



2017-2018

Athletic Training Program

Policy and Procedure Manual



**UNIVERSITY OF
SOUTH CAROLINA**



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I. INTRODUCTION

1. *The Athletic Training Profession - What is an Athletic Trainer?*

Athletic training is practiced by athletic trainers, health care professionals who collaborate with physicians to optimize activity and participation of patients and clients. Athletic training encompasses the prevention, diagnosis, and intervention of emergency, acute, and chronic medical conditions involving impairment, functional limitations, and disabilities. Students who want to become athletic trainers (ATs) must earn a degree from an accredited athletic training curriculum. Accredited programs include formal instruction in areas such as injury/illness prevention, first aid and emergency care, assessment of injury/illness, human anatomy and physiology, therapeutic modalities, and nutrition. Classroom learning is enhanced through clinical education experiences. More than 80 percent of certified athletic trainers hold at least a Masters' degree. In cooperation with physicians and other allied health personnel, the AT functions as an integral member of the athletic healthcare team in secondary schools, colleges and universities, sports medicine clinics, professional sports programs, industrial settings, and other healthcare environments.

- National Athletic Trainers Association. (2010). [\[www.nata.org\]](http://www.nata.org)

2. *Professional Preparation*

The athletic training student's (ATS) professional preparation is directed toward the development of specific educational competencies and clinical proficiencies outlined by the National Athletic Trainers' Association Education Council. USC's athletic training program requires all students to complete six semesters of clinical experiences and all associated clinical competencies. The clinical competencies are based upon didactic and clinical knowledge from the following subject matter areas:

- Assessment of Injury/Illness
- Exercise Physiology
- First Aid & Emergency Care
- General Medical Conditions & Disabilities
- Health Care Administration
- Human Anatomy
- Human Physiology
- Kinesiology & Biomechanics
- Medical Ethics & Legal Issues
- Nutrition
- Pathology of Injury/Illness
- Pharmacology
- Professional Development & Responsibilities
- Psychosocial Intervention & Referral
- Risk Management & Injury/Illness Prevention
- Strength Training & Reconditioning
- Therapeutic Exercise & Rehabilitative Techniques
- Therapeutic Modalities
- Weight Management & Body Composition
- Statistics and Research Design

Through a combination of formal classroom instruction and clinical experience, the ATS is prepared to apply a wide variety of specific health care skills and knowledge within each of the domains.

3. *BOC Certification*

In order to become a certified as an AT, the ATS must graduate from an accredited athletic training program and pass the BOC examination. Students enrolled in the USC Athletic Training Program (AT Program) must meet BOC requirements in order to apply to take the examination.

PLEASE VISIT THE BOARD OF CERTIFICATION WEBSITE AT www.bocatc.org FOR MORE DETAILED INFORMATION

II. USC AT PROGRAM FACULTY/STAFF DIRECTORY

USC AT Program Faculty	Office #	Office Phone#	E-mail
Jim Mensch, PhD, SCAT, ATC Undergraduate Program Director	102	(803) 777-3846	jmensch@mailbox.sc.edu
Amy Hand, MA, SCAT, ATC Undergraduate Clinical Education Coordinator	101-A	(864) 590-5257	fraleyal@email.sc.edu
Toni Torres-McGehee, PhD, SCAT, ATC Graduate Program Director	212	(803) 777-0636	torresmc@mailbox.sc.edu
Justin Goins, PhD, SCAT, ATC Graduate Clinical Education Coordinator	101-P	(803) 777-9860	goinsj@mailbox.sc.edu
Susan Yeargin, PhD, SCAT, ATC Associate Professor	PHRC 226	(803) 777-3169	syeargin@mailbox.sc.edu
Kari Wolf-Odland, DAT, SCAT, ATC Clinical Instructor	101-B	(803) 777-4616	wolfodla@mailbox.sc.edu
Chandler Fogle, MS Academic Advisor—Athletic Training	PHRC 206D	(803) 576-6357	FOGLECA@mailbox.sc.edu
Jeremy Stroud Administrator	102	803-777-5267	STROUDJM@mailbox.sc.edu

PhD Students	Office #	Phone#	E-mail
Erin Moore, MS, SCAT, ATC	213	(603) 860-6916	erinmm@email.sc.edu
Rebecca Hirschhorn, MS, SCAT, ATC, NREMT	211	(703) 963-3722	hirschhr@email.sc.edu
Samantha Weber, MS, SCAT, ATC	213	(414) 828-5000	srweber@email.sc.edu
Ally Smith, MS, SCAT, ATC	211	(740) 255-1323	abs16@email.sc.edu

USC Adjunct Faculty	Office #	Office Phone#	E-mail
Ashly Goins, MS, SCAT, ATC	Strom ATR	(803) 576-9385	ashly.goins@uscmed.sc.edu
Clint Haggard, MS, SCAT, ATC	Football ATR	(803) 777-5574	chaggard@mailbox.sc.edu
Nichee Lloyd, PT	Palmetto Health	(803) 749-5031	nlloyd@drayerpt.com
Mark Rodger, MAT, SCAT, ATC	Colonial Center ATR	(803) 777-5182	rodger@mailbox.sc.edu

Stephanie Rosehart, MS, ATC CPR Coordinator	Roost ATR	(803) 413-9025	rosehart@sc.edu
Rachel Sharpe, MS, SCAT, ATC	Football ATR	(803) 777-8157	sharperl@mailbox.sc.edu
George Wham, EdD, SCAT, ATC	Pelion High School	(803) 821-2258	Gwham@lexington1.net

III. USC AT PROGRAM MISSION

Mission

The mission of the University of South Carolina's Athletic Training Program is to create a center of excellence for the advancement of athletic training, through the integration of innovative, interdisciplinary, and transformational education, research, evidence-based practice, and community engagement. The University of South Carolina Athletic Training Program will develop competent and compassionate athletic training leaders and lifelong learners who will enhance health-related outcomes for a population of diverse individuals and communities throughout South Carolina, the nation, and internationally.

Vision

The University of South Carolina Athletic Training Program's vision is to achieve prominence as an innovator in the integration of interdisciplinary education, research, evidence-based practice, and community engagement. The Program will advance the profession of athletic training, our community of learners, current and future athletic training leaders, health-related outcomes, and healthcare policy at all entries of practice.

USC AT Program Educational Objectives

- USC AT Program provides students with the theoretical knowledge and understanding of the health profession of athletic training as well as current procedures and techniques in injury management.
- USC AT Program provides an atmosphere that is conducive to quality classroom instruction and clinical experiences in a process that culminates in the student graduating with eligibility to sit for the Board of Certification (BOC) examination.
- USC AT Program exposes the athletic training students to a variety of experiences that will best develop their clinical skills in route to becoming an entry-level athletic trainer.
- USC AT Program provides quality Preceptors for our athletic training students for their clinical education.
- USC AT Program assists athletic training students to strive for professional excellence (e.g., community involvement and service).
- USC AT Program follows all guidelines established by BOC, CAATE, NATA, NATAEC, and NCAA.

IV. USC AT PROGRAM DESCRIPTION

The USC AT Program is housed in the Department of Exercise Science in the Arnold School of Public Health. The USC AT Program has maintained its accreditation through the Commission on Accreditation of Athletic Training Education (CAATE) since 1992. At this time, the USC AT Program is one of only six CAATE-accredited athletic training education programs in South Carolina, and one of only seven undergraduate programs in the Southeastern Conference (SEC).

The USC AT Program provides students with the theoretical knowledge and understanding of the allied health profession of athletic training as well as current procedures and techniques in sport injury management. Students

gain this knowledge through required coursework and clinical experiences as they prepare to make successful contributions to the athletic training profession. The program combines formal classroom instruction and clinical experiences in a process that culminates in the student graduating with eligibility to sit for the Board of Certification (BOC) examination. Students who graduate from the program and subsequently pass the national certification examination will be qualified to be employed as an athletic trainer in a variety of allied health settings, including secondary schools, colleges and universities, professional athletic teams, sports medicine clinics, or in industrial preventative medicine clinics. In addition, students who complete prerequisite course requirements may pursue graduate education in athletic training, exercise physiology, physical therapy, health, physical education, or other allied health professions.

V. STUDENT ACADEMIC INFORMATION

****For the most up-to-date information on academic requirements, students are encouraged to visit the online version of the Student Advisement Guide.*

Admission to the University of South Carolina

****The BS in Athletic Training degree at USC has been terminated and will no longer be accepting applicants****

The Commission on Accreditation of Athletic Training (CAATE) recently announced that all professional education in athletic training must be at the master's degree level. A Bachelor of Science degree in Athletic Training is no longer offered as a major for undergraduate students at the University of South Carolina. We are in the process of transitioning our athletic training program and have plans to launch a new Professional Master's Program in Athletic Training in summer of 2019.

Students interested in a career in athletic training are encouraged to consider USC's current Bachelor of Science degree in Exercise Science. This degree has a cognate of classes in Athletic Training, as well as practicum experiences and pre-requisites courses that will prepare students for the Professional Master's Program in Athletic Training.

If you have any questions about athletic training or the degree change, do not hesitate to contact Dr. Jim Mensch (AT Program Director) at jmensch@mailbox.sc.edu

Student Responsibility

The Arnold School of Public Health faculty and staff work diligently to provide students all the information that is necessary to complete its undergraduate programs in a successful and timely manner. However, it is the student's responsibility to thoroughly read all of the information available in this handbook and handouts on the College's website and in the *USC Undergraduate Studies Bulletin*. Likewise it is the student's responsibility to maintain accurate and current address and phone number information both with the Office of Student Services in the Arnold School of Public Health and with the USC Registrar's office. Any exception to requirements must be submitted in writing to the Arnold School of Public Health, and until and unless a student has received a written response in the affirmative, the exception does not exist.

Earning Credit in Transient Status

Students must request permission prior to taking a course from another institution in transient status. To do this, a student should meet with his/her advisor to discuss the course being requested and to complete a Special Enrollment Request form. The student should bring a description of the course they plan to take to that meeting.

A grade of C or better must be earned in the transient course in order for it to transfer back to USC. Grades lower than a C do not transfer to USC. Therefore, any transfer course in which a grade less than C was earned cannot be used for degree credit. The last 30 credit hours toward your degree must be earned in residence at the University

of South Carolina.

Course Load

Students must seek permission from their academic advisor to take a course load in excess of 17 hours. Students in the Arnold School of Public Health will not be allowed to register for more than 17 hours in a fall or spring semester unless they have earned at least a B average on the previous (most recent) 12 hours of coursework taken. In addition, the advisor will take into account the student's overall academic status when determining if a course overload will be granted and how many total hours would be approved. The Arnold School of Public Health does not recommend any student take an overload of hours, and students who do so should be aware of the academic workload required for the courses they plan to take.

Students who register for a course load of more than 16 semester hours in a fall or spring semester will pay an additional per hour fee as outlined in the schedule of fees available from the Bursar's Office (www.sc.edu/bursar). Fees are subject to change.

Declaring a Minor

Minors are not required for Athletic Training majors. Athletic training students may, however, elect to declare a minor. A minor is a series of courses that display a distinct curricular pattern in one discipline that is different from the major.

All minor requirements are outlined in the university undergraduate bulletin. Before declaring a minor, students should read the requirements of the minor and determine if all courses can be completed by their anticipated graduation date. A course used to meet a degree requirement may not be used to meet a requirement of the minor. However, courses taken to meet a minimum elective requirement may be used in the minor. All minor courses must be passed with a grade of C or better.

The Physical Education (Athletic Coaching) minor is not available to students majoring in Athletic Training. Other minors may not be appropriate for a given major. Students should consult with their advisor to discuss the minor declaration process.

