encompasses the prevention, examination, diagnosis, treatment and rehabilitation of emergent, acute or chronic injuries and medical conditions. Athletic training is recognized by the American Medical Association (AMA), Health Resources Services Administration (HRSA) and the Department of Health and Human Services (HHS) as an allied health care profession” (NATA

<https://www.nata.org/about/athletic-training>)

The Commission on Accreditation of Athletic Training Education oversees the accreditation of professional athletic training programs. Currently the 2020 Standards guide athletic training education and include 6 core competencies. (<https://caate.net/wp-content/uploads/2019/08/2020-Standards-Final-7-15-2019.pdf>)

Patient Centered Care
Interprofessional Practice and Interprofessional Education
Evidence-Based Practice
Quality Improvement
Health Care Informatics
Professionalism

The Practice Analysis, for Athletic Training, 7thth edition defines the work of an athletic trainer and has been completed by the Board of Certification (BOC). The Practice Analysis includes the 5 practice domains for a certified Athletic Trainer. These include:

Injury and Illness Prevention and Wellness Promotion
Examination, Assessment and Diagnosis
Immediate and Emergency Care
Therapeutic Interventions
Healthcare Administration and Professional Responsibility

(Henderson, J. The 2015 Athletic Trainer Practice Analysis Study. Omaha, NE: Board of Certification; 2015.)

https://www.bocac.org/system/document_versions/versions/24/original/boc-pa7-content-outline-20170612.pdf?1497279231

Standards of Ethical Conduct

Students are expected to be familiar with university and athletic training program policies regarding student conduct.

Please see the university student handbook regarding student policies and procedures.

<https://www.msubillings.edu/vcsa/pdf/StudentHandbook.pdf>

Students in the Athletic Training Program at Montana State University Billings are also expected to adhere to the MSUB ATP Professionalism Contract as well as the NATA Code of Ethics,

http://www.nata.org/codeofethics/code_of_ethics.pdf.

NATA Code of Ethics (September 2005, revised 2018)
(retrieved from http://www.nata.org/codeofethics/code_of_ethics.pdf)

Preamble

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

1. Members Shall Practice with Compassion, Respecting the Rights, Well-being, and Dignity of Others

1.1 Members shall render quality patient care regardless of the patient's race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity.

1.2. Member's duty to the patient is the first concern, and therefore members are obligated to place the well-being and long-term well-being of their patient above other groups and their own self-interest, to provide competent care in all decisions, and advocate for the best medical interest and safety of their patient at all times as delineated by professional statements and best practices.

1.3. Members shall preserve the confidentiality of privileged information and shall not release or otherwise publish in any form, including social media, such information to a third party not involved in the patient's care without a release unless required by law.

2. Members Shall Comply With the Laws and Regulations Governing the Practice of Athletic Training, National Athletic Trainers' Association (NATA) Membership Standards, and the NATA Code of Ethics

2.1. Members shall comply with applicable local, state, federal laws, and any state athletic training practice acts.

2.2. Members shall understand and uphold all NATA Standards and the Code of Ethics.

2.3. Members shall refrain from, and report illegal or unethical practices related to athletic training.

2.4. Members shall cooperate in ethics investigations by the NATA, state professional licensing/regulatory boards, or other professional agencies governing the athletic training profession. Failure to fully cooperate in an ethics investigation is an ethical violation.

2.5. Members must not file, or encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.

2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.

3. Members Shall Maintain and Promote High Standards in Their Provision of Services

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

3.2. Members shall provide only those services for which they are qualified through education or experience and which are allowed by the applicable state athletic training practice acts and other applicable regulations for athletic trainers.

3.3. Members shall provide services, make referrals, and seek compensation only for those services that are necessary and are in the best interest of the patient as delineated by professional statements and best practices.

3.4. Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge and shall complete such educational requirements necessary to continue to qualify as athletic trainers under the applicable state athletic training practice acts.

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

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

4. Members Shall Not Engage in Conduct That Could Be Construed as a Conflict of Interest, Reflects Negatively on the Athletic Training Profession, or Jeopardizes a Patient's Health and Well-Being.

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

4.2. All NATA members, whether current or past, shall not use the NATA logo or AT logo in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.

4.3. Members shall not place financial gain above the patient's well-being and shall not participate in any arrangement that exploits the patient.

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

4.5. Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.

In addition to abiding by the NATA Code of Ethics, students are also expected to adhere to the standards of the Health and Human Performance Department, the College of Health Professions and Sciences and MSU Billings as well as abiding to the BOC standards: <http://www.bocatc.org>.

ATHLETIC TRAINING STUDENTS WILL MAINTAIN PROFESSIONALISM AND CONDUCT THEMSELVES IN AN ETHICAL MANNER AT ALL TIMES.

Professional Membership in the NATA

Athletic Training Students are **required** to become members of the National Athletic Trainers Association Student members to the NATA will be paid for by program fees. Athletic Training students are also strongly encouraged to become active participants in their state and regional professional organizations - the Montana Athletic Trainers' Association and the Northwest Athletic Trainers' Association- as well as their national professional organization, the National Athletic Trainers' Association.

Regulation of Athletic Training in Montana

Montana requires licensure for all certified athletic trainers who are working in the state. Therefore, students are expected to perform competencies and proficiencies within the roles and essential functions specific to Athletic Training profession allowed by the scope of practice for ATCs in Montana. Please see http://bsd.dli.mt.gov/license/bsd_boards/atr_board/board_page.asp for more information.

Please the Board of Athletic Trainers for questions regarding licensure in Montana

Regulation of Athletic Training in the United States

For information regarding other state's regulations and licensure, please visit the following website.

<https://www.bocatc.org/state-regulation#state-regulation>

II. ACADEMIC PROGRAM and OUTCOMES

Montana State University Billings

https://www.msubillings.edu/assessment/mission_and_core_themes.htm

Mission: Montana State University Billings delivers a transformative education that empowers students from diverse backgrounds to succeed.

Vision: Educating students to impact an evolving global community.

Core Themes:

Theme 1: Build educational programs to support student needs.

Theme 2: Progressively grow the university.

Theme 3: Strengthen relationships with the community to enhance partnership opportunities.

Theme 4: Unify, invigorate, and engage MSUB's structure and culture.

Core Values:

MSUB is currently revising its core values as a part of its strategic planning process. For more information, please visit: www.msubillings.edu/strategy.

College of Health Professions and Sciences

Currently under revisions to reflect the reorganization and renaming of the college

Mission: The mission of the college of Allied Health Professions is to prepare allied health professionals for their chosen field, and to meet the needs of society through education, discovery and service.

Vision: The vision of the college of Allied Health Professions is to create an environment that allows students to transform into quality health care professionals.

Core Values:

- We value collaborative partnerships among students, faculty, researchers, community members, and industry leaders for the purpose of health improvement.
- We value a seamless curricular articulation among health related fields.
- We hold high regard for adding knowledge to the disciplines represented in the College and seek to engender rigor in the dissemination of new knowledge as part of the educational trust.
- We place high value in sharing expertise through community service, both locally and nationally.

Health and Human Performance Department

Mission: To prepare highly competent professionals who are committed to leadership, lifelong learning, exceptional service, and the promotion of healthy lifestyles in diverse health, physical education and sport settings. Graduate study in the department includes coursework, research, and internship opportunities for students to advance their personal and professional competence in these areas.

<https://www.msubillings.edu/cahp/hhp/>

MSUB Athletic Training Program Vision, Mission, Objectives and Core Values

The program provides didactic and a variety of clinical opportunities in collaboration with the community over the course of the two year program (including summers prior and during the two years). The faculty is committed to preparing athletic trainers who evidence the highest ideals of the Athletic Training profession.

Mission Statement

The mission of the Montana State University Billings Athletic Training Program is to prepare future athletic training professionals, through educational challenges and clinical opportunities, who will then serve and contribute to the Athletic Training Profession through education, scholarship, clinical service, and professional involvement.

Program Goals

The goals of the athletic training program are to

1. Expose athletic training students to a variety of clinical experiences to allow them to practice their skills and to become clinically proficient
2. Afford athletic training students opportunities to be involved in professional development activities
3. Produce athletic trainers who can think critically and can provide patient care as part of a healthcare team
4. Prepare students to successfully challenge the BOC examination and enter the profession

Core Values

Respect of all
Responsibility to others
Service to the profession
Engagement in lifelong learning

Student Learning Outcomes

1. Students will be able to apply knowledge and skills to evaluate conditions and develop care plans
2. Students will be able to provide patient centered care while working in a variety of settings, with diverse populations
3. Students will be able to use evidence-based practice to inform and deliver patient care

Personnel & Responsibilities

The Athletic Training Education Program consists of administration, faculty, athletic trainers, clinical instructors, team physicians, consulting medical specialists, and graduate assistants.

Chancellor	Dr. Dan Edelman
Provost and Academic Vice-Chancellor	Dr. Melinda Arnold
Dean, College of Allied Health Profession	Dr. Kurt Toenjes
Chair, Health and Human Performance	Dr. Suzette Nynas
Program Director	Dr. Suzette Nynas
Clinical Education Coordinator	Ms. Tori Atencio
Medical Director	Dr. Kelsey Hoffman
Clinical Preceptors	Numerous healthcare providers including ATs, PTs, OTs, MDs within the Billings area
Faculty/ Instructors	Dr. Suzette Nynas, Ms. Tori Atencio, Ms. Lindsay Sullivan, various part time faculty

Faculty Contact Information can be located on the MSUB website

Chair of the Department of Health & Human Performance

The chair of the department and/or (the program) directly oversees the development and evaluation of the Athletic Training Education Program. The chair also evaluates the Athletic Training Clinical Education Coordinator, Program Director, and Athletic Training faculty and staff.

Athletic Training Program Director

The Athletic Training Program Director at Montana State University Billings is responsible for the day to day operation, coordination, supervision, and evaluation of all aspects of the professional Athletic Training Educational Program. The program director reports to the Department Chair and Dean.

Athletic Training Clinical Education Coordinator

The clinical coordinator is responsible for the administration and management of the clinical education and field experience components of the professional Athletic Training education program. The clinical coordinator acts as the primary supervisor of clinical education and reports directly to the Program Director.

Athletic Training Faculty

The Athletic Training faculty members are employed by MSUB or (part time) or community professionals and teach within the ATP. The faculty assists the program director in the day-to-day operation of the program.

Supporting Faculty

The supporting Athletic Training faculty teaches research/statistics, sport psychology and nutrition. The supporting faculty works closely with the program director to assure that the proper competencies and proficiencies are taught in each course.

Instructors/Lecturers

The Athletic Training Educational Program (ATP) utilizes instructors for didactic courses, and labs in various clinical settings. Instructors may teach entire courses or lecture in courses taught by other staff.