Academic Advisement

The Athletic Training Program Advisor is Chandler Fogle. You can find him in PHRC 206-D.

The formal advisement period consists of approximately 4-5 weeks during which you will schedule an appointment to plan your course work for the next semester. You will receive an email through the university student email system informing you of the dates for advisement and the steps which you need to follow to sign up for an advisement appointment. You will not be permitted to pre-register for classes until you have met with your assigned advisor. Students who miss the formal advisement period will not be advised until late advisement, which will be a specified date after open registration.

For questions not related to course selection, please make an appointment with your advisor outside of the formal advisement period.

VI. ATHLETIC TRAINING – B.S. (2017-2018)

Athletic Training – B.S. (2017-2018)

Degree Requirements (Total semester hours: 122-131)

1. Carolina Core Plus Athletic Training General Education (44-56 hours)

CMW	EFFECTIVE, ENGAGED, AND PERSUASIVE COMMUNICATION: WRITING (6 hours)	Complete 6 hours (two courses) as follows: Grade of C or better required <ul style="list-style-type: none"> • ENGL 101 (3) • ENGL 102 (3)
ARP	ANALYTICAL REASONING & PROBLEM SOLVING (6 hours)	Complete 6 hours (two courses) from: Grade of C or better required <ul style="list-style-type: none"> • MATH 122 (3) • MATH 141 (4) • MATH 142 (4) • MATH 170 (3) • MATH 172 (3) • PHIL 110 (3) • CSCE 101 (3) • CSCE 102 (3) • CSCE 145 (4) • STAT 110 (3) or STAT 112 (3) • STAT 201 (3) • STAT 205 (3)
SCI	SCIENTIFIC LITERACY (20 hours)	Complete 20 hours in science as follows: Grade of C or better required Select one of the following courses/course sets (4hours): <ul style="list-style-type: none"> • BIOL 101 - Biological Principles I and BIOL 101L • BIOL 110 - General Biology • BIOL 120 - Human Biology and BIOL 120L Select one of the following courses/course sets (4 hours): <ul style="list-style-type: none"> • PHYS 101 - The Physics of How Things Work I and PHYS 101L • PHYS 201 - General Physics I and PHYS 201L Select one of the following courses/course sets (4 hours): <ul style="list-style-type: none"> • CHEM 102 - Fundamental Chemistry II • CHEM 111 & 111L - General Chemistry I and Lab Select one of the following courses/course sets (4 hours): <ul style="list-style-type: none"> • EXSC 223 & 223L - Anatomy and Physiology I and Lab • BIOL 243 & 243L - Human Anatomy and Physiology I and Lab Select one of the following courses/course sets (4 hours): <ul style="list-style-type: none"> • EXSC 224 & 224L - Anatomy and Physiology II and Lab • BIOL 244 & 244L - Human Anatomy and Physiology II and Lab

GFL	GLOBAL CITIZENSHIP AND MULTICULTURAL UNDERSTANDING: COMMUNICATE EFFECTIVELY IN MORE THAN ONE LANGUAGE (0-6 hours)	<p>Complete the Carolina Core approved courses in Foreign Language (GFL) or by achieving a score of 2 or better on a USC foreign language placement test.</p> <p>If qualifying score not met, must complete 6 hours from:</p> <ul style="list-style-type: none"> • FREN 109 (3) • FREN 110 (3) • GERM 109 (3) • GERM 110 (3) • GERM 111 (6) • LATN 109 (3) • LATN 110 (3) • SPAN 109 (3) • SPAN 110 (3) • SPAN 111 (6) <p>or 4 hours from:</p> <ul style="list-style-type: none"> • ARAB 121 (4) • CHIN 121 (4) • GREK 121 (4) • ITAL 121 (4) • JAPA 121 (4) • PORT 121 (4) • RUSS 121 (4)
GHS	GLOBAL CITIZENSHIP AND MULTICULTURAL UNDERSTANDING: HISTORICAL THINKING (3 hours)	<p>Complete 3 hours (one course) from:</p> <ul style="list-style-type: none"> • FILM 300 (3) • GERM 280 (3) • HIST 101 (3) • HIST 102 (3) • HIST 104 (3) • HIST 105 (3) • HIST 106 (3) • HIST 108 (3) • HIST 109 (3) • HIST 111 (3) • HIST 112 (3) • HIST 214 (3)
GSS	GLOBAL CITIZENSHIP AND MULTICULTURAL UNDERSTANDING: SOCIAL SCIENCES (3 hours)	<p>Complete 3 hours (one courses) as follows:</p> <ul style="list-style-type: none"> • PSYC 101 (3)
AIU	AESTHETIC AND INTERPRETIVE UNDERSTANDING (3 hours)	<p>Complete 3 hours (one course) from:</p> <ul style="list-style-type: none"> • ARTE 101 (3) • ARTE 260 (3) • ARTH 105 (3) • ARTH 106 (3) • ARTS 103 (3) • ARTS 104 (3) • CLAS 220 (3) • CPTL 150 (3) • CPTL 270 (3) • DANC 101 (3) • ENGL 270 (3) • ENGL 282 (3) • ENGL 283 (3) • ENGL 284 (3) • ENGL 285 (3) • ENGL 286 (3) • ENGL 287 (3) • ENGL 288 (3) • FILM 110 (3) • FILM 180 (3) • FILM 240 (3) • FREN 290 (3) • GERM 290 (3) • MART 110 (3) • MART 210 (3) • MUSC 110 (3) • MUSC 113 (3) • MUSC 114 (3) • MUSC 115 (3) • MUSC 140 (3) • RELG 270 (3) • RUSS 280 (3) • SOST 101 (3) • SPAN 220 (3) • THEA 170 (3) • THEA 181(3) • THEA 200 (3)

STAND-ALONE OR OVERLAY ELIGIBLE COURSES (3-9 hours)

Up to two of the three requirements below may be met in overlay courses. For up to two instances, a Carolina Core course meeting another core requirement may also meet one of these requirements, provided the course is approved to meet both. One requirement below must be met with a 3-hour stand-alone course (not meeting another Carolina Core requirement). Note: A course approved and taken to meet two of the requirements below can meet the stand-alone requirement.

CMS	EFFECTIVE, ENGAGED, AND PERSUASIVE COMMUNICATION (0-3 hours)	<ul style="list-style-type: none"> • SPCH 140 (3) • SAEL 200 (3) – Can also meet VSR requirement. • PHIL 325 (3) – Can also meet VSR requirement.
INF	INFORMATION LITERACY (0-3 hours)	<ul style="list-style-type: none"> • SLIS 202 (3) • LIBR 101 (1) - Can't meet stand-alone requirement • ENGL 102 (3) – Approved INF/CMW overlay, but only if taken at USC in Fall 2012 or later. Cannot be taken at another institution to meet INF requirement. • STAT 112 (3) – Approved INF/ARP overlay
VSR	VALUES, ETHICS, AND SOCIAL RESPONSIBILITY (0-3 hours)	<ul style="list-style-type: none"> • BIOL 208 (3) • CPLT 150 (3) – Approved VSR/AIU overlay • CSCE 390 (3) • HIST 108 (3) – Approved VSR/GHS overlay • LING 240 (3) • PHIL 103 (3) • PHIL 211 (3) • PHIL 320 (3) • PHIL 321 (3) • PHIL 322 (3) • PHIL 325 (3) – Can also meet CMS requirement. • POLI 201 (3) – Only if taken at USC Columbia or a USC 2-year regional campus in Fall 2013 or Later • POLI 302 (3) • POLI 303 (3) • POLI 304 (3) • RELG 205 (3) • SAEL 200 (3) – Can also meet CMS requirement. • WGST 112 (3)

2. Elective (3 hours)

If the number of hours used to meet the Carolina Core Plus BS in Athletic Training General Education section exceeds 44, those hours above 44 can be used to meet the required elective hours. If only 44 hours are used to meet the Carolina Core Plus BS in Athletic Training General Education section, then the required elective hours must be in addition to the Carolina Core.

3. Athletic Training Core Requirements (69 hours) – Grade of C or better required

- ATEP 263 - Introduction to Athletic Training (3)
- ATEP 266 - Care and Prevention of Injuries (3)
- ATEP 267 - Clinical Foundations of Athletic Training (3)
- ATEP 275 - Functional Musculoskeletal Anatomy (2)
- ATEP 275L - Functional Musculoskeletal Anatomy Lab (1)
- ATEP 292 - Athletic Training Clinical Experience I (2)
- ATEP 293 - Athletic Training Clinical Experience II (2)

- ATEP 310 - Emergency Medical Response (2)
- ATEP 310L - Emergency Medical Responder Lab (1)
- ATEP 348 - Evaluation and Assessment of Lower Extremity Injuries (3)
- ATEP 348L - Evaluation and Assessment of Lower Extremity Injuries Lab (1)
- ATEP 349 - Evaluation and Assessment of Head, Neck, Spine & Abdomen Injuries (3)
- ATEP 349L - Evaluation and Assessment of Head, Neck, Spine & Abdomen Injuries (1)
- ATEP 350 - Evaluation and Assessment of Upper Extremity Injuries (3)
- ATEP 350L - Evaluation and Assessment of Upper Extremity Injuries Lab (1)
- ATEP 365 - Pharmacology and Drug Education in Athletic Trainers (2)
- ATEP 366 - Therapeutic Modalities (3)
- ATEP 366L - Therapeutic Modalities Lab (1)
- ATEP 392 - Athletic Training Clinical Experience III (2)
- ATEP 393 - Athletic Training Clinical Experience IV (2)
- ATEP 466 - Therapeutic Exercise (3)
- ATEP 466L - Therapeutic Exercise Lab (1)
- ATEP 492 - Athletic Training Clinical Experience V (2)
- ATEP 494 - Athletic Training Senior Seminar (3)
- ATEP 496 - Organization and Administration of Athletic Training (3)
- ATEP 497 - General Medical Concerns for Athletic Trainers (3)
- PEDU 520 - Observational Analysis of Sports Techniques and Tactics (3) (FALL ONLY)
- HPEB 321 - Personal and Community Health (3)
- HPEB 502 or HRTM 340 or EXSC 507 or NURS 220 - Nutrition (3)
- EXSC 530 - The Physiology of Muscular Activity (3)
- EXSC 530L - Physiology of Muscular Activity Lab (1)

4. Additional Athletic Training Program Requirements (6 hours) – Grade of C or better required

Select two courses (6 hrs) from the following:

- PEDU 420 - Motor Learning in Physical Education (3)
- PEDU 570 - Human Child/Adolescent Growth (3)
- CLAS 230 - Medical and Scientific Terminology (3)
- EXSC 303 - Perceptual Motor Development (4)
- EXSC 410 - Psychology of Physical Activity (3)
- EXSC 454 - Health/Fitness Programs (3)
- EXSC 507 - Exercise, Sport, and Nutrition (3)
- EXSC 531/531L - Clinical Exercise Physiology (3)
- EXSC 541 - Physiology Basis for Strength and Conditioning (3)
- EXSC 555 - Current Topics in Exercise Science (3)
- EXSC 563 - Physical Activity/Physical Dimensions of Aging (3)
- EXSC 585 - Women's Health and Physical Activity (3)