Clinical Preceptor (CP)

A clinical preceptor is a certified athletic trainer or physician who is located at one of the MSUB Athletic Training Education Program affiliated field experience sites. The clinical preceptor directly supervises the Athletic Training students during their field experience rotations. The faculty and clinical preceptors are responsible for evaluating each student as they progress towards becoming a competent athletic trainer. These faculty members are qualified to supervise clinical instruction and to evaluate student integration of competencies and proficiencies during the clinical labs and field experiences courses within the program. If a student choose to be supervised by another allied health care professional (physical therapist, physician's assistant, nurse practitioner, etc.), that individual must be trained however those hours will count as supplemental hours and will not be allow to count towards the minimum hour requirement.

Medical Director and Team Physician for MSUB Athletics

Dr. Kelsey Hoffman of RiverStone Health is the current Medical Director. The team physician(s) also advise the program director and clinical education coordinator in the education of Athletic Training students. The Athletic Training students are encouraged to interact with the medical director and team physicians. Athletic Training students should seek interaction with all allied health care professionals throughout the program - do not wait to be assigned to interactions with doctors, PA's PT's, nurses etc.

Consulting Medical Specialists

The MSUB Athletic Training Program utilizes a vast amount of consulting medical specialists for the education of Athletic Training students. Medical specialists will be utilized in the education of Athletic Training students through guest lecturing and procedural observations when appropriate.

Athletic Training Students (ATS)

Students are in an academic program in Athletic Training; they are not yet athletic trainers and should not be used as such. Students will not be used as a work force or take the place of a certified AT. Students should be of assistance rather than a burden to their clinical instructors but should never be used in lieu of a certified athletic trainer. Learning and gaining experience is the key to clinical education. Students are preparing to practice as certified AT and may quickly feel confident in their skills. Students in the ATP are expected to appear and act professionally at all times.

Visiting Lecturers

Each semester there will be a number of visiting lecturers that are invited to campus or who will be presenting as part of the professional development experiences. These individuals are allied health professionals who will talk on topics that will be beneficial to the Athletic Training students' education. Lectures may be for one class period or professional development meeting or continue through a week or more. Courtesy and respect should be shown to all visiting lecturers. Student should dress and behave professionally and appropriately.

III. APPLICATION, ADMISSIONS and PROGRAM REQUIREMENTS

Prerequisite Courses

Students entering this graduate program are expected to have appropriate academic preparation prior to beginning academic coursework in athletic training. As of July 1, 2020 the following courses are listed using Montana State University Billings course. Transcript evaluation will be done by the graduate faculty to determine fulfillment of prerequisite knowledge in these areas. The course description and/or syllabus may be used to determine acceptance.

- Biology
- Chemistry
- Physics
- Psychology
- 2 semesters of Anatomy and Physiology (with lab)
- Statistics
- Nutrition
- Exercise Physiology
- Kinesiology or Biomechanics

Preferred but not required foundational courses:

Research Methods/Design

Motor Learning

Application Process and Admission Criteria

Below are admission requirements and application steps specific to the ATP. Additional information can be found at <https://www.msubillings.edu/grad/>

1. Undergraduate GPA of at least 3.0 (however a GPA below a 3.0 may be considered)
2. A standardized graduate admission test (GRE or equivalent) must be on record. However, if the applicant has a 3.0 GPA or higher, the GRE is waived.
3. Three letters of recommendation from academic and professional references concerning the candidate's potential to succeed in graduate school. At least one letter must be from a certified athletic trainer.
4. It is suggested but not required to obtain observation/contact hours with a certified athletic trainer
5. Official transcripts from each institution attended.
6. An essay stating why you want to be an athletic trainer, career goals, and the attributes you possess that will make you successful in life and athletic training.
7. Completed application form and submission of application fee.
8. There is no application deadline as we have rolling admission policy, however students who are interested in applying to the program should do so no later than May 1 to ensure enrollment for summer.
9. Students will be required to participate in an video or phone interview with faculty from the ATP prior to admission.

Once students successfully complete the application process, student will be admitted provisionally into the program. **In order to gain full acceptance status into the AT program, students must submit and meet the Technical Standards and must complete and pass a Criminal Background Check.**

Technical Standards

All students must complete a technical standards disclosure prior to full admittance into the program, however a student does not have to complete a technical standard as part of the initial application process into the program (please see above). A student must sign and submit their technical standards after acceptance but prior to attending classes. If there is an issue with a technical standard, each case will be reviewed on an individual basis and the situation will need to be discussed and rectified. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not be admitted to the program. The technical standards form can be located on the ATP website. https://www.msubillings.edu/chps/athletic_training/prospective_students/Technical%20Standards.pdf

Criminal Background Checks

In order to protect the patients, the affiliated clinical sites, the athletic training students and the university, the MSU Billings Athletic Training Program (ATP) has criminal background check policy. All students must complete and pass a criminal background check prior to full admittance into the program however a student does not need to have a criminal background check as part of initial application process.

*ALL students MUST complete a background check prior to full admittance into the ATP and before placement in a clinical education experience with an affiliated clinical site. Incoming first year students must have completed their background check in time for placement at an affiliated site no later than August 1 of their first year in the professional program.

Process of Requesting a Criminal Background Check

Once provisionally accepted into the ATP, the student will receive information from the ATP regarding placing an order. The student will be required to contact the vendor (Certified Background) to begin the online process. The cost will be approximately \$55, for international students the background check may cost up to and over \$150. The cost of the background check is a student expense.

The Criminal Background Check will include the following criteria:

Package: Standard (Health)

Price Paid to Certified Background

Montana Statewide Criminal Search

Residency History

All counties outside MT – previous 7 years

Nationwide Criminal Database with Sex Offender

Nationwide Healthcare Fraud & Abuse Search

Storage of Criminal Background

The storage of a student's criminal background information will be stored with the vendor, Certified Background, and will be considered confidential and will not be released to a third party (affiliated clinical site). If an affiliated clinical site does request this information, the student will need to contact Certified Background to release their information to that affiliated clinical site.

If there is a Record on the Criminal Background Check

Once the ATP has received the Criminal Background Check report and there is a record of a misdemeanor (arrest, indictment, conviction, etc.) indicated in your background check, the ATP Director will request that the student completes a Disclosure of Information Form (see below). This is an opportunity for the student to explain the circumstances of the arrest, indictment or conviction as well as any court action. The disclosure form must be completed by the student and turned into the ATP Director for review. Throughout the process of review, the student will be notified of his or her status.

Normal Procedure for Review of a Record on the Criminal Background Check

Misdemeanor

Step 1: The self-disclosure form will be reviewed by the Program Director and Health and Human Performance (HHP) Department Chair. These individuals will recommend either for or against granting the student admission or they may recommend proceeding through the College of Allied Health Professions Petition and Appeals Committee. If the Program Director and HHP Department Chair recommend proceeding, Step 2 is initiated. Depending on the report on the criminal record, the review of a record may begin and end with Step 1.

Step 2 (if necessary): The College of Health Professions and Sciences (CHPS) Petition and Appeals Committee will review the background check information and the self-disclosure form. At this Step the student will be requested to submit court records for review.

Step 3 (if necessary): Lastly, the background check information, self-disclosure form and court records will be reviewed by the Dean of the CHPS. The decision by the Dean is final, unless a formal appeal is requested.

Felony

If there is a record of a felony criminal charge, the disclosure form will be sent directly to the Montana State University Billings officials and reviewed by the Athletic Training Education Program Director and Registrar on a case-by case basis.

*It must be noted that a record of a felony may prohibit an individual from full acceptance into the ATP and/or obtaining certification and licensure as an athletic trainer.

Appeal Procedure

If for any reason a student believes any information provided in the background check is not accurate, or not satisfied with the decision after the review of a criminal record as outline above, the student has the right to initiate an appeal for which the ATP has established a process.

Appeals Process:

Step 1: Student may request a meeting with Program Director and Health and Human Performance (HHP) Department Chair. If unsatisfied with the outcome at step one, the student

Step 2 (if necessary): If unsatisfied with the outcome at step 1, the student may request a meeting with the College of Health Professions and Sciences (CHPS) Petition and Appeals Committee.

Step 3 (if necessary): Lastly, if unsatisfied with the outcomes in steps 1 and 2, the student may request a meeting with Dean of CHPS. This step in the appeals process is the final decision.

PROGRAM REQUIREMENTS

Athletic Training Program Requirements

- Students must complete a plan of study (paper based or via Degree Works)
- Students must have a technical standards on file prior to starting coursework
- Student must complete a background check prior to starting clinical education
- Students must have an MMR vaccination to be admitted to the university
- Students are highly encouraged to have the Hepatitis B Vaccination. If a student is admitted without the Hepatitis B vaccination they have up to 1 year to receive the vaccination series or they need to complete the Hepatitis B Declination Form. *It is strongly encouraged that all healthcare professions have the Hepatitis B vaccination*
- Students are also strongly encouraged to have an up to date Tdap vaccination
- An annual flu vaccination is required once the flu vaccination becomes available
- Student must have a current TB test on file
- Students must have a drug screen prior to starting clinical rotations
- Students must complete OSHA/BBP and FERPA/HIPAA training prior to clinical rotations. Programmatic training will occur during summer prior to clinical education
- A two-year (including summer semesters) minimum time period will be allowed for the completion of the required clinical hours (1200 total) once the student is admitted into the program.
- For the most up to date information, please see the Athletic Training Program web site or speak with the Program Director

Application, Admission and Matriculation Process

- Admission into the Athletic Training Program is a competitive process. MSUB's ATP will accept applications on an ongoing basis (rolling admissions). Currently, the ATP's maximum number of students is 10 per cohort.
- Please see above for prerequisite courses as well as preferred (but not required courses). Students who do not have a prerequisite course(s) may be admitted provisionally but must take the course(s) within one year of admission as per university policy
- A student will receive notification from the graduate studies office when his/her application has been received. Students will be notified of the interview and selection process in a timely fashion. The student will be notified of the final decisions regarding acceptance status acceptance by the graduate studies office.
- Once a student has been accepted into the program, students will work with the program director or their faculty advisor to complete their plan of study according to catalog policy. The plan of study must be filed with the Graduate Studies office, McMullen Hall, Room 200 or via Degree Works by the completion of the first year, fall semester.
- Transfer credits will be reviewed by the program director on a case by case basis.
- Athletic Training Students in consultation with their advisor will register for the appropriate courses in the appropriate sequence. The rule of thumb here is to follow your plan of study!

Program and Retention Requirements

- Students must be enrolled in the Athletic Training Education Program for a minimum of 2 years (including summers).