(2017-2018) Program Checklist for Athletic Training BS Degree

Freshman Fall (16 semester hours)			Freshman Spring (16 semester hours)		
Grade	Course	Notes	Grade	Course	Notes
_____	CMW (ENGL 101)	_____	_____	ARP (Analytical)	_____
_____	SCI (BIOL 101 & 101L)	_____	_____	SCI (CHEM 102 or 111 & 111L)	_____
_____	Elective	_____	_____	ATEP 266*	_____
_____	ATEP 263	_____	___ / ___	ATEP 275* & 275L*	_____
___ / ___	ATEP 310 & 310L	_____	_____	ATEP 267*	_____
Sophomore Fall (17 semester hours)			Sophomore Spring (16 semester hours)		
_____	CMW (ENGL 102)	_____	_____	ARP (Analytical)	_____
___ / ___	SCI (PHYS 101 & 101L/201 & 201L)	_____	___ / ___	SCI (BIOL 244 & 244L/EXSC 224 & 224L)	_____
___ / ___	SCI (BIOL 243 & 243L/EXSC 223 & 223L)	_____	_____	Req. CC Stand-Alone	_____
_____	ATEP 348*	_____	_____	ATEP 349*	_____
_____	ATEP 348L*	_____	_____	ATEP 349L*	_____
_____	ATEP 292*	_____	_____	ATEP 293*	_____
Junior Fall (16 semester hours)			Junior Spring (15 semester hours)		
_____	EXSC 535 or PEDU 520	_____	_____	PEDU 420/570/CLAS 230	_____
_____	HPEB 321	_____	_____	HPEB 502	_____
_____	ATEP 350*	_____	_____	ATEP 466*	_____
_____	ATEP 350L*	_____	_____	ATEP 466L*	_____
_____	ATEP 366*	_____	_____	ATEP 497*	_____
_____	ATEP 366L*	_____	_____	ATEP 393*	_____
_____	ATEP 392*	_____	_____		_____
Senior Fall (14 semester hours)			Senior Spring (12 semester hours)		
_____	AIU (Aesthetics)	_____	_____	GHS (Historical)	_____
___ / ___	EXSC 530 & 530L	_____	_____	GSS (PSYC 101)	_____
_____	ATEP 365*	_____	_____	PEDU 420/570/CLAS 230	_____
_____	ATEP 496*	_____	_____	ATEP 494*	_____
_____	ATEP 492*	_____	_____		_____

Foreign Language Requirement met _____

Stand-Alone or Overlay Section from Carolina Core, All 3 Req. Must be met (One must be stand-alone)

CMS (Speech) _____ Grade _____ (Stand-Alone or Overlay)

INF (Info Lit.) _____ Grade _____ (Stand-Alone or Overlay)

VSR (Values/Ethics) _____ Grade _____ (Stand-Alone or Overlay)

Note: -Courses marked with asterisk "*" are typically offered only once a year in the fall or Spring semesters as listed. Other course offerings may vary by semester.

-Courses in bold MUST be taken in the sequence listed.

VII. CLINICAL EDUCATION

Clinical Education Experiences (Assignments)

All students enrolled in the USC AT Program receive a clinical assignment every semester in which they are enrolled in the program. Students on academic probation are not eligible to participate in clinical education rotations (ATEP 292, 293, 392, 393, 492). In order to graduate from the USC AT Program, all students must complete a minimum of six semesters of specific clinical experiences. All athletic training students must complete 75% of their clinical experiences under the direct supervision of a Preceptor who is an ATC. Clinical assignments are available through USC men's & women's athletics, local high schools, sports medicine clinics, youth sports, campus recreation, physical therapy clinics, and small colleges. Students must provide their own transportation to all clinical education sites.

Required Clinical Experiences:

- Equipment Intensive
- Lower Extremity Clinical Experience
- Upper Extremity Clinical Experience
- General Medical
- Intercollegiate Athletics
- High School Athletics

Clinical Education Advising

Students should avoid taking elective classes that meet between 1:00 and 6:00 PM. Most athletic teams practice during this time, and classes scheduled during this time will interfere with the student's clinical education. Class conflicts should be brought to the Clinical Education Coordinator's attention during the scheduling period of every semester.

Athletic training students will be assigned to clinical assignment based upon a variety of factors which include but are not limited to the following: previous experience and clinical assignments, clinical experiences needed prior to anticipated program completion, indicated professional practice preferences, clinical proficiency and competency, professional responsibility and dependability, extracurricular activities, part-time employment, academic performance, class schedules, and other factors as felt to be pertinent by the athletic training program faculty.

Athletic Training Clinical Courses

Clinical courses are designed to assess the clinical proficiency of each athletic training student in their ability to evaluate, manage, and prevent athletic injuries. The athletic training students will be able to demonstrate their mastery of the cognitive, affective, and psychomotor competencies as listed in the teaching objectives of the 5th Edition of the NATA Athletic Training Education Competencies for assessment, clinical diagnosis, and management. All educational competencies can be found on the Blackboard sites for these courses.

Clinical Integrated Proficiencies & Competencies

What are the Clinical Competencies/Clinical Integrated Proficiencies?

Clinical Competencies are the common set of athletic training skills/proficiencies used for curriculum development and education of CAATE-accredited athletic training programs. They also serve as a guide for development of educational experiences leading to BOC certification. The competencies/clinical integrated proficiencies identify knowledge and skills to be mastered within an entry-level athletic training program. USC AT Program clinical competencies are integrated into didactic and clinical courses within the curriculum. The ATS must demonstrate mastery of competencies to Preceptors and course instructors.

When do I complete Clinical Competencies/Clinical Integrated Proficiencies?

Completion of all clinical competencies/proficiencies is a graduation requirement for the athletic training program. Students must complete ATEP 267 and ATEP 310 clinical competencies to be admitted into the program and subsequently complete each set of competencies prior to progressing through the program. No student will be allowed to progress through the USC AT Program or receive a clinical assignment until the previous competency requirements are completed. Failure to complete the assigned competencies/proficiencies will result in failing the clinical course and program probation. Cognitive and psychomotor competencies will be instructed and assessed in the academic portion of the program via lecture, laboratory settings, and written and/or oral practical examinations. Clinical proficiencies will be assessed during both academic and clinical portions of the athletic training program. All students will be assigned a preceptor who will evaluate clinical competencies and proficiencies through the semester. In addition, students will be required to attend practice labs throughout the semester to complete competencies and proficiencies.

How do I complete Clinical Competencies/Clinical Integrated Proficiencies?

Students will be required to complete all clinical integrated proficiencies outlined on the clinical integrated proficiency checklist under the direct supervision of their Preceptor. As part of the clinical education experience, the Preceptor will evaluate individual students on their ability to perform assessments associated with this course. (Competencies and proficiencies document is attached to the syllabus).

The following rubric will be used by Preceptors to assess student performance:

Proficient	2	The Athletic Training Student has demonstrated the required knowledge and skills that meet standards according to entry level benchmarks and indicators of a certified athletic trainer.
Developing	1	The Athletic Training Student has begun to develop the required knowledge and skills necessary to meet the standards according to entry level benchmarks and indicators of a certified athletic trainer.
Unacceptable	0	The Athletic Training Student has not demonstrated the required knowledge and skills necessary to meet the standards according to entry level benchmarks and indicators of a certified athletic trainer.

You MUST score a 2 (Demonstrates PROFICIENCY) on the evaluation of a practical assessment. If you score a 0 (UNACCEPTABLE) or 1 (DEVELOPING) on any clinical proficiency or competency, the student will need to be retested which will be rescheduled with the Preceptor at his/her convenience. It is the responsibility of the student to make up any failed proficiencies or competencies by the LAST day of each semester. Any proficiencies or competencies left incomplete or failed will result in the student receiving an F for this course. Failure to complete assigned proficiencies will result in a failing grade in their clinical course and no incompletes (I) will be given. You must have a model present for each clinical assessment that requires a physical demonstration.

Students are expected to take an active role in becoming proficient in all clinical skills. The student is responsible for learning the information and practicing the skills required to demonstrate competency in all clinical skills. Clinical competencies/proficiencies will not be accepted without a date and a signature. An excessive amount of clinical competencies/proficiencies signed off on one date will not be accepted (i.e. Preceptors are not required to sign off on more than two competencies/proficiencies per day).

*** Clinical competency checklists can only be signed by Preceptors affiliated with the USC AT Program. ***

Clinical Evaluation by Preceptor

The athletic training student's clinical performance and behaviors will be evaluated at mid-term and at course completion by the Preceptor they are assigned. This evaluation will be a part of the student's grade in their corresponding clinical class (see the instructor's syllabus for points associated with preceptor evaluations). The

evaluations can be found on your course Blackboard website.

Assessment Rubric Used for Clinical Evaluation:

Proficient	2	The ATS has performed at a level of quality that meets or exceeds standards according to entry level benchmarks and indicators of a certified athletic trainer.
Developing	1	The ATS has begun to perform at a level of quality that is necessary to meet the standards according to entry level benchmarks and indicators of a certified athletic trainer (Some Improvement Needed prior to final signature).
Unacceptable	0	The ATS has not performed at a level of quality that is necessary to meet the standards according to entry level benchmarks and indicators of a certified athletic trainer (Improvement needed prior to final signature).

Evaluation of Preceptor and Clinical Education Site

You will be required to evaluate your Preceptor and your clinical site at the conclusion of every semester. The evaluation form will be given to you in your clinical course (ATEP 292, 293, 392, 393, 492). A copy of a clinical report rubric can be obtained from the AT Clinical Coordinator.

Clinical Education Hours

The Student Clinical Hours Policy was created to assure that students, faculty, and preceptors all follow the same guidelines in accordance with accreditation standards. This policy outlines the minimal and maximal amount of clinical education experience hours students are expected to complete as part of their clinical course requirements.

Each student participating in ATEP 292, 293, 392, 393, 492, and 494 (Athletic Training Clinical I, II, III, IV, V, and Senior Seminar) must complete a minimum of 12 hours and a maximum of 30 hours of supervised field experience every week in the clinical environment they are assigned while school is in session. The athletic training student must provide documentation, including reasoning and Preceptor signature, for any week where 12 hours of clinical educational experience were not completed. This documentation must be turned in to the Clinical Education Coordinator.

It is the responsibility of the student to make time in their schedule to attend the clinical site or event as scheduled by the AT Program Clinical Education Coordinator. Athletic training students must keep track of their clinical hours. The Preceptor to whom students are assigned is responsible for verifying the completed hours by signing their name on your hours sheet. Completing the minimal clinical hours will be a part of the student's grade in their corresponding clinical class (see the instructor's syllabus for points associated with clinical education hours). The Department Exercise Science requires a C or higher in all AT Program core courses for the course to count toward graduation credit.

Failure to receive a C or higher will prohibits students to continue in the AT Program course sequence, and the student will have to retake the course.

Requirements for Clinical Education Hours

All students enrolled in the USC AT Program must document completion of clinical hours every semester. Students in USC's AT Program are required to document clinical hours despite the mandate from the BOC eliminating hours as a requirement for the certification, as many state and local licensing agencies still require clinical hours for athletic trainers. Specific course syllabi requirements may also require documentation of clinical hours.

How to Report Clinical Hours

- It is the student's responsibility to record and report all clinical hours.

- Clinical education hours log sheets, available in Blatt 102 (see Jeremy) or from the AT Clinical Education Coordinator must be signed prior to the fifth of every month by the Preceptor.
- Clinical education hour log sheets are due on the 5th of every month and should be turned into to the department's administrative assistant for athletic training.
- Students should make a copy of all clinical education hour log sheets. The original copy should be submitted to the department's administrative assistant for athletic training.
- Students will record one hour for each hour they are in the athletic training facility working or engaged in athletic training activity.
- Partial hours are recorded to the nearest 1/10 of an hour.
- When rounding to the nearest ¼ hour, you must work 8 minutes or more of the ¼ hour to round up. If you work less than 8 minutes of the ¼ hour, you should round back.
- When traveling on a road trip, only actual hours spent working in athletic training activities can be recorded (hours to and from the site or hours spent in a motel are not acceptable).

Hours That Do Not Count toward USC AT Program Requirements

- Hours not completed under the direct observation of a USC Preceptor or clinical supervisor.
- Hours spent traveling (team travel, lodging, etc.). However, while traveling, hours spent giving treatment and those spent at the competition and practice sites will count if under the direct supervision of a USC Preceptor.
- Hours spent at clinical education sites not affiliated with the USC AT Program.

SUPERVISION OF USC AT PROGRAM STUDENTS

Athletic training students in clinical rotations will be exposed to a variety of experiences with different levels of supervision by Preceptors. CAATE has defined supervision of students in a way that distinguishes between direct and indirect supervision as follows:

Direct Supervision

When instructing and evaluating clinical proficiencies, the Preceptor must be physically present that includes "constant visual and auditory interaction". This insures that the Preceptor can intervene on behalf of the athlete/patient. When a student is in a direct supervised situation, he/she can perform any skills in which he/she has been "formally instructed and formally assessed on athletic training clinical skills as part of a required course prior to performing those skills on patients" (CAATE, 2006 – Standard JI).

In the event that Preceptor is not physically present (e.g., bathroom, phone call, evaluating another athlete), a student may only apply first aid skills (e.g., RICE, splinting, activate EMS, CPR) in an injury situation.

CLINICAL EDUCATION INFORMATION AND POLICIES

Employment During Clinical Assignments

ATS should expect a considerable time commitment at their clinical site. This includes weekends, evenings, and USC designated academic breaks/holidays. Employment during the academic year is strongly discouraged. Students are expected to follow the schedule of their clinical assignment. It is the responsibility of the student to discuss their schedule with their Preceptor prior to the start of their clinical assignment. Any outside employment schedules must not conflict with clinical expectations and requirements.

Work Study

Students enrolled at the University of South Carolina have the opportunity to apply for compensation if they qualify for work-study employment. The USC AT Program does not employ work-study students.

South Carolina Certification

Athletic training students are under the direct supervision of athletic trainers in both off-campus and on-campus clinical settings. Students must always identify themselves as an “Athletic Training Student” and should always be under the supervision of an athletic trainer (as defined by the State of South Carolina). The Department of Health and Environmental Control (DHEC) regulates the practice of athletic training in South Carolina. DHEC prohibits work in the capacity of an athletic trainer or calling oneself an athletic trainer unless that person is certified by the state to do so. South Carolina regulations for athletic trainers require BOC certification.

Violations of USC ATS Code of Conduct

Any violation of the professional behavior code of conduct outlined in the USC Athletic Training Student Handbook could be grounds for failure of a clinical course and/or dismissal from the clinical site and/or USC athletic training program. Preceptors reserve the right to dismiss any athletic training student from his/her clinical assignment for any violation of clinical site rules and regulations. For additional information on this policy, please contact the Athletic Training Program Director.

Professional Appearance (Appendix D)

As a member of the allied health professional staff at USC, students are required to maintain a professional and appropriate appearance. This is a necessary measure to present a professional image to our USC faculty, staff, and students as well as maintaining a positive public image for the AT Program and profession. It is the student’s responsibility to be in appropriate dress at all times when working. Clothing will be available through USC AT Program.

** At no time will a student’s absence or tardy report for athletic training duties be excused for a student being dismissed for inappropriate dress.*

Proper Attire for Collegiate Events (e.g., games, matches, and meets)

- USC (or Plain) Athletic Training collared shirt. Shirts must be tucked in at all times with no rolled up sleeves.
- Flat-bottomed shoes (no open-toed shoes)
- Socks
- Shorts or pants in one of the following colors: black or khaki (shorts must be fingertip length).
- Students must adhere to the dress code mandated by Preceptor and/or coaching staff.

** Indoor/court sports may require business casual dress*

Proper Attire for Collegiate Practices

- USC (or Plain) collared shirt or t-shirt (No “Cocks” and no rolled up sleeves)
- Flat-bottomed shoes (no open-toed shoes)
- Socks
- Shorts, pants, or wind suit in one of the following colors: garnet, black, gray, or khaki (shorts must be fingertip length).

Proper Attire for Allied Health Sites (e.g., physician offices, physical therapy clinics)

- Business Casual attire only (no shorts)
- No open-toed shoes

Additional Guidelines for Appearance at ANY USC AT Program Clinical Site

- No more than 1 earring in each ear (no dangling earrings).
- Tattoos must be covered at all times.

- Facial jewelry must be removed at all times.
- Any natural hair color is acceptable.
- All students should be well groomed.
- Long hair must be tied back at all times.
- Finger nails must be well groomed and kept at an appropriate length.
- No acrylic nails.
- No hats inside the athletic training facility. When outside, hats must be worn visor forward.
- No jeans.
- No running shorts. All shorts at the terminal end must be the same level through the opening for the leg.
- If belt loops are present, belt is required.
- Pants will be worn in an appropriate and neat manner (waist of pants will be on the person's waist, no cut off bottoms, or excess amounts of holes, etc).
- Hairstyles should be neat and maintained.
- For males, facial hair must be kept neatly trimmed. Make it a point to be cleanly shaven (no stubble), especially at athletic events, physicals, or on doctor's visits.

** Collared shirts, t-shirts, and other apparel are usually ordered at the beginning of each semester.**

Clinical Education Attendance Policy

The clinical education experience portion of the athletic training program is where students are introduced to, implement, practice, and master skills vital to their success as athletic training professionals. These experiences are provided in the form of clinical assignments (both on and off campus) with an assigned Preceptor and are a required portion of the student's educational experience.

A student enrolled in the AT Program is required to attend and actively participate in scheduled/assigned clinical experiences. Therefore, all athletic training students will be required to attend and be actively involved in AT Program clinical experiences as assigned. Additionally, being "tardy" for any clinical assignment will be considered an absence under the terms of this policy. Students are expected to be ready to initiate the clinical assignment at the designated time. Those students not ready, including appropriate dress and equipment, to initiate the clinical assignment as described will be considered tardy.

Furthermore, the preceptor may choose to refuse admittance to anyone who arrives late to the clinical assignment. Please note that athletic teams may alter scheduled practices and games without warning or notice; it is our requirement that these events receive the same consideration and attendance as all other events. At no time is anyone other than the supervising Preceptor allowed to excuse a student from a clinical experience.

Understandably, there will be times when absences cannot be pre-approved (illness, family emergency, etc). These will be dealt with at the discretion of the Program Director. It is the student's responsibility to communicate with all appropriate instructors and staff when these instances do arise. Again, the student should make every effort in advance of the absence to follow this notification procedure.

Athletic training students are encouraged to provide advance notice to all their supervising Preceptor/ATCs. Habitual tardiness or absence from clinical assignments will become a part of the student's permanent record.

Any student who is tardy or absent from assigned clinical experiences will be reprimanded by the following guidelines:

- Athletic Training Student will be reprimanded by supervising Preceptor (Warning).
- ATS will have written documentation sent to the Clinical Coordinator and Program Director.
- ATS may be removed from his/her clinical site.
- ATS will have to meet with chair, program director, clinical coordinator, and departmental representative

to discuss continuance in the program.

- In all cases a record of this negligence will be placed in the student's permanent folder which will factor in to consideration for continuance in the program.

Clinical Education Availability and Punctuality

- Arrive at practice at least 30 minutes or more as indicated before the beginning of practice and remain until all post-practice activity is complete or until dismissed.
- When anticipating arriving late, call immediately.
- Students should be where assigned on time or early. If anything, be five minutes early.
- Be ready to participate when entering the facility.
- Look for something to do before sitting and talking.
- When unable to make an assigned duty, call one of the staff athletic trainers or your group leader in advance where arrangements can be made to cover your absence.
- If unable to attend a practice, game, etc. or assigned sport, advance notice must be given to the staff.
- Only students accepted into the Athletic Training Program may attend away games, learn on our sidelines, and attend practices.
- Failure to report to duties and unexcused absences will lead to probation, suspension, or termination from the Athletic Training Program.
- Be in the athletic training facility to assist with morning and night treatments during your scheduled hours.

Clinical Education Rules and Guidelines

1. General Rules

- Profanity, horse play, or similar actions are unacceptable to the allied health care professional and will not be tolerated.
- All rules of the NCAA and SEC governing varsity practices, events, or competitions are to be followed by the athletic training students.
- Schedule all personal appointments away from athletic training facility and clinical hours.
- Personal business should not be conducted in the athletic training facility.
- No student is allowed to use a modality without specific instructions from a preceptor and the student having demonstrated competency with the modality.
- Appropriate emergency procedures are discussed and demonstrated with each new student.

2. Visiting Teams

All visiting teams are to be treated with proper courtesy and respect. Remember these athletes and staffs are our guests. We should try to meet their needs as much as possible. Once an athlete is injured, we are all on the same team. Hopefully, if our guests are treated properly here, they will reciprocate the same attitude and availability when we visit them.

3. Travel

Athletic training students are to abide by the respective rules of their assigned varsity sport when traveling on a road trip with their assigned clinical rotation. They should be ready to go if requested by a staff athletic trainer to accompany him/her on a trip. Athletic training students are to adhere to all travel regulations that apply to that team. It is mandatory that in any travel situation the athletic training student will arrive at least 15 minutes earlier than the departure time.

4. Athletic Participation

Athletic training students must get the approval from the Program Director before making plans to participate in a

varsity sport. Because of the intensity of the clinical experiences and time commitment associated with the AT Program, participation in a varsity sport is difficult and discouraged. Athletic training students are allowed to participate in most varsity sports with the understanding that they must attain hour requirements around their athletic requirements.

5. ATS Clinical Requirements (Must Complete):

- Emergency Cardiac Care certification must be completed biennially. Course must provide adult and pediatric CPR, AED, 2nd Rescuer CPR, Airway Obstruction, and Barrier Devices (e.g., pocket mask, bag valve mask). Acceptable ECC providers are those adhering to the most current International Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiac Care. The two most common courses that meet these requirements are: 1) CPR/AED for the Professional Rescuer through the American Red Cross, and 2) BLS Healthcare Provider through the American Heart Association.
- Annual documented completion of Blood Borne Pathogen (BBP) training.
- Athletic training students must provide documentation of completing these guidelines.

6. Athletic Training Student Code of Conduct

Appropriate Behavior

Athletic training students are expected to uphold the Code of Ethics of the NATA. Students are encouraged to review the NATA Code of Ethics (Appendix A), BOC Standards of Professional Practice (Appendix B), and The Carolinian Creed (Appendix C).

Preceptors reserve the right to dismiss students from their clinical site for inappropriate behavior. Athletic training students are expected to follow the guidelines for personal conduct established by the USC AT Program. Any behavior deemed embarrassing to the USC AT Program, University of South Carolina, or clinical site would qualify as inappropriate behavior. Use of alcohol is prohibited during all USC AT Program clinical experiences (THIS INCLUDES TRAVEL WITH ANY USC OR USC AT PROGRAM AFFILIATED TEAM).

7. Athletic Training Student Relationships (Appendix D)

The athletic training student comes in contact with other members of the Athletic Department and the public quite often. It is helpful to know the limits of this contact in order that some unfortunate circumstances can be avoided. Following are brief guidelines to use in dealing with others during your assigned activities.

Athletic Training Students to Faculty and Staff Athletic Trainers

The staff athletic trainer is the ultimate authority in the athletic training facility. The staff athletic trainers' orders/requests are to be carried out as promptly as possible and not to be passed to subordinates. It is perfectly acceptable to ask questions of a staff athletic trainer about anything pertinent. Ask, do not challenge, in front of patients/athletes.