- Students must successfully complete a criminal background check prior to beginning clinical rotations.
- Student must have technical standard completed (and updated as needed) prior to starting coursework
- Students must complete the BBP/OSHA and FERPA/HIPAA training. Students must also complete site specific BBP/OSHA training during the clinical site orientation.
- Students must read this student handbook and sign the Health and Safety Commitment Form
- GPA
 - Students must maintain a **3.0** cumulative GPA (earning at least a 2.0 for didactic courses and 3.0 for practicum courses).
 - The ATP plan of study will only allow two grades below a 3.0. If a student is to receive three grades below a 3.0 that course and any subsequent courses where less than a 3.0 is earned must be repeated and passed with a 3.0 or better. If a student needs to repeat a course where less than a 3.0 is earned, the student cannot progress throughout the program until that course is satisfactorily completed.
 - Any grade below a 2.0 must be repeated.
- Hours
 - Student must accrue a minimum of 1200 clinical education experience hours over the course of two annual years.
 - During the academic year students should average 20 hours per week - not have less than 10 hours and no more than 30 hours of clinical experience per week,
 - During immersive clinical education experiences (preseason or holidays) the students should average 30-40 hours per week, but must not accrue more than 12 hours per day
- Student must complete a thesis or research project under the supervision of department faculty.
- Students must successfully complete clinical/field experiences each semester and must pass all competencies and curricular content standards as well as clinical education evaluations.
- Students may be required to fulfill additional criteria as requested by an Affiliated Site.

Graduation Requirements

- Satisfactorily complete all curricular requirements as stated in the Plan of Study
- Students must have a cumulative 3.0 GPA in order to graduate
 - Students must pass all didactic courses with a 2.0 (C) or better and must pass all clinical education courses with a 3.0 (B) or better
- Student must accrue a minimum of 1200 clinical hours over the course of the 2 years during their clinical education experience.
- Students must complete and file an Application for Graduation with the Office of Admissions and Records by the specified deadlines. Typically, this deadline is the fall semester (early November) prior to spring semester graduation
- Students need to be aware of the six-year time limit in which all requirements need to be met in order to graduate from the program

Plan of Study

Students need to follow their plan of study (curricular sequence) as outlined in Degree Works and/or on the MSUB ATP webpage.

Cost of Attendance

Below is a link to the cost of attendance for the University Campus – Masters Degrees (2020-2021 rates). The cost of attendance is an estimated cost for one full year and includes tuition, fees, room, board, books and supplies. This does not include indirect costs (personal expenses and transportation)

<https://www.msubillings.edu/finaid/COA-Masters.htm>

Program Fees and Required Costs

ATS will be assessed a \$925 program fee per semester. These fees will be part of the final tuition bill and will be utilized to fund memberships, instruction costs, purchase supplies and equipment, programmatic clothing, some expenses for professional conference attendance, etc.

Additional Student Expenses

In addition to tuition, university and program fees, students are responsible living expenses, expenses for maintaining enrollment (criminal background check, immunizations, etc.) attire, and transportation expenses to and from clinical education. Students may also be responsible to pay some or all expenses occurred during travel to professional meetings.

IV. ATHLETIC TRAINING CURRICULUM at MSUBILLINGS

Accreditation Status

The ATP at Montana State University Billings is currently accredited by the Commission on Accreditation of Athletic Training Education (CAATE) through 2020-21. Current accreditation status does not guarantee the program will receive continuing accreditation status through yearly reports.

Curricular Design

Students enter the AT program with pre-requisite knowledge from undergraduate coursework. The AT program then builds on that pre-requisite knowledge and has a Plan of Study designed to teach the various core content standards throughout the curriculum over the course of two years. We teach patient care from a global perspective or approach, meaning teaching students about the continuum of patient care from prevention, working through evaluation and diagnosis, moving to treatment/management, and the ultimately referral or discharge. We also teach students to approach patient care holistically, where they take into account all facets of patient health (physical, mental, social) into consideration. Throughout the program, AT students have opportunities to engage in experiential learning where they can apply and reinforce skills in their clinical education experiences. Lastly, throughout the curriculum, students are taught and assessed on the knowledge, skills, and abilities required of an entry level professional in athletic training. The ATP curriculum utilizes multimodal methods to teaching including traditional face to face, online, and hybrid courses.

Interprofessional Education

All students are required to participate in at minimum of one Interprofessional Education (IPE) activity per year. These IPE activities will be associated with either the practicum or clinical education courses in the curriculum. IPE opportunities will be scheduled on a semester to semester basis and students will be informed scheduled activity well in advance.

Research Project/Thesis Requirement

All ATP students are required to develop, design, and execute independent research projects or theses. The independent research project can be either a 3 credit research project or a 6 credit thesis. Each student, in conjunction with their faculty advisor will determine which route (whether research project or thesis) is best for that individual student. The major difference between a research project and thesis (other than number of total credits) is the breadth and depth of information and projected audience. A research project should be designed to contribute and apply to the student's future practice whereas a thesis should be designed to contribute and apply to an entire field (athletic training, training and condition, rehabilitation, etc.). Below is the thesis timeline as required by the Graduate Studies. Research Project does not have as strict guidelines. It is strongly encouraged to plan and start your research project or thesis during your first year or early in the second.

Thesis Submission Instructions

<https://www.msubillings.edu/grad/pdf/CompleteThesisInstructions.pdf>

Clinical Education/ Field Experience Requirements

Before students are allowed into field experiences all of the items must be in place.

Immunizations (*flu shot as the come available)

OSHA/BBP Training

Confidentiality Training (FERPA and HIPAA)

Technical Standards

CPR for the Professional Rescuer with AED certification (as part of 1st summer course)

Criminal Background Check

Clinical Site Orientation (students must complete an orientation for each site as assigned)

Liability insurance is handled through the university and the Vice Chancellor for Administration and Finance

Clinical Education Rotation Plan

Athletic Training Students are given the opportunity to participate in clinical education rotations exposing them to a variety of patients and experiences. Because of the staffing at each site, one ATC, MD, PT or other approved health care provider (clinical preceptor) is the students' supervisor for the assigned experience. The clinical education coordinator and program director selects and verifies clinical education experiences. Students are given the opportunity to gain a variety of experiences with a variety of patients. Assignments to subsequent clinical rotation are made based on the previous semester course and lab evaluations, skill development and evaluations. Final say on assignments of clinical rotations will be decided by the Clinical Education Coordinator and the Program Director.

Clinical Education Experience Policy and Guidelines

Athletic Training Students (ATS) are assigned to a Clinical Preceptor for their clinical education/experience rotations. All clinical education experiences must be supervised by a Clinical Preceptor who is either a certified athletic trainer or a physician in order for the hours to count towards the total clinical hour requirements. If a student wishes to obtain hours under a clinical preceptor who is not a certified AT or physician but is a licensed healthcare professional, those hours will count as supplemental hours.

Clinical Education Supervision

The policy of the Montana State University Billings Athletic Training Program regarding direct supervision of Athletic Training students by clinical preceptors is: Direct supervision of Athletic Training students involved in the clinical, lab, and/or field experience portion of the Athletic Training Program will be through constant auditory and visual contact between the clinical preceptor and the Athletic Training student.

The student must be under the direct supervision of the Clinical Preceptor for the learning experience and is not to take the place of the Clinical Preceptor at any time. The responsibilities for both the Athletic Training Students and Clinical Preceptor during clinical education are delineated below.

- ATS must be enrolled in the athletic training program and be taught and assessed skills prior to performing those skills on patients. Clinical Preceptors can allow students to perform skills after they have taught and assessed. This teaching and assessment can occur in either the classroom or in the clinical setting.
- The ATS must always be directly supervised by the Clinical Preceptor while performing those skills on a patient.
- Clinical Preceptors must provide direct supervision (audio and visual contact) of the athletic training students while the ATS is performing these skills on a patient.

Clinical Education Experience Rotations

- Patients of Various Ages: Athletic Training Students have opportunities to work with patients throughout the lifespan, from pediatrics through adulthood and the aging population.
- Patients of Different Sex: Athletic Training Students have opportunities to work with both sexes both in the traditional setting (college, high school) as well as the general population (rehabilitation, general medical)
- Patients of Various Socioeconomic Status: Athletic Training Students gain experience with patients from a variety of socioeconomic backgrounds and status.
- Patient of Various Levels of Activity and Athletic Ability. Athletic Training Students have opportunities to work with patients and clients from various levels of activity (recreational, competitive), various types of activities (individual, team, protective equipment based, low intensity, high intensity, etc.).
- Non-Sport Patient Population: Athletic Training Students also have access to a variety of experiences with general medical and rehabilitative services across the curriculum at RiverStone as well as therapists at Billings West Physical Therapy.
- Non-Orthopedic Conditions (General medical conditions): Experiences occur across the curriculum particularly at MSUB and RMC with the sports medicine team physicians from OrthoMontana, RiverStone Health as well as the Montana Family Medicine Sports Medicine Fellow

Hours

Most clinical experiences occur in the afternoons, evenings and weekends, but will vary according to setting and clinic hours

- Student must accrue a minimum of 1200 clinical education experience hours over the course of two annual years.
- While students are taking didactic courses (September-December and January-May) the student will be required to have an averaged a minimum of 20 hours per week with an averaged maximum of 30 hours per week.
- However, when students not taking a didactic course (prior to/after courses, summer, school breaks and during immersive clinical experiences) they should average 30-40 hours per week with a maximum of 72 hours per week.
- Hours in excess of minimum hour requirements may be transferred to subsequent rotations or semesters if there are extenuating circumstances that are documented and discussed with the PD and CEC prior to the next semester or as soon as the situation arises.
- During each academic year there are several holidays in which there are no classes are held at MSUB or Billing Schools. All Athletic Training Students should review their schedule with the clinical preceptor. If differences in the schedule are not resolved between the clinical preceptor and the student, the clinical education coordinator may be consulted.
- Athletic Training Students are NOT required to participate in clinical experiences during Thanksgiving break, the break between fall and spring semesters, spring break or mini spring break.

Your education is important! The quality of your clinical education experience hours is central to learning and these clinical hours are preparing you for your first position as an Athletic Trainer. Seize every opportunity to prepare yourself to fulfill the highest expectations. Please see course syllabi and your Clinical Preceptors for specific hour requirements and schedule for each clinical rotation field experience.

Clinical Site Orientation

Students must complete a clinical site orientation either prior to or during the first week at a new clinical site. As part of this orientation, you must address the following:

- Roles, responsibilities, expectations
- OSHA/BBP and Communicable Disease
- EAPs
- ATrack (hours, evaluations, patient contacts)
- Patient Confidentiality
- Any clinical site specific paperwork
- Dress code, name badges, etc.
- Goals for clinical education/rotation

Form can be found at

https://www.msbillings.edu/chps/athletic_training/pdf/Clinical%20Site%20Orientation.pdf

Name Badges

All students will be issued name badges to wear during their clinical education rotations to assist clients and patients in differentiating between students and certified and licensed healthcare professionals. Students are required to wear name badge to their general medical, orthopedic or rehabilitation clinical rotations and encouraged to wear name badges to their college and high school rotations to help patients/clients distinguish between certified staff and athletic training students.

Student Travel

During the clinical education experience many Athletic Training students may have the opportunity to travel. Clinical education requires each student must be directly supervised (direct auditory and visual contact) by a certified athletic trainer or physician while they are traveling. A clinical preceptor must be physically present and be able to intervene on behalf of the patient and the ATS. If a student will be traveling with a team or as part of the ATP (i.e. travel to conferences), that student needs to notify the CEC or PD prior to travel. The information to be relayed included: date and time of departure, date and time of arrival back to Billing, method of transportation and with whom you will be traveling. A Travel Authorization form is the preferred method of communication regarding travel. Students will not be required to pay for expenses to travel as part of clinical education if they travel with the team and supervising athletic trainer.

Fair Practices

Students in each cohort will have equal opportunity to each field experience site. Every student will NOT rotate through every clinical education experience site. Each student will gain experiences with a variety of patients in a variety of settings throughout the two years. Each student will meet with the clinical education coordinator (and possibly program director) to determine clinical rotation each semester. Each student will be given fair and equal opportunity to attend each clinical rotation site sometime during the two year clinical education program.

Electronic Communication and Social Media

The MSUB ATP expects professional interactions between patients and healthcare providers at all times. As a result, ATS are prohibited from interacting with current patients, clients, undergraduate students/student athletes, coaches via social media (e.g. Facebook, Instagram, Twitter, Snapchat, etc.), text messaging and email. ATS are encouraged to keep all their social media accounts private. At no time is it appropriate to have any social media contact with any client or patients. Furthermore, ATS shall not share any confidential information (HIPAA or FERPA protective information) related to patient diagnosis or patient care through social media, text messaging or email.

Cell Phone Use

Cell phones are to be used in urgent or emergency situations during clinical education experiences. Cell phones may be used for personal calls if approved by the Preceptor. ATS shall not use cell phones during clinical educational experiences for non-educational (games, social media, unnecessary text messaging/email) purposes while participating in clinical education experiences/rotations.

Clinical Education Affiliated Sites Contact Information

Montana State University Billings

1500 University Drive
Billings, MT 59101

Clinical Preceptors:

Tom Ebel, Lindsay Sullivan, Tori Atencio

Rocky Mountain College

1511 Poly Drive
Billings, MT 59102 (1.62 miles)

Clinical Preceptors:

Jennifer Linton, Taylor Canfield

Billings Clinic Orthopedics & Sports Medicine

2702 8th Avenue North
Billings, MT 59101 (.74 miles)

Central Catholic High School

3 Broadwater Avenue
Billings, MT 59101 (1.30 miles)

Clinical Preceptors:

Cody Osborne

West High School

2201 St. Johns Ave.
Billings, MT 59102 (4.31 miles)

Clinical Preceptors:

Kacie Kolar, Becky Abrams

Senior High School

425 Grand Avenue
Billings, MT 59101 (1.35 miles)

Clinical Preceptors:

Stacy Molt, Taylor Purchio

OrthoMontana

Main Office

2900 12th Avenue North
Billings, MT 59101 (.14 miles)

Ortho Montana MACC West End

1739 Spring Creek Lane, Billings, MT 59102 (9.6 miles)

RiverStone Health

123 South 27th Street
Billings, MT 59101 (1.84 miles)

Clinical Preceptors

Kelsey Hoffman, DO

Dehler Park (MSUB Baseball)

2611 9th Ave N
Billings, MT 59101 (.98 miles)

Pirtz Field (MSUB Baseball)

26th W and Central at Stewart Park Rd
Billings, MT 59102 (4.8 miles)

MSU Billings, City College, MSUB Soccer

3803 Central Ave
Billings, MT 59102 (6.4 miles)

MetraPark/Rimrock Arena

308 6th Avenue North
Billings, MT 59101 (4.35 miles)
Used for NILE, PBR, Chase Hawks, State High School Activities

Amend Park (Soccer Complex)

King Ave E and Nimitz Drive
Billings, MT 59101 (3.8 miles)
Community Soccer Fields (used for youth and high school soccer)

V. STUDENT POLICIES AND PROCEDURES

Transfer Students

Students wishing to transfer to the Montana State University Billings Athletic Training Program must satisfy admission criteria as stated in the previous admission and program requirements section (III)

1. The Athletic Training Program may or may not accept the transferring credits. If accepted, students will be required to either provide proof of completed competencies/proficiencies from another accredited AT program or must complete the competencies/proficiencies associated with each course during the program.
2. Students must provide documentation of competencies/proficiencies instructed by providing syllabi, written work and assignments. Copies of syllabi from transfer courses will be required to accurately judge the equivalency of courses
3. Transfer students may apply for either fall or spring admission.
4. A maximum of 9 graduate credits may be accepted for transfer from approved accredited educational institutions as per institutional policy.
5. Copies of official transcripts must be sent directly from the registrar to the Office of Graduate Studies and Research.
6. No course credit may be transferred unless the grade received was at least a “B”. Transfer credits will be evaluated by the Program Director, the Health and Human Performance Department Faculty and Chair.

Withdrawal and Refunds

An Athletic Training Student deciding to withdrawal from the Athletic Training Program must indicate their withdrawal in writing. This written withdrawal will be placed in their file. Below is the link to the university policy regarding Withdrawal and Refund

https://www.msubillings.edu/boffice/refund_withdraw_policy.htm

Athletic Training Program Academic and Professional Standards

Students are required to meet the program academic and professional standards to remain in the program. Failure to maintain academic and professional standards can result in disciplinary action up to dismissal from the program.

Disciplinary Action, up to and including termination from the program, may be imposed for the following (this list is not exhaustive):

- Clinical disciplinary problems (conduct, communication, productivity, safety, dress code)
- Academic dishonesty
- Failure to comply with the ATP professionalism contract
- Inappropriate behavior at professional meetings, conferences, forums, etc.
- Not abiding policies and procedures as defined and outlined in this handbook.
- Not filing or updating technical standards verification.
- Failure to pass a criminal background check or other requirements of an Affiliated Site
- Failure to attend scheduled meetings with any faculty, staff or clinical preceptor.
- Repeated absences or tardiness for scheduled class, clinical lab and field experience times.
- Negligent or illegal acts
- Disorderly behavior

- Violation of state or federal laws
- Use/misuse/abuse of alcohol, chemicals, drug, etc.
- Conduct unbecoming a professional (academic, professional, clinical, ethical, behavior, etc.)
- Failing to conform to the standards of the profession of Athletic Training, NATA Code of Ethics, etc.
- Failing to abide by the competencies and proficiencies of the Athletic Training professional
- Creating an unsafe environment for patients, peers, students, faculty, staff, etc.

If a student has had any disciplinary actions, the program MAY establish a plan of improvement for students who have a reasonable likelihood of achieving the program requirements within a reasonable time frame.

Academic Dishonesty

The Athletic Training Program follows the MSUB Student Handbook policies and procedures for academic dishonesty. The section that specifically addressing academic dishonesty can be located on pp. 23-24. <https://www.msubillings.edu/vcsa/pdf/StudentHandbook.pdf>

Disciplinary Actions, Grievances and Appeals

At Montana State University Billings, Athletic Training students are expected to follow the policies as outlined in the Graduate Studies Catalog and Student Code of Conduct. <https://www.msubillings.edu/vcsa/pdf/StudentHandbook.pdf>

The Athletic Training Program will follow all university policies related to grievances and appeals.

Warning Policy

An Athletic Training Student may be placed on program warning if

1. there has been any disciplinary issues encountered in either the didactic or clinical education experiences
2. there has been any violations to the professionalism contract
3. any of the retention criteria, ATP requirements and academic standards, or graduate school criteria are not maintained

The student must meet with the Program Director (Clinical Education Coordinator may be included in meetings) to discuss course of action and plan of improvement.

Probation Policy

An Athletic Training Student will be placed on program probation if

1. the student's GPA drops below the cumulative 3.0 GPA criteria,
2. minimum clinical education experience hours are not met without prior arrangements,
3. there have been disciplinary issues in didactic or clinical education experiences or violation to the professionalism contract
4. any of the other retention criteria, ATP requirements and academic standards, or graduate school criteria are not maintained.

If a student is placed on probation,

- The student must meet with the Clinical Education Coordinator and/or the Program Director to discuss course of action and plan of improvement
- The Athletic Training student will be given up to one semester of program probation status in order to remediate the situation.

- An Athletic Training Student on program probation will have the opportunity to continue in the program; however he/she must demonstrate the successful resolution of program probation (i.e. 3.0 cumulative GPA, clinical hours completed, no further grades of 2.0 or below for courses, professional conduct/behavior).
- If a student is unable to remediate issues which led to the probation status within the given time frame, the student may be dismissed from the program. The student will receive written notification from the program director regarding this decision. However, the student may request acceptance back into the program once the retention criteria is met.
- If a student is placed on program probation due to a grade below a 2.0, that student must retake that course the next time it is offered, but must resolve the program probation within one semester. Rearrangements for retaking courses, clinical hours or other retention criteria which resulted in probation will need to be arranged with and approved by the Athletic Training Program Director and the HHP Department Chair.

Dismissal Policy

An Athletic Training Student will be placed on program probation if

1. the student's GPA drops below the cumulative 3.0 GPA criteria and the end of one semester and the student is unable to achieve a 3.0 GPA in the subsequent semester
2. there have been disciplinary issues in didactic or clinical education experiences or violations to the professionalism contract without remediation
3. any of the other retention criteria, ATP requirements or academic standards, or graduate school criteria are not maintained.
4. The Athletic Training Student can be dismissed from the program at any time if they have not met the academic, programmatic, professionalism and retention criteria.

Readmission: Rearrangements for retaking courses, clinical hours or other retention criteria which resulted in dismissal will need to be arranged with and approved by the Athletic Training Program Director and possibly the HHP Department Chair and the CAHP Dean. Students may reapply to the program if the student can show that he or she has successfully remediated the deficiency that led to dismissal. Readmission will be determined by the Athletic Training Program faculty and staff. An interview with the ATP faculty and clinical preceptors may be requested.

Grievances

In the event that an Athletic Training student has a grievance against faculty, staff, clinical instructors, or a fellow student, the following guidelines should be considered: University, College and Department Criteria for Grievance (<https://www.msubillings.edu/vcsa/pdf/StudentHandbook.pdf>) Examples of possible grievances include (not inclusive)

- Harassment
- Unfair practices
- Dishonesty
- Lack of professionalism
-

Athletic Training Program Grievance Procedures

1. Inform the individual of the grievance to clarify miscommunication.
2. Attempt to resolve the problem with the individual.
3. If the problem cannot be resolved, involve a third party, such the ASMSUB Student Resolution Officer, program director, or other faculty or staff member selected by program director.

4. If the issue continues to be unresolved, submit a grievance in writing to the department chair and copy it to the program director. The grievance should specify the action being grieved and the requested outcome sought by the student. Once the grievance is received the grievance committee of the program director, department chair and dean will review the case and take appropriate action.