If there are any grievances, they are to be directed to the Staff Athletic Trainer, Head Athletic Trainer, or Director of Athletic Training and Sports Medicine where the appropriate course of action will be decided upon. The Graduate Assistant Athletic Trainers are members of the STAFF.

Athletic Training Students to Team Physicians

The medical director or team physicians are the ultimate medical authority at the University. Always follow the physician's directions explicitly. Whenever you are accompanying a student athlete to an on-site visit with a physician, always accompany the student athlete into the examination, be attentive, and be able to inform the athletic training staff on the status of the student athlete or their injury. Remember, these physicians are extremely busy, they may run behind schedule or seem abrupt at times, but they are vital to the performance of our jobs and

should be treated with respect at all times.

Athletic Training Students to Athletic Director

The Athletic Director has the ultimate responsibility for all aspects of the athletic program and reports directly to the University president. If the Athletic Director asks you a question about an athlete or their injury, refer the Athletic Director to the staff athletic trainer.

Athletic Training Students to Coaches

The Head Athletic Trainer is ultimately responsible for reporting injuries or the status of student athletes to the respective coach. If a coach asks you a question about an athlete or their injury, answer it to the best of your knowledge, do not speculate. If a question still remains, refer the coach to the staff athletic trainer. Adhere to the coach's rules as though you were a member of the team; avoid giving the appearance of having special privileges.

Athletic Training Students to Athletes

Treat each and every athlete the same, with respect. Do not discuss an athlete's injury with another athlete or friend. Refer the athlete to a staff athletic trainer if he/she has a question that you cannot answer. Do not speculate. Avoid close personal relationships with athletes in season; it could put you in a compromising situation. If any problems arise with an athlete, refer the problem to a staff athletic trainer or the athlete's coach. Do not provide an alibi for athletes. Do not issue special favors.

Athletic Training Student to Athletic Training Student

Treat one another with respect and with a professional attitude. Share the work as assigned, and always do your part. Be fair with those students under you. Be constructive in your criticism and helpful in your comments. Refer confrontations and problems to a staff athletic trainer. Always attempt to challenge each other to grow in skill and knowledge attainment.

Athletic Training Student to the Public and Media

Present yourself with conduct and manner becoming to an allied health care professional. Be courteous. Refrain from arguments regarding athletes, athletics, coaches or teams. Do not be the "inside source" for your friends or the media. Remember that you signed a Confidentiality Statement. Avoid making statements concerning the status of an injured athlete; refer them to one of the staff athletic trainers.

8. Confidentiality (Appendix D)

Always stay within the limits of your position and knowledge. Do not discuss any athletic training facility activities (injuries, treatments, doctor's reports, etc.) with others, online web sites, or in a classroom setting. The confidentiality of the medical atmosphere is paramount.

You may not release information to anyone regarding an athlete. This includes the health status of an athlete, open the athlete's file for inspection, copy or reproduce any reports for anyone but the athlete, pass authorized information by telephone, or use X-ray or test results for demonstration or instruction without prior, written permission.

All ATS will sign a Confidentiality statement at the beginning of each academic year. These guidelines must be adhered to strictly. Disregarding these instructions will result in prompt dismissal from the USC AT Program.

9. Violations of Code of Conduct

Any violation of the professional behavior code of conduct outlined above could be grounds for dismissal from the clinical site and/or USC athletic training program. Preceptors reserve the right to dismiss any athletic training

student from his/her clinical assignment for any violation of clinical site rules and regulations. The typical sequence of disciplinary actions follows:

- 1st Offense: Mandatory discussion with ATS, Preceptor, and Clinical Coordinator. Written reprimand will be placed in student's file. Depending on the student's violation, it is possible the student can be dismissed from the program for their 1st offense.
- 2nd Offense: Mandatory meeting with AT Program Committee (Chair of Department, AT Program Director, Preceptor, Clinical Coordinator) and possible dismissal from clinical education experience and/or athletic training program.

All cases will be handled on an individual basis by the AT Program Committee.

Grievances

On any staff larger than one person, there are bound to be some interpersonal problems. These problems can and should be handled quietly and efficiently with little disruption of routine. They should be handled in the office and not during treatment or rehabilitation. All that is required is some maturity and patience. All interpersonal problems should first try to be resolved by those involved. If no progress can be made, then the parties must look to the staff for arbitration.

For student to student problems, he or she should first look to the staff athletic trainer with direct responsibility for the athletic training student. Each party will register their complaint separately so that the moderator may hear both sides and then meet with the staff athletic trainer to discuss resolutions.

The same procedure applies for student to staff problems. The only difference is that another staff member that is uninvolved in the incident will fill the role of arbitrator. It is our feeling that fairness will be best served in this manner. The USC Grievance Policy, as published in the University of South Carolina Policies and Procedures, will ultimately be followed for grievances that are not easily resolved.

Probation/Dismissal

Failure to meet one or more of the requirements for program progression will result in the student being placed on program probation. While on program probation, subsequent failure to meet any program requirements will result in dismissal from the program.

Failure to meet the 2.75 cumulative GPA requirements automatically places the student on academic probation. If the student fails to re-establish the GPA to a 2.75 after one semester, the student will be dismissed from the program. Students on academic probation are not eligible for a clinical assignment/rotation. Each case is handled on an individual basis by the AT Program Committee, which consists of the AT Program Director, the AT Program Clinical Education Coordinator, department chairperson, and departmental representative.

Appeals

Each case brought to the Athletic Training Program Committee will be handled on an individual basis and a recommendation will be made regarding probation or termination from the program. The student may appeal the committee's decision per university procedures.

ACKNOWLEDGEMENT OF RISK

Participation in the Athletic Training Program is a potentially hazardous/dangerous activity. Serious injuries, including permanent paralysis and even death can occur. Neither the University of South Carolina nor any of its employees assume any responsibility in the event of an accident that occurs at a clinical education site. The Athletic Training Program carries a medical professional liability policy for all students in the program. Students are covered only while acting within the scope of their educational experiences. The policy does not provide

individual coverage to any student. The University of South Carolina also covers athletic training students with workers compensation coverage through the State Accident Fund. However, the University does not provide primary comprehensive and collision coverage for personal vehicles. You may wish to consider securing adequate health, accident, and automobile insurance to cover yourself while involved in this program. If you have any questions regarding risk management please contact the athletic training program director or the USC Risk Management office at (803) 777-7103.

VIII. University of South Carolina Wellness Program: Alcohol, Drugs, and Health

1. Scope

Participation in the Wellness Program is required of all University of South Carolina student-athletes, including scholarship and non-scholarship student-athletes, and other students directly associated with the Athletics Department, including cheerleaders, athletic training students, and equipment managers (collectively referred to in this policy as “student-athletes”). Student-athletes whose eligibility has expired or who no longer participate in intercollegiate athletics but who continue to receive athletic aid are subject to the Wellness Program.

2. Policy Statement

The Athletics Department is concerned about the potential use and abuse of drugs and alcohol by student-athletes at the University of South Carolina. This concern includes the use of illegal drugs, the use of anabolic steroids, the use of drugs that are not medically indicated, the misuse of prescription drugs, the use of alcohol, and the use of diuretics and “masking agents” designed to prevent the detection of such drug and alcohol use.

The Athletics Department believes that drug and alcohol use and abuse, in addition to being a violation of team rules, poses a significant threat to the health, growth, development and overall physical and mental well-being of its student athletes; results in diminished academic and athletic performance; increases the risk of injury to student-athletes and, in team sports, to their teammates and opponents; may retard the healing of injuries; and may produce dependence and addiction problems that can have devastating societal, financial and career ramifications.

Therefore, the Athletics Department has adopted and implemented this Wellness Program, including a mandatory program of drug testing, education, and counseling, in an effort to protect the health, safety and wellbeing of student-athletes associated with the Athletics Department.

3. Purpose

The purpose of the Wellness Program is:

1. To educate student-athletes about the dangers and effects of drug and alcohol use and abuse.
2. To identify through periodic and random testing those student-athletes who may be involved in drug and alcohol use and abuse.
3. To recommend and provide confidential assessment and treatment for those student-athletes identified as having drug or alcohol related problems.
4. To provide corrective actions for those student-athletes found in violation of the Wellness Program.

4. Prohibited Substances

The Wellness Program tests for substances identified by the Athletics Department or the National Collegiate Athletics Association (“NCAA”) as purporting to be performance enhancing or potentially harmful to the health, safety or well-being of student-athletes, or that are illegal under applicable federal or state law. Student-athletes are reminded they are responsible for the presence of any banned or illegal substance in their body, and are to refrain from areas of risk. Student-athletes are therefore prohibited from using the following substances:

1. Illegal drugs, including but not limited to, marijuana, phencyclidine, stimulants (e.g., amphetamines, ecstasy and cocaine), and hallucinogens (e.g., LSD).
2. Anabolic steroids (e.g., Anavar and Dianabol) and similar growth enhancing or performance enhancing substances.
3. Prescription or over-the-counter drugs not medically indicated.
4. Drugs banned by the NCAA.
5. Diuretics and “masking agents” designed to prevent the detection of drug and alcohol use, not otherwise

medically indicated.

6. Alcohol

The Athletics Department reserves the right to modify the list of prohibited substances as it deems appropriate to meet the purposes of the Wellness Program. The NCAA's list of banned drugs may change during the academic year. An updated list may be found on the NCAA web site (www.ncaa.org).

5. Procedural Guidelines

1. General.

The Athletics Department considers education to be the most important part of its Wellness Program. The Athletics Department will endeavor to educate its student-athletes about the risks inherent in drug and alcohol use and abuse. The Director of Wellness will be responsible for coordinating and making available to student-athletes drug and alcohol related educational programs, services and information throughout the year, including, for example:

- (a) programs for student-athletes, such as educational and motivational speakers that will provide necessary information to enable student-athletes to make decisions that will enhance and encourage a healthy lifestyle;
- (b) dissemination of information and materials available from campus and community resources regarding drugs, alcohol and tobacco, as well as materials related to general health and well-being; and
- (c) providing opportunities for student-athletes to discuss the health, legal and ethical risks of drug and alcohol use and abuse.

2. Annual Orientation Program.

At the beginning of each academic year, prior to the commencement of drug testing, all student-athletes will be required to participate in an Athletics Department orientation program that will include presentations regarding the Wellness Program. Each student-athlete will receive a copy of the Wellness Program, and the drug testing procedures to be used by the Athletics Department will be explained in detail.

All student-athletes will be required to sign a consent form acknowledging their agreement to abide by the terms and conditions of the Wellness Program and granting the Athletics Department permission to perform drug tests at any time and to disclose test results to certain designated individuals. Student-athletes will be subject to drug testing in accordance with the Wellness Program at any time thereafter.

3. Drug Testing Procedure.

Drug testing will be conducted throughout the year, and student-athletes may be drug tested in-season, out-of-season, and during summer school, if they are enrolled at the University of South Carolina. Student-athletes selected for testing will be required to provide a urine specimen for purposes of determining the presence or absence of prohibited substances.

For more information about specific policies related to USC's Wellness program, contact the Director of Sports Medicine, John Kasik, ATC.

IX. GENERAL HEALTH AND SAFETY STANDARDS

Student Health Insurance/Student Health Center

Student health insurance is available through the USC Student Health Center:

(<https://www.pearceandpearce.com/PearceSite/Schools/SC/usc/>).

USC Healthcare fee coverage for students can be found at: <http://www.sa.sc.edu/shs/charges.shtml>.