Note: In the event that one of the grievance committee members is involved with the alleged action, the individual will excuse himself/herself from the matter.

Appeals Policy

1. A student may appeal a warning, probation or dismissal from the ATP
2. A student must submit a written appeal, no later than 30 business days to the Program Director.
3. The student will have an opportunity to meet with the Program Director, the Chair of the HHP Department as well as the Dean of the College of Health Professions and Sciences to discuss their appeal.

Attendance

Attendance policies for courses and labs associated with classes is up to the discretion of the individual instructor, but as this is a professional program, regular attendance is **strongly** recommended. Content missed is the responsibility of the student. **Attendance at the clinical lab and field experience sites are required. Missing scheduled clinical experience times or being tardy for class, labs or lectures is unprofessional and will lead to disciplinary action.**

Dress Code and Personal Appearance

The dress code for didactic and lab coursework follows university policy.

- Dress for lab experiences must allow for movement, but modesty will be maintained
- Furthermore, students will not be required to dress or reveal their bodies in a way that makes them uncomfortable.
- Conversely, students may be asked to change clothes that are inappropriate to wear to the classroom, lab or clinical site.
- Students will also be required to dress professionally when having a guest lecturer present in class.
- During clinical education experiences, students are required to dress professionally and be well groomed. In general, be neat, tasteful and professional.
- Be conservative in the use of perfume and cologne. Some patients and clients have intolerances or allergies to certain fragrances.
- In the event of inclement weather, student health and safety is of utmost importance and students are encouraged to dress accordingly and appropriate. In the event when patient contact will not occur (i.e. preseason or postseason preparations of cleaning, inventory, organization), please consult with clinical preceptor of appropriate attire.
- Students are not required to buy shirts or other gear specific for each clinical site, but may be required to purchase specific clothing for the ATP.
- Students are required to wear name badge to their general medical, orthopedic or rehabilitation clinical rotations and encouraged to wear name badges to their college and high school rotations to help patients/clients differentiate between certified staff and athletic training students.
- General Dress Code
 - **Shirts.** Collared shirts or appropriate professional attire are to be worn for all practices and events (meets, games, etc.).

- **Shorts/Pants.** Dress shorts/pants may be worn and must be appropriate length (at least fingertip length for shorts) and appropriate fit. No jeans, athletic wear (i.e. yoga pant, wind pants, sweats, athletic shorts), cut-offs or “short shorts” will be allowed during your clinical rotations
- **Shoes.** Closed toe shoes with socks should be worn at all times. Sandals or flip-flops are not acceptable forms of footwear.

Confidentiality

It is the responsibility of all Montana State University Billings Athletic Training students to ensure that all patient/client information (personal, medical, or education related) remain confidential. All athletic training students will undergo FERPA and HIPAA training during courses work and orientation during their first summer.

Due to the varied number of staff and personnel who may be involved with a patient’s care, it is essential that this policy be observed in order to maintain an atmosphere of mutual trust that must exist between the patient and representatives of the Montana State University Billings Athletic Training Program. Gossip, careless remarks, or idle chatter concerning patients, made inside or outside of the Athletic Training room, is inappropriate, unprofessional, and will not be tolerated.

Confidential health and education information is required by law (FERPA and HIPAA) to be protected. According to both FERPA and HIPAA, it is illegal for any medical/allied healthcare professional and individuals associated with an educational institution to gain access to patient/student information, through any and all means, unless the information is needed in order to treat the patient/student, or because their job would require such access. The protection of patient/student information, records, and reports is the responsibility of all personnel involved. Furthermore, this confidentiality policy applies to any information learned by or revealed to any certified athletic trainer and/or athletic Training student both in clinical and didactic settings.

General Keys to Success

- Be professional at all times
- Be timely
- Be deliberate in your learning
- Take initiative for your learning
- Use free time on education-practice
- Teach other students
- Be enthusiastic
- Accept constructive criticism from others
- Be respectful of others facilities, equipment supplies, personality, techniques and policies.
- Be dependable, loyal, dedicated, skillful, professional and organized
- Clinical education is an extension of your academic education, study hard, comply with deadlines, keep-up with proficiencies, **don’t procrastinate!**

VI. SAFETY

Calibration and Maintenance of Therapeutic Equipment

Therapeutic modalities and equipment for all active clinical sites are maintained on a regular basis according to National Institute of Standards and Technology and/or manufacturer guidelines. MSUB ATP organizes electrical safety checks and the calibration of therapeutic equipment/modalities for all at affiliated clinical sites on an annual basis and pays for these services if the clinical site is unable to afford those expenses.

Electrical Safety Guidelines

Athletic Training Students are not to operate a modality unless they have been taught the proper use either in coursework or trained by a clinical preceptor at the affiliated clinical site. If an athletic training student notices or observes any unsafe condition while using an electrical therapeutic modality, the student must remove themselves and report any unsafe conditions to the clinical preceptor as well as the program director or clinical education coordinator.

Radiation Exposure

Athletic Training Students who gain clinical experience in a setting where there is potential for being exposed to radiation producing devices (e.g.x-rays) must follow clinical site guidelines and protocols such as standing behind a protective shield, wearing a shielding device such as an aprons, etc. If you are pregnant you must notify the program director or clinical education coordinator as well as your clinical preceptor and remove yourself from the patient care in situations that would expose yourself to radiation (such as x-rays).

Handwashing

“Hand washing is the single, most important control measure for preventing transmission of germs.” (Carondelet, 1997). Hand washing can help prevent the spread of illness and infections both from patient to healthcare provider as well as from healthcare provider to patient. The basic rule is to wash hands with either soap and water or use an alcohol based sanitizer before and after each patient contact. (Center for Disease Control and Prevention). When washing your hands use the following technique:

1. “Wet your hands with clean running water and apply soap. Use warm water if it is available.
2. Rub hands together to make a lather and scrub all surfaces
3. Continue rubbing hands for 15-20 seconds. Need a timer? Imagine singing “Happy Birthday” twice through to a friend.
4. Rinse hands well under running water.
5. Dry your hands using a paper towel or air dryer. If possible, use your paper towel to turn off the faucet.
6. Always use soap and water if your hands are visibly dirty.” (Center for Disease Control and Prevention, 2010)

“If soap and water are not available, use an alcohol-based hand rub to clean your hands. Alcohol-based hand rubs significantly reduce the number of germs on skin and are fast acting. When using an alcohol-based hand sanitizer:

1. Apply (enough) product to the palm of one hand.
2. Rub hands together.
3. Rub the product over all the surfaces of hands and fingers until hands are dry.” (Center for Disease Control and Prevention, 2010)

Training and Hazardous Materials Management:

OSHA training occurs at the beginning of each year. Additional coursework also covers Blood Borne pathogens and infectious diseases. Students are required to take the ATP OSHA training annually. Verification of attendance will be placed in the Athletic Training Program OSHA file as well as documents in the students' folders. Students may be required to take additional OSHA training for individual field experience sites (St. Vincent's, Billings Clinic, RiverStone Health, Physical Therapy clinics, and High Schools each have policies and practices specific to their location).

Montana State University Billings Athletic Training Program OSHA, BBP, Infection Control

Introduction

“OSHA estimates that 5.6 million workers in the health care industry and related occupations are at risk of occupational exposure to bloodborne pathogens, including human immunodeficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), and others. All occupational exposure to blood or other potentially infectious materials (OPIM) place workers at risk for infection with bloodborne pathogens. OSHA defines blood to mean human blood, human blood components, and products made from human blood. Other potentially infectious materials (OPIM) means: (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV. The following references aid in recognizing workplace hazards associated with bloodborne pathogens.”

(<http://www.osha.gov/SLTC/bloodbornepathogens/recognition.html>)

General Information

There is no doubt that illnesses and infections related to contamination by bloodborne pathogens is not only a reality, but of major concern to athletic trainers treating athletes. In an effort to decrease the risk of transmission of bloodborne pathogens between these two parties, the Montana State University Athletic Training Education Program has adopted and will conform to the current procedures of universal precautions and risk management as stated by organizations such as OSHA and the NCAA. Universal precautions assume that all blood and body fluids of all athletes are potentially infected with AIDS, Hepatitis B or C other bloodborne pathogens. One is at risk when working with blood products; products containing blood; semen; cerebrospinal fluid; synovial fluid; pleural, peritoneal, pericardial and amniotic fluids and vaginal secretions. (One is not considered at risk when working with feces, nasal secretions, sputum, sweat, tears, urine, saliva, breast milk and vomitus.) (Prentice, 2009).

Because the opportunity exists for one to come into contact with a potentially dangerous blood or body fluid spill which may be infected with HIV, HBV, etc., the following protocols and precautions have been established.

Infectious Diseases

Although the risks for transmission for HIV and HBV are minimal in athletics, the athletic training student and sports medicine professionals must be informed regarding disease information and transmission (NCAA, 2008; Prentice, 2009)

According to Carondelet, 1997 and Prentice, 2009; the following information pertains to HIV/AIDS and HBV.

HIV (Human Immunodeficiency Virus): is a retrovirus that causes AIDS (Acquired Immunodeficiency Syndrome) and ARC (AIDS Related Complex)

- Signs and Symptom: flu-like symptoms, fever, night sweats, weight loss, diarrhea, severe fatigue, swollen lymph nodes, lesions
- Antibodies: can be detected within one year, may be detected as quickly as 6 to 12 weeks
- HIV is easily killed outside the body
- Transmission: direct or indirect contact- blood, semen and or vaginal fluids. Not transmitted by casual contact.

Hepatitis B is virus that causes an infection/disease which attacks the liver.

- Signs and Symptoms: flu-like symptoms, jaundice
- Antibodies: can be detected 6 weeks to 6 months (can transmit before having signs and symptoms)
- Individuals may be carriers even though they are not experiencing symptoms and can transmit the disease.
- Chronic infection can lead to cirrhosis and cancer
- Transmission: blood, semen and or vaginal fluids
- HBV is an extremely enduring virus (100 time more contagious than HIV)
- HBV vaccination is recommended to provide protection against the HBV.

Hepatitis C is also a concern for healthcare providers. According to Prentice, 2009, Hepatitis C is the “most common chronic bloodborne infection in the United States. At least 85 percent of those infected with acutely with HCV become chronically infected, and 67 percent develop chronic liver disease.”

- Signs and Symptoms: “jaundice, upper right quadrant pain, loss of appetite, nausea, fatigue, dark urine”.
- Antibodies may be detected in one to two weeks
- Most individuals infected with Hepatitis C do not exhibit symptoms or signs
- Transmission: blood (sharing personal care items)
- No vaccination available

Body piercings and tattoos may also place an individual at risk for HIV and Hepatitis B and C. (NCAA, 2008)

“Tuberculosis is caused by the bacteria *Mycobacterium tuberculosis*. TB is spread by airborne droplets.” (Carondelet, 1997) “Active TB disease occurs when the body is unable to prevent the bacteria from multiplying. The bacteria can be dormant for a number of years, then be reactivated in the future and cause active disease.” (Carondelet, 1997) Some risk factors which increase the likelihood of TB infection causing TB disease are:

- “Recent infection with TB,
- Abnormal chest x-ray with fibrotic lesions
- Insulin-dependent diabetes
- Prolonged treatment with steroids
- Immunosuppression
- Silicosis
- End-stage renal disease, etc.” (Carondelet, 1997)

Positive TB Skin Test – if one should have a positive reading from a TB test, it does not necessarily mean that the person has TB and can transmit the disease, rather he/she may have been previously infected with the TB bacteria, but he/she had a strong immune response to prevent the active disease from developing. It is important to remember that only those individuals who have the active disease can transmit tuberculosis and the individual may be required to have both a skin test and x-ray to rule out TB. (Carondelet, 1997)

Signs and Symptoms of TB – include:

- “Loss of appetite
- Weight loss
- Fatigue
- Night sweats
- Persistent cough
- Fever
- Chills
- Hemoptysis” (Carondelet, 1997)

All Athletic Training students will need to have a TBs skin test on record.

Hand Washing

“Hand washing is the single, most important control measure for preventing transmission of germs.” (Carondelet, 1997). Hand washing can help prevent the spread of illness and infections both from patient to healthcare provider as well as from healthcare provider to patient. The basic rule is to wash hands with either soap and water or use an alcohol based sanitizer before and after each patient contact. (Center for Disease Control and Prevention). When washing your hands use the following technique:

7. “Wet your hands with clean running water and apply soap. Use warm water if it is available.
8. Rub hands together to make a lather and scrub all surfaces
9. Continue rubbing hands for 15-20 seconds. Need a timer? Imagine singing “Happy Birthday” twice through to a friend.
10. Rinse hands well under running water.
11. Dry your hands using a paper towel or air dryer. If possible, use your paper towel to turn off the faucet.
12. Always use soap and water if your hands are visibly dirty.” (Center for Disease Control and Prevention, 2010)

“If soap and water are not available, use an alcohol-based hand rub to clean your hands. Alcohol-based hand rubs significantly reduce the number of germs on skin and are fast acting. When using an alcohol-based hand sanitizer:

4. Apply (enough) product to the palm of one hand.
5. Rub hands together.

6. Rub the product over all the surfaces of hands and fingers until hands are dry.” (Center for Disease Control and Prevention, 2010)

OSHA BBP Standards

Always assume that blood/bodily fluids, non-intact skin and mucous membranes have the ability to transmit a pathogen or infection. (Carondelet, 1997)

Personal Protective Equipment (PPE) - whenever there is a possibility to come in contact with blood or bodily fluids, one must establish a barrier and wear PPEs.

Hand washing: See Part I. Hand washing is crucial to help prevent the spread of illness and infection. Wash hands or use hand sanitizer before and after each new patient/athlete.

Gloves - Each clinical site will provide gloves for your use. Gloves create a barrier between the patient and the provider and must be used when there will be contact with “mucous membranes, non-intact skin and all bodily substances (blood, body fluids, secretions or excretions). When using gloves make sure to

1. Wash hands before caring for patient/athlete
2. Double glove (gloves on both hands) while caring for patient/athlete
3. Immediately and properly remove gloves after care
4. Dispose of gloves in proper receptacle
5. Wash hands again after removal of gloves.
6. Always apply new gloves between patients. (Carondelet, 1997)

When removing gloves, apply the following technique:

1. “Remove glove and turn it inside out.
2. Place the first glove in the second gloved hand then turn the second glove inside out so as to contain the first glove.
3. Remove second glove, making sure not to touch soiled surfaces with ungloved hand.
4. Discard gloves that have been used, discolored, torn or punctured.
5. Wash hands immediately after glove removal.” (Prentice, 2009)

Gowns and Aprons: personal protective clothing is to be used when the potential for blood and/or bodily secretions/fluids would soil clothing. Remove gown/apron immediately after care and properly dispose of disposal gowns in biohazard containers and if it is reusable gown, properly placed in linen receptacle (placed in a separate plastic bag). (Carondelet, 1997)

Mask and Eye Protection: personal face and eye protective equipment is used when there is risk of blood or bodily fluids spraying or splashing during care. A mask will protect the oral and nasal mucosa whereas eye protection, such as goggles (with side shields) will protect the eyes. As with all other personal protective equipment, remember to properly dispose of or place soiled garments or equipment in proper receptacles. (Carondelet, 1997)

CPR Masks must be used when performing mouth-to-mouth ventilations or CPR. CPR masks are available in a one-way valve and are not to be reused.

All PPE needs to be removed prior to leaving the training room and placed in proper receptacles.

Treatment of soiled and linen and storage of linens - linen and laundry that has been contaminated with blood or bodily fluids must be contained and confined. Soiled linen must be placed into a separate plastic bag and placed in proper linen receptacle. If the linen is placed in a red biohazard bag, it may be destroyed. All soiled laundry or linens must also be treated as potentially contaminated and hazardous when laundering so use gloves and double bag when transporting and cleaning linens. Contaminated laundry must be washed in hot water, 71 degrees Celsius for at least 25 minutes. (Arnheim, 2009; Carondelet, 1997)

Separating clean and soiled equipment - clean and soiled laundry and equipment need to remain separate and should not be mixed. (Carondelet, 1997)

Cleaning up blood or bodily fluid spills - playing as well as treatment surfaces may become contaminated with blood or bodily fluids. Since many of the microorganisms can survive on soiled surfaces, proper protocol and procedure must be followed to disinfect equipment and surfaces. When cleaning blood or bodily fluid spills:

1. Wear PPE (gloves, mask, goggles, etc.)
2. Know the locations of the nearest SHARPS and Biohazard containers.
3. Use disposable, absorbable towel to minimize spill. Dispose of waste in proper receptacle.
4. Treat the area with a 1:10 bleach and water solution or approved commercial cleaner. Allow for “setting time” before wiping the area clean. (Remember that 1:10 bleach solution loses its potency and must be replaced every 24 hours.)
5. Re-clean the surface with disposable towels and cleaners.
6. If spill occurs on absorbable materials, use a sanitary absorbent agent according to directions.
7. Dispose of waste in proper receptacle. Treat all materials as potentially contaminated.
8. If there is broken glass or sharp objects, do not attempt to pick up with hands, use a broom and dust pan. (Carondelet, 1997; Prentice, 2009)

Bleeding athlete during game or practice – using PPEs, care must be taken to cover all preexisting wounds prior to activity, but if the athlete should bleed during practice or a game, the athlete must be removed from activity until the wound has been cleaned and dressed appropriately. If the uniform has blood or bodily fluids, using a commercial agent to remove blood may be used, but if the uniform is saturated, the uniform will need to be removed and replaced with a clean uniform. (Prentice, 2009). Remove gloves and wash hands after care.

Reusable Equipment and Supplies – if blood or bodily fluids come in contact with reusable equipment or supplies, those supplies must be properly disinfected. For equipment or surfaces, use procedures for cleaning blood or bodily fluids spills as outlined above including use of PPEs. All equipment and surfaces should be decontaminated/cleaned at the end of the work day as well. If working with reusable sharps (such as scalpel handles, scissors, forceps), clean surface and place into a clear bag and they will be disinfected by autoclaving.

Disposable Contaminated Equipment and Supplies – if disposable equipment and supplies become soiled with blood or bodily fluids, place into proper biohazard or sharps container. Do not attempt to recap, bend, remove, etc. needles. (Occupational Safety and Health Administration)

Sharps Disposal – Sharps containers should be located at each clinical site. Please familiarize yourself with its locations. Sharp containers will be labeled, should be closeable and should not be overfilled. When filled, the Sharps containers will be transported to Ortho Montana for proper disposal. (Carondelet, 1997)

Exposure Incidents – If the possibility exists that one has been exposed to contaminated blood or bodily fluids during the course of duties as an Athletic Trainer or an athletic training student, immediately wash the area with soap and water or flush or irrigate mucous membranes (eyes, nose, mouth). (Carondelet, 1997) If a puncture occurred, encourage spontaneous bleeding.

Incident Reporting - Report any exposure to the Head Athletic Trainer and the Program Director and the need for HIV/HBV testing, etc will be determined by the Head Athletic Trainer and Program Director so the proper referral to Student Health Services and University Police can be made if necessary. Confidentiality regarding exposure, incident and student WILL BE maintained at all times. If a student or staff member is exposed to a BBP outside the training room, students or staff are encourage to communicate that information with the Program Director as well.

Please review the following for more information. http://www.cdc.gov/ncidod/dhqp/gl_hcpersonnel.html

Boylard, E. A. , Tablan, O.C., Williams, W.W. Pearson, M.L., Shapiro, C.N., Deitchman, S.D.& The Hospital Infection Control Practices Advisory Committee. (1998). Special Article: Guidelines for infection control in health care personnel, 1998. *American Journal of Infection Control*, 26(3), 289-354.
<http://www.cdc.gov/ncidod/dhqp/pdf/guidelines/InfectControl98.pdf>

References

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- Centers for Disease Control and Prevention. *Wash your hands*. Retrieved February 1, 2010 from <https://www.cdc.gov/Features/HandWashing/>
- National Collegiate Athletic Association (2008). *Sports Medicine Handbook*. 19th ed.
- Occupational and Safety and Health Administration. *Bloodborne pathogens and needlestick prevention*. Retrieved February 9, 2010 from <http://www.osha.gov/SLTC/bloodbornepathogens/recognition.html>
- Prentice, W. (2009). *Arnheim's Principles of Athletic Training*. New York, NY: McGraw-Hill



**Bloodborne Pathogen Exposure/OSHA
Incidence Report Form
Athletic Training Education Program**

Student Information

Name: _____ Student ID#: _____
Date of Birth: _____ Phone: _____
Address: _____
Email: _____

Description of Incident:

Date: _____ Time: _____
Location of Incident: _____ Type of Incident: _____
Location of Injury/Illness: _____
Name of Clinical Preceptor or immediate supervisor present: _____
Action/care provided taken during/after incidence: _____

Detailed Description of the Incident (please be specific – who, what, where, why, how):

Action Taken by Clinical Preceptor:

Action taken by Program Director or MSUB ATP Representative:

Signature(s) of athletic training student and Program Director:

Athletic Training Student Signature

Date

Program Director or MSUB ATP Representative

Date

Immunodeficiencies and other Communicable Diseases

For students who have HIV/AIDS, other syndromes associated with immunodeficiency states, or communicable diseases, there is an increased danger from infection due to diseases they may come in contact with in class, in the clinical setting, or in the work place. Students with HIV/AIDS, or anyone else with defective immunity, are at risk of acquiring or experiencing serious complications from such diseases. Of particular concern is the risk of severe infection following exposure to patients with infectious diseases that are easily transmitted if appropriate precautions are not taken (e.g., tuberculosis or chickenpox).