Athletic Training Liability Insurance

Students will pay for liability insurance through course fees. This insurance will ONLY cover students for USC clinical experiences assigned by the USC AT Program Clinical Coordinator. A detailed description of the USC Liability insurance for students can be found in the Program Director's office.

Physical Examinations

Athletic training students are required to have a current physical examination upon entry to the Athletic Training Program. It is the student's responsibility to notify the program director if during enrollment, circumstances occur that affects the findings of a current physical examination (e.g., injury, illness, surgery) (Appendix D).

Illness

All students are reminded that while it may seem admirable to carry on when one is sick this creates an environment for infection to spread. If an athletic training student is ill, the student will report to the Thomson Student Health Center (803-777-3175) or a physician of his or her choice. The physician will determine the appropriate treatment and the amount of time the student will be absent from clinical activity.

If the student has a communicable disease, the student will notify the Program Director and Preceptor with whom he or she is working as soon as possible via phone or e-mail. The ATS will be restricted from participation in a clinical education experience until written notice is provided by a physician that she/he is no longer infectious. Any student displaying signs and symptoms of a communicable disease and/or running a fever above 100 degrees will be asked to leave the clinical site and see a physician.

Students are responsible for notifying the Office of Student Affairs (803-777-4172) if they contract a communicable and/or contagious disease, which presents a significant degree of health risk to other members of the University community.

Blood Borne Pathogens Exposure Control Plan

As a healthcare professional, you are exposed to infectious diseases that are borne by blood and other bodily fluids. Following OSHA guidelines, regulations are designed to protect those who might come in contact with another's bodily fluids and should be followed throughout your clinical experience. Annual blood borne pathogens training will occur prior to the beginning of clinical experiences. All students are required to complete this training. Proof of completion (and passing quiz) must be submitted to the AT Program. It is essential that you become knowledgeable about your protection and adhere to the following:

In accordance with the Occupational Safety Health Administration (OSHA) Blood Borne Pathogens Standard, 29 CFR1910.1030, the following Exposure Control Plan has been developed:

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment (i.e., employees are considered to be exposed even if they wear personal protective equipment). This exposure determination affects all full-time athletic trainers

on staff, graduate assistants, and athletic training students at USC.

OSHA also requires that this plan include a schedule and method of implementation for the various requirements of the standard. The following complies with this requirement: Universal Precautions will be observed at this facility in order to prevent contact with blood, blood products, or other potentially infectious materials.

All blood, blood product, or other potentially infectious material will be considered infectious regardless of the perceived status of the source or source individual.

Where occupational exposure remains after institution of these controls, personal protective equipment shall be used.

Blood Borne Pathogens

2010-2011 NCAA Sports Medicine Handbook, Eighteenth edition, July 2010, page 66 -72.

Blood-borne pathogens are disease-causing microorganisms that can be potentially transmitted through blood contact. The blood-borne pathogens of concern include (but are not limited to) the hepatitis B virus (HBV) and the human immunodeficiency virus (HIV). Infections with these (HBV, HIV) viruses have increased throughout the last decade among all portions of the general population. These diseases have potential for catastrophic health consequences. Knowledge and awareness of appropriate preventive strategies are essential for all members of society, including student-athletes.

The particular blood-borne pathogens HBV and HIV are transmitted through sexual contact (heterosexual and homosexual), direct contact with infected blood or blood components, and perinatally from mother to baby. In addition, behaviors such as body piercing and tattoos may place student-athletes at some increased risk for contracting HBV, HIV, or Hepatitis C.

The emphasis for the student-athlete and the athletics health-care team should be placed predominately on education and concern about these traditional routes of transmission from behaviors off the athletics field. Experts have concurred that the risk of transmission on the athletics field is minimal.

Hepatitis B Virus (HBV)

HBV is a blood-borne pathogen that can cause infection of the liver. Many of those infected will have no symptoms or a mild flu-like illness. One-third will have severe hepatitis, which will cause the death of one percent of that group. Approximately 300,000 cases of acute HBV infection occur in the United States every year, mostly in adults.

Five to 10 percent of acutely infected adults become chronically infected with the virus (HBV carriers). Currently in the United States, there are approximately one million chronic carriers. Chronic complications of HBV infection include cirrhosis of the liver and liver cancer.

Individuals at the greatest risk for becoming infected include those practicing risky behaviors of having unprotected sexual intercourse or sharing intravenous (IV) needles in any form. There is also evidence that household contacts with chronic HBV carriers can lead to infection without having had sexual intercourse or sharing of IV needles. These rare instances probably occur when the virus is transmitted through unrecognized-wound or mucous-membrane exposure.

The incidence of HBV in student-athletes is presumably low, but those participating in risky behavior off the athletics field have an increased likelihood of infection (just as in the case of HIV). An effective vaccine to prevent HBV is available and recommended for all college students by the American College Health Association. Numerous other groups have recognized the potential benefits of universal vaccination of the

entire adolescent and young-adult population.

HIV (AIDS Virus)

The Acquired Immunodeficiency Syndrome (AIDS) is caused by the human immunodeficiency virus (HIV), which infects cells of the immune system and other tissues, such as the brain. Some of those infected with HIV will remain asymptomatic for many years. Others will more rapidly develop manifestations of HIV disease (i.e., AIDS). Some experts believe virtually all persons infected with HIV eventually will develop AIDS and that AIDS is uniformly fatal. In the United States, adolescents are at special risk for HIV infection. This age group is one of the fastest growing groups of new HIV infections. Approximately 14 percent of all new HIV infections occur in persons aged between 12 to 24 years. The risk of infection is increased by having unprotected sexual intercourse and the sharing of IV needles in any form. Like HBV, there is evidence that suggests that HIV has been transmitted in household-contact settings without sexual contact or IV needle sharing among those household contacts. Similar to HBV, these rare instances probably occurred through unrecognized wound or mucous membrane exposure.

Comparison of HBV/HIV

Hepatitis B is a much more “sturdy/ durable” virus than HIV and is much more concentrated in blood. HBV has a much more likely transmission with exposure to infected blood, particularly parenteral (needle-stick) exposure, but also exposure to open wounds and mucous membranes. There has been one well-documented case of transmission of HBV in the athletics setting among sumo wrestlers in Japan. There are no validated cases of HIV transmission in the athletics setting. The risk of transmission for either HBV or HIV on the field is considered minimal; however, most experts agree that the specific epidemiologic and biologic characteristics of the HBV virus make it a realistic concern for transmission in sports with sustained close physical contact, such as wrestling. HBV is considered to have a potentially higher risk of transmission than HIV.

Testing of Student-Athletes

Routine mandatory testing of student-athletes for either HBV or HIV for participation purposes is not recommended. Individuals who desire voluntary testing based on personal reasons and risk factors, however, should be assisted in obtaining such services by appropriate campus or public-health officials. Student-athletes who engage in high-risk behavior are encouraged to seek counseling and testing. Knowledge of one’s HBV and HIV infection is helpful for a variety of reasons, including the availability of potentially effective therapy for asymptomatic patients, and modification of behavior, which can prevent transmission of the virus to others. Appropriate counseling regarding exercise and sports participation also can be accomplished.

Participation by the Student-Athlete with Hepatitis B (HBV) Infection

Individual’s Health—In general, acute HBV should be viewed just as other viral infections. Decisions regarding ability to play are made according to clinical signs and symptoms, such as fatigue or fever. There is no evidence that intense, highly competitive training is a problem for the asymptomatic HBV carrier (acute or chronic) without evidence of organ impairment. Therefore, the simple presence of HBV infection does not mandate removal from play.

Disease Transmission—The student-athlete with either acute or chronic HBV infection presents very limited risk of disease transmission in most sports. However, the HBV carrier presents a more distinct transmission risk than the HIV carrier (see previous discussion of comparison of HBV to HIV) in sports with higher potential for blood exposure and sustained close body contact. Within the NCAA, wrestling is the sport that best fits this description. The specific epidemiologic and biologic characteristics of hepatitis B virus form the basis for the following recommendation: If a student-athlete develops acute HBV illness, it is prudent to consider removal of the individual from combative, sustained close-contact sports (e.g., wrestling) until loss of infectivity is known. (The best marker for infectivity is the HBV antigen, which may persist up to 20 weeks in the acute stage).

Student -athletes in such sports who develop chronic HBV infections (especially those who are e-antigen positive) should probably be removed from competition indefinitely, due to the small but realistic risk of transmitting HBV to other student-athletes.

Participation of the Student-Athlete with HIV

Individual's Health—In general, the decision to allow an HIV positive student-athlete to participate in intercollegiate athletics should be made on the basis of the individual's health status. If the student-athlete is asymptomatic and without evidence of deficiencies in immunologic function, the presence of HIV infection in and of itself does not mandate removal from play. The team physician must be knowledgeable in the issues surrounding the management of HIV-infected student-athletes. HIV must be recognized as a potentially chronic disease, frequently affording the affected individual many years of excellent health and productive life during its natural history. During this period of preserved health, the team physician may be involved in a series of complex issues surrounding the advisability of continued exercise and athletics competition.

The decision to advise continued athletics competition should involve the student-athlete, the student-athlete's personal physician, and the team physician. Variables to be considered in reaching the decision include the student-athlete's current state of health and the status of his/ her HIV infection, the nature and intensity of his/her training, and potential contribution of stress from athletics competition to deterioration of his/her health status.

There is no evidence that exercise and training of moderate intensity is harmful to the health of HIV-infected individuals. What little data that exists on the effects of intense training on the HIV-infected individual demonstrates no evidence of health risk. However, there is no data looking at the effects of long-term intense training and competition at an elite, highly competitive level on the health of the HIV-infected student-athlete.

Disease Transmission—Concerns of transmission in athletics revolve around exposure to contaminated blood through open wounds or mucous membranes. Precise risk of such transmission is impossible to calculate but epidemiologic and biologic evidence suggests that it is extremely low (see section on comparison of HBV/HIV). There have been no validated reports of transmission of HIV in the athletics setting. Therefore, there is no recommended restriction of student-athletes merely because they are infected with HIV, although one court has upheld the exclusion of an HIV-positive athlete from the contact sport of karate.

Administrative Issues

The identity of individuals infected with a blood-borne pathogen must remain confidential. Only those persons in whom the infected student-athlete chooses to confide have a right to know about this aspect of the student-athlete's medical history. This confidentiality must be respected in every case and at all times by all college officials, including coaches, unless the student-athlete chooses to make the fact public.

Athletics Health-Care Responsibilities

The following recommendations are designed to further minimize risk of blood-borne pathogens and other potentially infectious organisms transmission in the context of athletics events and to provide treatment guidelines for caregivers.

In the past, these guidelines were referred to as "Universal (blood and body fluid) Precautions." Over time, the recognition of "Body Substance Isolation," or that infectious diseases may also be transmitted from moist body substances, has led to a blending of terms now referred to as "Standard Precautions." Standard precautions apply to blood, body fluids, secretions and excretions, except sweat, regardless of whether or not they contain visible blood. These guidelines, originally developed for health-care, have additions or modifications relevant to athletics. They are divided into two sections — the care of the student-athlete, and cleaning and disinfection of environmental surfaces.

Care of the Athlete:

1. All personnel involved in sports who care for injured or bleeding student-athletes should be properly trained in first aid and standard precautions.

2. Assemble and maintain equipment and/or supplies for treating injured/ bleeding athletes. Items may include:

Personal Protective Equipment (PPE) [minimal protection includes gloves, goggles, mask, fluid-resistant gown if chance of splash or splatter]; antiseptics; antimicrobial wipes; bandages or dressings; medical equipment needed for treatment; appropriately labeled “sharps” container for disposal of needles, syringes and scalpels; and waste receptacles appropriate for soiled equipment, uniforms, towels and other waste.