Students with immunodeficiency’s are encouraged to identify themselves as an immunodeficient AT student (**in private**) to their health care provider, so that they may receive counseling about potential risks associated with exposure to or taking care of patients with transmissible infections and should continue to follow infection control procedures to minimize their risk of exposure to infectious agents. When a AT student is accidentally exposed to a potentially infectious agent during the course of regular educational activities for the program, the University or program will not be responsible for costs incurred by the student for treatment and follow-up of this exposure. Any financial obligations incurred by an exposure are the student’s responsibility.

**Montana State University Billings
Athletic Training Program
Communicable Disease Policy**

In order to protect the safety and health of MSUB Athletic Training Students, the following Communicable Disease policy has been designed and adopted by the MSUB ATP. This plan will be utilized by students, clinical preceptors, and the Athletic Training Education Program staff and faculty to assist in the management (and prevention) of communicable diseases within the ATP as defined by the Centers for Disease Control.

A Communicable Disease is a disease that can be transmitted from one person to another person (direct contact); from an inanimate object (indirect); from conjunctival, nasal, oral mucosa, etc (droplet or airborne) or through contact with food, water, animals, etc (common vehicle). Below are examples of Communicable Diseases and protocol for management according to the CDC. (Boylard, E. A. , Tablan, O.C., Williams, W.W. Pearson, M.L., Shapiro, C.N., Deitchman, S.D.& The Hospital Infection Control Practices Advisory Committee. 1998)

Disease	Information	Transmission	Incubation Period	Action/Restrictions
Bloodborne Pathogens (Hep B, C and HIV)	Please see BBP/OSHA training	Please see BBP/OSHA training	Varies	Vaccination available for Hep B. Please see BBP /OSHA training for more information
Conjunctivitis	Bacterial or viral	Transmitted by direct contact with individuals or equipment	5-12 days	Referral for MD evaluation and medication. No contact until discharge from eye(s) ceases
Diphtheria	Rare in US	Transmitted by droplets or direct contact	2-5 days	No contact. Need to have anti-microbial therapy & 2 negative cultures more than

Disease	Information	Transmission	Incubation Period	Action/Restriction
				24 hours apart
Acute Gastrointestinal infections	Variety of causes – bacteria, virus and protozoa	Transmitted by direct contact, contaminated food, water, etc, airborne	Varies	Need to practice good hygiene to prevent infections. Restricted contact until asymptomatic
Hepatitis A	Viral infection	Oral/Fecal	15-50 days	Vaccination available, practice good hygiene and restricted contact until 7 days after onset of jaundice
Herpes simplex	Viral infection of hands (herpetic whitlow) or orofacila	Direct contact	2-14 days	Restricted patient contact or no contact depending on patient’s risk until lesions heal.
Measles (active)	Highly contagious	Direct and airborne transmission	5-21 days	Vaccination available (MMR). No contact until 7 th day of rash appearing.
Meningococcal disease	Variety of subgroups	Direct and airborne transmission	2-10 days	Can return to patient care /contact fter 24 hours of effective therapy
Mumps (active)	Vaccination (MMR) is best prevention	Respiratory secretions	12-25 days	May return to patient care/contact after the 10th day of swollen glands
Parvovirus	“Fifth Disease”	Direct contact with people or objects or droplets	6-10 days	Most contagious before rash appears, isolation is not indicated
Pertussis (active)	“Whooping Cough”	Highly contagious, airborne transmission	7-10 days	Vaccination is best prevention. No contact until 5 days after beginning antimicrobial treatment
Poliomyelitis	Last reported in 1979. Polio vaccination has greatly decreased incidence	Transmitted by direct contact or respiratory secretions	3-6 days for non-paralytic and 7-21 days for paralytic	Most contagious before and after onset of symptoms. Vaccination is best prevention

Disease	Information	Transmission	Incubation Period	Action/Restrictions
Rabies	Cases has increased since 1990.	Exposure to rabid animals or animal tissue (bite and non bite). Bites that penetrate the skin have the greatest risk	1-3 months	Pre and post exposure vaccinations are available. Action and restrictions need to be made on a individual basis.
Rubella (active)	Most contagious when rash appears	Transmitted by nasopharyngeal droplets	12-23 days	Immunization (MMR) is most effective treatment. No contact until 5 days after rash appears.
Scabies and pediculosis	Lice - transmitted by infestation of mites	Direct contact by person or inanimate objects		Cleaning procedures and medication will help with the elimination of mites. No contact until treated and no signs of infection
<i>Staphylococcus aureus</i>	Can also be a MRSA infection	Direct contact	Varies 30 minutes to 10 days depending on strain	No contact until lesions have healed. Need to be on prescription (antimicrobial) medication.
Streptococcus	Can be a natural carrier. Various diseases	Direct contact	Varies 2-10 days	No contact for at least 24 hours after appropriate prescription medications have started
Tuberculosis	Please see BBP/OSHA training	Please see BBP/OSHA training	Please see BBP/OSHA training	Students will need TB skin tests before a clinical rotation at a hospital or clinic. No contact until proven noninfectious
Vaccinia (smallpox)	WHO declared world free of smallpox in 1980	Theoretical risk with contact with dressings or recombinant vaccination		Vaccination recommended for select individuals

Disease	Information	Transmission	Incubation Period	Actions/Restrictions
Varicella	Chickenpox or shingles Vaccination available	Direct contact (airborne has also occurred)	10-21 days	No contact until lesions are dry and crusted . Can develop immunity after being infected by Varicella
Viral respiratory infections (flu, RSV, rhinovirus, etc)	Some vaccinations available for certain strains	Direct contact, droplet or airborne	1-5, day 3 most contagious	No contact until asymptomatic

The above information regarding communicable diseases was taken from the Centers for Disease Control recommendations. (Boylard, E. A. , Tablan, O.C., Williams, W.W. Pearson, M.L., Shapiro, C.N., Deitchman, S.D.& The Hospital Infection Control Practices Advisory Committee. 1998).

If uncertainty occurs, proper referral to medical professional for diagnosis and treatment is a must. If there are doubts, seek medical treatment ASAP.

MSUB ATP Guidelines for the prevention and management of communicable diseases:

1. Student must have BBP/OSHA training during their orientation to the program. Additional training may be required for each clinical site.
2. Students must utilize Universal Precautions and good hygiene according to BBP/OSHA training at all times.
3. If there has been a potential exposure to a BBP or communicable disease, the student must communicate that information with the clinical preceptor and the program director and fill out the appropriate incidence report form (BBP).
4. If a student becomes ill, students are encouraged to self-isolate and to seek medical treatment from either the MSUB Student Health or their family practitioner. Under certain situations of a communicable disease, proof of MD work/school release may be required.
5. The student must communicate medical absences to the Program Director and the appropriate ATP faculty and clinical preceptor as soon as possible.

References:

Boylard, E. A., Tablan, O.C., Williams, W.W. Pearson, M.L., Shapiro, C.N., Deitchman, S.D.& The Hospital Infection Control Practices Advisory Committee. (1998). Special Article: Guidelines for infection control in health care personnel, 1998. *American Journal of Infection Control*, 26(3), 289-354.
<http://www.cdc.gov/ncidod/dhqp/pdf/guidelines/InfectControl98.pdf>

Required Immunizations

HBV, TB test, MMR and seasonal flu vaccination

MSUB requires two immunizations Measles and Rubella for admission into the University. Students will need to provide proof of immunizations to enroll at MSUB and the ATP will request immunization records from student health services for our records.

Students are required to obtain and provide proof of a TB skin test once admitted to the program and prior to starting clinical education rotation. Typically, TB test are covered by the ATP and done by MSUB Student Health in July of the first year in the program.

Students are required to either obtain or decline the Hepatitis B (the Hepatitis B vaccination and an up to date Tdap are strongly encouraged).

Students are also required to obtain a flu shot when it becomes available.

Health and Safety

Exposure to Potential Health Risks

Students should be aware that they may be exposed to variety of potential health risks throughout the educational program and clinical practice. These include, but are not limited to:

1. Laboratory sessions in which students work with each other to practice various procedures including exercise, functional activities, physical agents and modalities, manual therapy and the use of assistive and adaptive devices.
2. Clinical experiences in which students perform various procedures including exercise, functional activities, physical agents and mechanical modalities, manual therapy and the use of assistive and adaptive devices. Students may also be exposed to infectious diseases in the clinic setting.

Students should check equipment for safety, and calibration documentation. Students **MUST** report any questions concerning the safety of equipment, supplies or practices or techniques at any site to the program director immediately.

Accidents

In addition to complying with proper procedures for reporting accidents at each clinical center, all accidents involving students, which require the filing of a written report, must be reported to the program director immediately.

Emergency Action Plans

Due to confidential information for some affiliated sites, Emergency Action Plans (EAP) for the Affiliated Clinical sites are located not available online, however they are available at each site. You must ask your CP to see and review the EAP during your orientation to your clinical site. Please review the EAPs with your clinical preceptors and ask questions so you have a full understanding of your role in case of an emergency.

Emergency Cardiac Training

All athletic training students undergo CPR and AED for the professional rescuer training during their first summer semester in the program as part of AT Techniques I and before clinical education/clinical rotations begin.

VII. GRADES, ASSESSMENT AND EVALUATION

Grade Policy

The university does not employ a universal grading policy and allows faculty autonomy in the development of their grading criteria and scale. All Athletic Training courses have grading policies included on the syllabi.

Student Evaluations

Athletic Training students are evaluated throughout each clinical and didactic course.

During the first year, students are evaluated by clinical preceptors at least twice a semester the first year. During the second year, the student may be evaluated at midpoint and at the completion of their clinical rotations. The clinical preceptors are encouraged to provide informal feedback to the student throughout the rotation as well. The Athletic Training Student should carefully read over the evaluation forms in order to understand how they will be evaluated. Once the clinical preceptor has completed the evaluation he/she will schedule a time with the student to discuss their evaluation. Once the entire evaluation has been discussed, the instructor will sign and date the evaluation. If the student agrees with the evaluation they sign the form.

Student Self Evaluations

Each student will complete the self-evaluation for the clinical education experience for each rotation. Students should use this opportunity to reflect on their clinical education experience as well as accomplishments and goals.

Journaling/Blogging

Students may be required to journal or “blog” through the learning management system for courses (D2L) about their clinical experiences to critically reflect upon their experiences in the clinical setting. Here students reflect on what they did/observed, what they learned; how they could challenge themselves; how they could gain more knowledge or skills as well as overall experience.

Clinical Preceptor and Clinical Site Evaluation

Each clinical preceptor and clinical site will be evaluated by each student at the end of each rotation . The clinical preceptor evaluation is specific to the one supervising the Athletic Training student. The site evaluation is designed to evaluate other personnel and staff and the physical environment of the site. The clinical preceptors will receive a confidential clinical instructor and site summary evaluation report after enough evaluations have been performed to protect the anonymity of the students.