3. Pre-event preparation includes proper care for wounds, abrasions or cuts that may serve as a source of bleeding or as a port of entry for blood-borne pathogens or other potentially infectious organisms. These wounds should be covered with an occlusive dressing that will withstand the demands of competition. Likewise, care providers with healing wounds or dermatitis should have these areas adequately covered to prevent transmission to or from a participant. Student-athletes may be advised to wear more protective equipment on high-risk areas, such as elbows and hands.

4. The necessary equipment and/or supplies important for compliance with standard precautions should be available to caregivers. These supplies include appropriate gloves, disinfectant bleach, antiseptics, designated receptacles for soiled equipment and uniforms, bandages and/or dressings, and a container for appropriate disposal of needles, syringes, or scalpels.

5. When a student-athlete is bleeding, the bleeding must be stopped and the open wound covered with a dressing sturdy enough to withstand the demands of activity before the student-athlete may continue participation in practice or competition. Current NCAA policy mandates the immediate, aggressive treatment of open wounds or skin lesions that are deemed potential risks for transmission of disease. Participants with active bleeding should be removed from the event as soon as is practical. Return to play is determined by appropriate medical staff personnel and/or sport officials. Any participant whose uniform is saturated with blood must change their uniform before return to participation.

6. During an event, early recognition of uncontrolled bleeding is the responsibility of officials, student-athletes, coaches and medical personnel. In particular, student-athletes should be aware of their responsibility to report a bleeding wound to the proper medical personnel.

7. Personnel managing an acute blood exposure must follow the guidelines for standard precaution. Gloves and other PPE, if necessary, should be worn for direct contact with blood or other body fluids. Gloves should be changed after treating each individual participant. After removing gloves, hands should be washed.

8. If blood or body fluids are transferred from an injured or bleeding student-athlete to the intact skin of another athlete, the event must be stopped, the skin cleaned with antimicrobial wipes to remove gross contaminate, and the athlete instructed to wash with soap and water as soon as possible. NOTE: Chemical germicides intended for use on environmental surfaces should never be used on student-athletes.

9. Any needles, syringes or scalpels should be carefully disposed of in an appropriately labeled “sharps” container. Medical equipment, bandages, dressings and other waste should be disposed of according to facility protocol. During events, uniforms or other contaminated linens should be disposed of in a designated container to prevent contamination of other items or personnel. At the end of competition, the linen should

be laundered and dried according to facility protocol; hot water at temperatures of 71°C (160°F) for 25minute cycles may be used.

Care of Environmental Surfaces:

1. All individuals responsible for cleaning and disinfection of blood spills or other potentially infectious materials (OPIM) should be properly trained on procedures and the use of standard precautions.
2. Assemble and maintain supplies for cleaning and disinfection of hard surfaces contaminated by blood or OPIM. Items include: Personal Protective Equipment (PPE) [gloves, goggles, mask, fluid -resistant gown if chance of splash or splatter]; supply of absorbent paper towels or disposable cloths; red plastic bag with the biohazard symbol on it or other waste receptacle according to facility protocol; and properly diluted tuberculocidal disinfectant or freshly prepared bleach solution diluted (1:100 bleach/water ratio).
3. Put on disposable gloves.
4. Remove visible organic material by covering with paper towels or disposable cloths. Place soiled towels or cloths in red bag or other waste receptacle according to facility protocol. (Use additional towels or cloths to remove as much organic material as possible from the surface and place in the waste receptacle.)
5. Spray the surface with a properly diluted chemical germicide used according to manufacturer's label recommendations for disinfection, and wipe clean. Place soiled towels in waste receptacle.
6. Spray the surface with either a properly diluted tuberculocidal chemical germicide or a freshly prepared bleach solution diluted 1:100, and follow manufacturer's label directions for disinfection; wipe clean. Place towels in waste receptacle.
7. Remove gloves and wash hands.
8. Dispose of waste according to facility protocol.

Final Notes:

1. All personnel responsible for caring for bleeding individuals should be encouraged to obtain a Hepatitis B (HBV) vaccination.
2. Latex allergies should be considered. Non-latex gloves may be used for treating student-athletes and the cleaning and disinfection of environmental surfaces.
3. Occupational Safety and Health Administration (OSHA) standards for Bloodborne Pathogens (Standard #29 CFR1910.1030) and Hazard Communication (Standard #29 CFR 1910.1200) should be reviewed for further information.

Member institutions should ensure that policies exist for orientation and education of all health-care workers on the prevention and transmission of blood-borne pathogens. Additionally, in 1992, the Occupational Safety and Health Administration (OSHA) developed a standard directed to eliminating or minimizing occupational exposure to blood-borne pathogens. Many of the recommendations included in this guideline are part of the standard. Each member institution should determine the applicability of the OSHA standard to its personnel and facilities.

X. Appendices

Appendix A: NATA Code of Ethics

Preamble

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

1. MEMBERS SHALL PRACTICE WITH COMPASSION, RESPECTING THE RIGHTS, WELFARE, 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 welfare 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 in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.

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

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.

Appendix B: BOC Standards of Professional Practice

I. Practice Standards

Preamble

The Practice Standards (Standards) establish essential practice expectations for all Athletic Trainers. Compliance with the Standards is mandatory.

The Standards are intended to:

- Assist the public in understanding what to expect from an Athletic Trainer
- Assist the Athletic Trainer in evaluating the quality of patient care
- Assist the Athletic Trainer in understanding the duties and obligations imposed by virtue of holding the ATC® credential

The Standards are NOT intended to:

- Prescribe services
- Provide step-by-step procedures
- Ensure specific patient outcomes

The BOC does not express an opinion on the competence or warrant job performance of credential holders; however, every Athletic Trainer and applicant must agree to comply with the Standards at all times.

Standard 1: Direction

The Athletic Trainer renders service or treatment under the direction of, or in collaboration with a physician, in accordance with their training and the state's statutes, rules and regulations.

Standard 2: Prevention

The Athletic Trainer implements measures to prevent and/or mitigate injury, illness and long term disability.

Standard 3: Immediate Care

The Athletic Trainer provides care procedures used in acute and/or emergency situations, independent of setting.

Standard 4: Examination, Assessment, and Diagnosis

The Athletic Trainer utilizes patient history and appropriate physical examination procedures to determine the patient's impairments, diagnosis, level of function and disposition.

Standard 5: Therapeutic Intervention

The Athletic Trainer determines appropriate treatment, rehabilitation and/or reconditioning strategies. Intervention program objectives include long and short-term goals and an appraisal of those which the patient can realistically be expected to achieve from the program. Appropriate patient-centered outcomes assessments are utilized to document efficacy of interventions.

Standard 6: Program Discontinuation

The Athletic Trainer may recommend discontinuation of the intervention program at such time the patient has

received optimal benefit of the program. A final assessment of the patients' status is included in the discharge note.

Standard 7: Organization and Administration

The Athletic Trainer documents all procedures and services in accordance with local, state and federal laws, rules and guidelines.

II. Code of Professional Responsibility

Preamble

The Code of Professional Responsibility (Code) mandates that BOC credential holders and applicants act in a professionally responsible manner in all athletic training services and activities. The BOC requires all Athletic Trainers and applicants to comply with the Code. The BOC may discipline, revoke or take other action with regard to the application or certification of an individual that does not adhere to the Code. The Professional Practice and Discipline Guidelines and Procedures may be accessed via the BOC website, www.bocatc.org.

Code 1: Patient Responsibility

The Athletic Trainer or applicant:

1.1 Renders quality patient care regardless of the patient's race, religion, age, sex, nationality, disability, social/economic status or any other characteristic protected by law

1.2 Protects the patient from undue harm and acts always in the patient's best interests and is an advocate for the patient's welfare, including taking appropriate action to protect patients from healthcare providers or athletic training students who are, impaired or engaged in illegal or unethical practice

1.3 Demonstrates sound clinical judgment that is based upon current knowledge, evidence-based guidelines, and the thoughtful and safe application of resources, treatments and therapies

1.4 Communicates effectively and truthfully with patients and other persons involved in the patient's program, while maintaining privacy and confidentiality of patient information in accordance with applicable law

1.4.1 Demonstrates respect for cultural diversity and understanding of the impact of cultural and religious values

1.5 Develops and maintains a relationship of trust and confidence with the patient and/or the parent/guardian of a minor patient and does not exploit the relationship for personal or financial gain

1.6 Does not engage in intimate or sexual activity with a patient and/or the parent/guardian of a minor patient

1.7 Informs the patient and/or the parent/guardian of a minor patient of any risks involved in the treatment plan

1.7.1 Does not make unsupported claims about the safety or efficacy of treatment

Code 2: Competency

The Athletic Trainer or applicant:

2.1 Engages in lifelong, professional and continuing educational activities to promote continued competence

2.2 Complies with the most current BOC recertification policies and requirements

Code 3: Professional Responsibility

The Athletic Trainer or applicant:

3.1 Practices in accordance with the most current BOC Practice Standards

3.2 Practices in accordance with applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training

3.3 Practices in collaboration and cooperation with others involved in a patient's care when warranted; respecting the expertise and medico-legal responsibility of all parties

3.4 Provides athletic training services only when there is a reasonable expectation that an individual will benefit from such services

3.5 Does not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, identity, or services or the skills, training, credentials, identity, or services of athletic training

3.5.1 Provides only those services for which they are prepared and permitted to perform by applicable local, state and/or federal rules, requirements, regulations and/or laws related to the practice of athletic training

3.6 Does not guarantee the results of any athletic training service

3.7 Complies with all BOC exam eligibility requirements and ensures that any information provided to the BOC in connection with any certification application is accurate and truthful

3.8 Does not possess, use, copy, access, distribute or discuss certification exams, score reports, answer sheets, certificates, certificant or applicant files, documents or other materials without proper authorization

3.9 Takes no action that leads, or may lead, to the conviction, plea of guilty or plea of nolo contendere (no contest) to any felony or to a misdemeanor related to public health, patient care, athletics or education; this includes, but is not limited to: rape; sexual abuse or misconduct; actual or threatened use of violence; the prohibited sale or distribution of controlled substances, or the possession with intent to distribute controlled substances; or improper influence of the outcome or score of an athletic contest or event

3.10 Reports any suspected or known violation of applicable local, state and/or federal rules, requirements, regulations and/or laws by him/herself and/or by another Athletic Trainer that is related to the practice of athletic training

3.11 Reports any criminal convictions (with the exception of misdemeanor traffic offenses or traffic ordinance violations that do not involve the use of alcohol or drugs) and/or professional suspension, discipline, or sanction received by him/herself or by another Athletic Trainer that is related to athletic training

3.12 Cooperates with BOC investigations into alleged illegal or unethical activities. Cooperation includes, but is not limited to, providing candid, honest, and timely responses to requests for information

3.13 Complies with all confidentiality and disclosure requirements of the BOC and existing law

3.14 Does not endorse or advertise products or services with the use of, or by reference to, the BOC name without proper authorization

Code 4: Research

The Athletic Trainer or applicant who engages in research:

- 4.1 Conducts research according to accepted ethical research and reporting standards established by public law, institutional procedures and/or the health professions
- 4.2 Protects the human rights and well-being of research participants
- 4.3 Conducts research activities intended to improve knowledge, practice, education, outcomes, and/or public policy relative to the organization and administration of health systems and/or healthcare delivery

Code 5: Social Responsibility

The Athletic Trainer or applicant:

- 5.1 Strives to serve the profession and the community in a manner that benefits society at large
- 5.2 Advocates for appropriate health care to address societal health needs and goals

Code 6: Business Practices

The Athletic Trainer or applicant:

- 6.1 Does not participate in deceptive or fraudulent business practices
- 6.2 Maintains adequate and customary professional liability insurance
- 6.3 Acknowledges and mitigates conflicts of interest

Appendix C: Carolinian Creed

The community of scholars at the University of South Carolina is dedicated to personal and academic excellence.