Faculty and Lab Instructor Evaluations

Each semester students will complete faculty and course evaluations for all ATP courses.

With all assessments and evaluations, we encourage constructive feedback so remember to be honest, offer suggestions, be polite and be tactful.

Master Program Assessment Plan

Measures of Student Learning					
Assessment	Who	Evaluation Tool	Measurement	When	SLO
Student Learning	Faculty and Clinical Preceptors	Various course assessment tools (quizzes/exams, projects, OP exams, standardized patient simulations)	Evaluate the knowledge, skills, and abilities of the athletic training student	Throughout the course and throughout the curriculum	SLO 1, 2, 3
Clinical Preceptor Evaluation of Student	Clinical Preceptor	ATrack	Evaluate student's knowledge, skills, abilities and professional behaviors in the clinical setting	At the completion of each student's rotation	SLO 1, 2
Student Self Evaluation	Student	ATrack	Student evaluates and reflects own knowledge skills and abilities	At the completion of each student's rotation.	SLO 1, 2
Quality of Instruction					
Assessment	Who	Evaluation Tool	Measurement	When	SLO
Course Evaluations and Peer Reviews	Student and Peers of Faculty	Student Evaluations of Teaching (SETs) are Administered by Institution Research Peer Review are carried out by	Evaluate both the course and the instructor Course review process is outlined in the CBA	SETs are completed towards the completion of the semester for each course and each instructor. Peer reviews can occur at any time in	Program Effectiveness

		peers at university or within higher education		the semester	
Quality of Clinical Education					
Assessment	Who	Evaluation Tool	Measurement	When	SLO
Clinical Site Evaluation	Student	ATrack	Evaluate the appropriateness and effectiveness of clinical site	At the completion of each student's rotation	SLO 2
Clinical Site Evaluation	Clinical Education Coordinator	Paper (and then scanned)	Evaluates clinical site and clinical education experiences	Once per year	SLO 2 Program Effectiveness
Clinical Preceptor Evaluation	Student	ATrack	Evaluate effectiveness of CPs	At the completion of each student's rotation	Program Effectiveness
Overall Program Effectiveness					
Assessment	Who	Evaluation Tool	Measurement	When	SLO
Exit Student Survey	Program Director	Survey (Qualtrics)	Students provide feedback regarding entire program	During the last month of the last semester in the program	SLO 1, 2
Clinical Preceptor Evaluation of the Program	Program Director	Survey (Qualtrics)	Clinical preceptors to provide feedback on program (curriculum, students, communication, etc.)	At end of AY	Program Effectiveness
Graduate Survey	Career Services	Survey	Recent graduates are queried about job placement and salary	Per Career Services schedule	Program Effectiveness

*Montana State University Billings
Athletic Training Program*

BOC Certification	Program Director or Student	Verification of BOC certification	PD or student self verifies BOC certification.	Ongoing	Program Effectiveness
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VIII. STUDENT SUPPORT AND RESOURCES

Reference Material

The MSUB ATEP web site contains an AT student link section. This is a valuable resource for text, presentation and BOC exam prep materials.

<https://www.bocatc.org/candidates>

Athletic Training Laboratory Equipment:

The Montana State University Billings Athletic Training Laboratory contains several pieces of expensive equipment. Equipment should never be removed from the laboratory unless approved by a faculty or staff member during a clinical experience course or research project. Students should verify calibration and safety of all equipment. Check equipment for calibration inspection stickers and review records prior to use. Equipment and supplies include but not limited to: joint models, books, videos, goniometers, computers, reflex hammers, wraps, braces, balance trainer, and rehab equipment, tape, wraps, braces, etc.

Computer Equipment

Computers are not to be used during lab/field experiences unless supervised by a faculty or clinical instructor. Athletic Training students are not to modify any of the software on the computers nor add any additional software without permission from the program director.

Laboratory Use

The Athletic Training lab is to be used mainly for research and educational purposes. Athletic Training students may use the laboratory at any time when a class or research project is not in session. Specific rules and regulations are posted in the lab. Students should work around and with classes held in PE 012 and 059. Athletic Training students, faculty and staff should keep the laboratory clean at all times. The laboratory should be cleaned on a daily basis. Tables should be cleaned, trash emptied, and the floor swept. All equipment should be put away at the end of each day. "If you use it, clean it and put it away".

*The Athletic Training laboratory shares space with the MSU Athletic Training Staff and Athletics. Protocols for efficient and effective use of this space will be negotiated as the need arises.

MSU Billings Campus Resources

Academic Support Center <http://www.msubillings.edu/asc/>

Office of International Studies <http://www.msubillings.edu/internationalstudies/>

Counseling and Guidance Services

Athletic Training Students are eligible to utilize the counseling and guidance services at Montana State University Billings. Counseling services are located at Student Health Services in Petro Hall, 406-657-2153.

<https://www.msubillings.edu/studenthealth/>

Student Clubs

Students are encouraged to participate in the JATO (Jacket Athletic Training Organization) and other organizations on campus.

Health Insurance

The health insurance policy for the program follows the University policy. At this time health insurance is required and students must purchase or have their own health insurance coverage.

Liability Insurance

The university has a group policy which includes the students in the coverage for liability. Coverage must meet clinical site requirements, typically a \$1,000,000/\$3,000,000 policy. Students will be required to have liability insurance and proof can be acquired from the Vice Chancellor's of Administration and Finance office.

Student Athletes, Graduate Assistantships and Outside Work commitments:

The MSUB ATP is a rigorous program requiring afternoon, evening and weekend clinical field experiences. Athletic Training Student's participation in intercollegiate athletics, graduate assistantships, graduate teaching assistantships or work does not disqualify them from the program; however, Athletic Training Students must understand and appreciate the time commitment of fulfilling the hour requirements and their clinical experiences. All Athletic Training Students must fulfill the minimum hour requirements of the clinical education each semester. Students who obtain graduate assistant positions or work are also required to complete clinical education each semester. **At no time should outside commitments conflict with scheduled clinical education and clinical rotations**

Non-Discrimination Policy:

"Montana State University Billings is committed to providing an environment that emphasizes the dignity and worth of every member of its community and that is free from harassment and discrimination based upon race, color, religion, national origin, creed, service in the uniformed services (as defined in state and federal law), veteran's status, sex, age, political ideas, marital or family status, pregnancy, physical or mental disability, genetic information, gender identity, gender expression, or sexual orientation. Such an environment is necessary to a healthy learning, working, and living atmosphere because discrimination and harassment undermine human dignity and the positive connection among all people at our University. Acts of discrimination, harassment, sexual misconduct, dating violence, domestic violence, stalking, and retaliation will be addressed consistent with the Policy on Discrimination, Harassment, Sexual Misconduct, Dating Violence, Domestic Violence, Stalking, and Retaliation.

<http://www.montana.edu/policy/discrimination/>" All complaints regarding discrimination in the areas covered under this section, if not otherwise resolved, should be registered with the Human Resources/EEO-AA/Title IX Coordinator Office, McMullen Hall 310, Phone (406) 657-2278.

<http://www.montana.edu/policy/discrimination/procedures/>"

(MSUB Student Handbook) <https://www.msubillings.edu/vcsa/pdf/StudentHandbook.pdf>

Every individual associated with the MSUB ATP is required to comply with discrimination, fair practices and all Montana and federal laws. Failure to do so will result in removal from the program. The MSUB ATP and everyone associated with it shall comply with Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972 and Section 504 of the Rehabilitation Act of 1973, and related regulations, and assure that it does not and will not discriminate against any person on the basis of race, creed, sex national origin, age, or handicap under any program or activity receiving federal financial assistance.

Sexual Harassment

"Sexual Harassment includes: unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature, including sexual misconduct. Sexual harassment, including sexual misconduct, can involve persons of the same or opposite sex. Sexual harassment occurs when the terms or conditions of employment, educational benefits, academic grades or opportunities, living environment or participation in a University program is conditioned upon, either explicitly or implicitly, submission to or rejection of unwelcome sexual advances or requests for sexual favors, or such submission or rejection is a

factor in decisions affecting that individual's employment, education, living environment, or participation in a University program. Sexual Harassment also includes hostile environment harassment based on sex which is severe, pervasive, or persistent and interferes with academic performance. Anyone with questions or concerns about sex discrimination or harassment or who believes they have been a victim can use the link below to contact Title IX Coordinator and review policy <http://www.montana.edu/policy/discrimination/>. The grievance procedure <http://www.montana.edu/policy/discrimination/procedures/>. Policy violations include retaliation against an individual for taking any of the actions in support of the policy as defined in Section 128.00 of the Policy." (MSUB Student Handbook)

Sexual harassment of any member of the University community by another member of the University community is inconsistent with the principles and mission of MSUB. The Equal Employment Opportunity commission offers the following definitions. "Harassment on the basis of sex is a violation of Sec. 703 of Title VII of the Civil Rights Act of 1964. Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment decisions affecting such individuals, or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment." [CF. sec. 1604] MSUB policy: https://www.msubillings.edu/geninfo/Policy_Sexual_Harassment.htm Complaints of sexual harassment must be filed with the **Human Resources/EEO-AA Office, McMullen Hall 301, Phone (406) 657-2278.**

For additional information regarding Title IX please see the following link
https://www.msubillings.edu/studenthealth/phoenix_center/title-9.htm

Financial Aid, Awards, and Scholarships

Students are encouraged to apply for all available awards, teaching/graduate assistantships & scholarships. If interested in Financial Aid through the university, students are strongly encouraged to complete their FAFSA as soon as possible. There are also scholarships available through the university for graduate students and students are encouraged to submit scholarship applications (typically due in February). More information regarding financial aid and scholarships can be located at the link below.
<https://www.msubillings.edu/finaid/>

IX. STUDENT RECORDS

Student Records

The ATP will maintain student files. The application materials as well as current program requirements will be placed in the student file. The files are confidential and will be maintained in the HHP and located either in the main office or electronically. Student may request to see their student folders with the exception of confidential information (i.e. letter of recommendation, etc.). The following will be in the student files.

- GRE scores if applicable
- Letters of Recommendation
- Observations Hours (not required)
- Undergraduate Transcripts
- Application Essay
- Application to Graduate School/ATP
- Application Evaluation Form
- Technical Standards
- CPR/AED Certification
- Plan of Study(paper or Degree Works)
- Proof of Immunizations (MMR, TB, etc.)
- Proof of Hep B or Declination form
- Background Check Disclosure Form (if applicable)
- Confidentiality Form
- Professionalism Contract
- Health and Safety Commitment Form
- HHP and CAATE Waivers
- Discipline (if applicable)

Advising documentation will be located in Degree works.

Records of Clinical Hours, Patient Encounters and Completed Assessments will be located in ATrack.