Choosing to join the community obligates each member to a code of civilized behavior.

As a Carolinian...

I will practice personal and academic integrity;

I will respect the dignity of all persons;

I will respect the rights and property of others;

I will discourage bigotry, while striving to learn from differences in people, ideas and opinions;

I will demonstrate concern for others, their feelings, and their need for conditions which support their work and development.

Allegiance to these ideals requires each Carolinian to refrain from and discourage behaviors which threaten the freedom and respect every individual.

Appendix D: AT Program Policies

TECHNICAL STANDARDS FOR THE ATHLETIC TRAINING PROGRAM

The Athletic Training Program at the University of South Carolina is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. The technical standards establishes the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the accrediting agency of the athletic training education (Commission on Accreditation of Athletic Training Education – CAATE) and state regulations.

The following abilities and skills must be met by all students admitted to the USC Athletic Training Program. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodations, the student will not be admitted into or progress in the program.

1. The mental capacity to assimilate, analyze, synthesize, integrate concepts, and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm.
2. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately and efficiently use equipment and materials during the assessment and treatment of patients.
3. The ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively. Students must be able to understand and speak the English language at a level consistent with competent professional practice.
4. The ability to record the physical examination results and a treatment plan clearly and accurately.
5. The capacity to maintain composure and continue to function well during periods of high stress.
6. The perseverance, diligence and commitment to complete the Athletic Training Program as outlined and sequenced.
7. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations.
8. Affective skills and appropriate demeanor and rapport that relate to professional education.

In conjunction with the Office of Disability Services (803) 777-6742, the University of South Carolina will evaluate, on a case-by-case basis, a student's request for reasonable accommodation on the basis of a disability. The University of South Carolina is committed to providing equal access/opportunity for students with disabilities, while at the same time, reserving the right to deny accommodations that compromise clinician/patient safety and/or fundamentally alter the nature of the program. The program will consider requests for reasonable accommodations by any qualified student with a disability.

All technical and academic standards must be met throughout enrollment in the athletic training curriculum. It is the student's responsibility to notify the program director if during enrollment, circumstances occur and he/she cannot meet the technical standards.

CONFIDENTIALITY AGREEMENT

Athletic training students will agree and acknowledge the following:

1. I may come into contact with other persons' educational, medical, financial, educational and/or other personal information;
2. This information, whether oral or recorded, is considered to be private and confidential under Federal and state laws and under University of South Carolina policy;
3. I have a duty to follow adequate safeguards for the protection of other persons' medical, private, and/or educational information, which includes proper disposition of records and proper protection of my password and of my workstation;
4. I will not use or disclose any form of another person's medical, personal, and/or educational information, whether written, oral, recorded electronically, heard, seen, or memorized to anyone outside the Department, except as specifically authorized;
5. It is a violation of Federal and state laws and the University of South Carolina policy to repeat or to release another person's medical, personal, and/or educational information, without the express written permission of the person;
6. If I am in doubt about whether it is appropriate to share, use, or disclose another person's medical, personal, and/or educational information, I will consult with my supervisor;
7. Failure to abide by this Confidentiality Statement could result in my termination, dismissal, expulsion, or suspension from the Athletic Training Program, and/or Department of Exercise Science, as well as the University of South Carolina.
8. This statement will be maintained in any file pertaining to me and may be used as evidence by anyone, including law enforcement, in the event that I violate the policies, procedures, or practices of the Department or if I use or disclose another person's individual's medical, private, or educational information without valid authorization.

ACTIVE COMMUNICABLE AND INFECTIOUS DISEASE POLICY

The University of South Carolina Athletic Training Program has determined 3 distinct parts to the Active Communicable and Infectious Disease Policy:

1. Hepatitis B Immunization Policy – Informed Consent/Refusal

Students interested in the Athletic Training Program at the University of South Carolina are encouraged to obtain their own Hepatitis B immunizations prior to the start of their first year in the program. The cost shall be incurred by the student. Students will submit documentation of their Hepatitis B immunizations with their application to the Athletic Training Program. If a student so desires, he/she may decline by signing the appropriate form and submitting it to the Athletic Training Program with his/her application. Additional information on the Hepatitis B virus and Hepatitis B immunizations, as well as the Informed Consent/Refusal Form, is available in the **AT Program Hepatitis B Immunization Policy**.

2. Annual Bloodborne Pathogen Training

Athletic training students **must complete annual formal bloodborne pathogen training** prior to beginning at their fall clinical education site. Students must complete the University of South Carolina online training for bloodborne pathogens and submit their completion certificate to the program.

3. Exposure Control Plan

The University of South Carolina Athletic Training Program will also provide athletic training students with an **Exposure Control Plan** in the event of an exposure to bloodborne pathogens. This plan is available to students on Blackboard and will be readily available and immediately accessible at all clinical education sites. Athletic training students will also have access to and will consistently use bloodborne pathogen barriers and proper sanitation at all clinical education sites.

EXPOSURE CONTROL PLAN

This protocol applies to all USC Columbia campus employees, student employees, apprenticeship students, and all other students who have an exposure to human blood or body fluids. You may call a Thomson Student Health Center nurse at 803.777.3658 for any questions or additional information.

Personal action required for needle sticks and other exposures to blood or body fluids:

- If possible, wash or flush the exposed area with soap and/or water immediately.
- Seek medical treatment as soon as possible after the incident.
- Be sure to inform clinical personnel that the injury is an exposure to bloodborne pathogens and/or a needle stick. If possible, needles and other sharps should be placed in a puncture resistant container and given to the medical provider at the treatment facility.

During normal working hours: Monday-Friday, 8:00 am – 4:00 pm:

You must first call Richland Family Practice 803.434.2479 or 803.434.6116 and you may be required to report to Richland Family Practice located on the first floor at 3209 Colonial Drive, Palmetto Richland Memorial Hospital Campus for further evaluation.

After normal working hours and on week-ends and holidays:

Report to the Emergency Department at Palmetto Richland Memorial Hospital.

Workers' Compensation covers the following populations who experience a bloodborne pathogens exposure while working on the job:

- All university employees and apprenticeship students in the Colleges of Education, Exercise Science, Medicine, Nursing, Pharmacy, Physical Therapy, and Social Work who are exposed while on the job.
- Work study students and graduate assistants who are exposed while on the job.

Report the incident to your supervisor as soon as possible but do not delay treatment. A USC incident report will need to be completed once treatment is initiated. Those working in satellite clinics and hospitals out of town should seek treatment at the nearest hospital's emergency department.

Students Who Suffer a Non-Job Related Bloodborne Pathogens Exposure During an Enrolled Academic Session:

- On-Campus: Students should report to the Thomson Student Health Center for initial evaluation and referral. If TSHC is closed, students may seek care at the Palmetto Richland Hospital Emergency Department.
- Off Campus – Greater Columbia Area: Students should report directly to PH/RFPC between 8 a.m. and

4 p.m., Monday through Friday. Students should advise PH/RFPC of their student status and request that TSHC be notified of the situation. For exposures after normal working hours, report directly to the Palmetto Health Richland Hospital Emergency Department.

- Off Campus – Other Areas: Students who are on academic or training experiences should follow procedures specified by the training organization. If no procedures are specified, or the student is on holiday, report to the nearest hospital emergency department.

HEPATITIS B IMMUNIZATION

Hepatitis is an inflammation of the liver which may be caused by several viruses, one of which is Hepatitis B. The Hepatitis B virus has been detected in almost all body fluids and secretions including blood, saliva, semen, vaginal fluid, breast milk, tears, and urine of someone infected with Hepatitis B. Although contact with infected blood is the most common way in which the virus is transmitted, it can also pass through cuts, scrapes, or breaks in the skin or mucous membrane.

A carrier of Hepatitis B is someone who may or may not show signs of liver disease, but who continues to carry the Hepatitis B virus in the body and, therefore, can transmit to others.

A Hepatitis B virus infection may be mild or more severe. Death is uncommon in the early stages of infection. Chronic infection develops in 6-10 percent of patients who become carriers. This chronic infection may last for years, possibly for life, and it may lead to cirrhosis and liver cancer.

There is not a treatment or drug available that can kill the Hepatitis B virus. In most cases the body's own defense mechanism will eliminate the infection. In health care workers, the risk of acquiring Hepatitis B is determined mainly by their degree of exposure to blood.

Hepatitis B vaccine is recommended for persons at high risk of contracting Hepatitis B. It will not prevent Hepatitis caused by other agents such as Hepatitis A virus or Hepatitis non A, non B virus.

Hepatitis B Immunization should be withheld in the presence of:

1. Any serious active infection except when a physician believes withholding the vaccine entails a greater risk.
2. Hypersensitivity (allergy) to yeast or any components of the vaccine (alum, thimerosal mercury derivative, aluminum hydroxide, formaldehyde).
3. Pregnancy or breast feeding.
4. Severe heart/lung problems

Hepatitis B vaccine is generally well-tolerated. As with any vaccine there is the possibility that broad use of the vaccine could reveal adverse reactions not observed in clinical trials. There may be a local reaction at the injection site such as soreness, pain, tenderness, itchiness, redness, black/blue mark, swelling, and warmth or nodule formation. Other reactions may include low grade fever, fever over 102 degrees (uncommon), general arthralgia or rash neurological disorder.

The vaccine consists of three injections. The first dose is at an elected time, the second dose one month later, and the third dose six months after the first dose. Full immunization requires three doses of the vaccine over a six month period to confer immunity. However, the duration of the protective effects of the Hepatitis B Vaccine is presently unknown and the need for boosters is not yet defined.

Students enrolled in the Athletic Training Program at the University of South Carolina are encouraged to obtain their own immunizations prior to the start of their first year in the program. The cost shall be incurred by the student. If a student so desires, he/she may decline by signing the appropriate form and submitting it to the Athletic Training Program with his/her application.

ATHLETIC TRAINING STUDENT PROFESSIONAL APPEARANCE CODE

As a member of the allied health professional staff at USC, students are required to maintain a professional and appropriate appearance. This is a necessary measure to present a professional image to our USC faculty, staff, and students, as well as maintaining a positive public image for the AT Program and profession. It is the student's responsibility to be in appropriate dress at all times when working. Clothing available through the University of South Carolina AT Program but is not required to purchase. You can purchase non-logo clothing on your own.

All AT Program members will be provided with a nametag to be worn in all clinical education experiences. Athletic training students will not be allowed to participate in clinical education experiences without an AT Program issued nametag. Replacement nametags will be available to students for \$30.00 apiece.

* At no time will a student's absence or tardy report for athletic training duties be excused for a student being dismissed for inappropriate dress.

Proper Attire for AT Program Clinical or Laboratory Courses

Athletic training students must have appropriate clothing for all courses that are clinical or lab-based. This typically includes clothing designed for physical activity. This is the only setting where t-shirts and mesh shorts are allowed and required. NO JEANS, STUDED CLOTHING, or SHOES are permitted on any AT Program Evaluation/Educational Surface. Students are also not permitted to wear stretch pants/shorts only in these courses. Improper clothing can result in an unexcused absence in that course. Locker rooms are available at the Blatt for changing before and after courses.

Proper Attire for Collegiate Events

- USC (or Plain) Athletic Training collared shirt. Shirts must be tucked in at all times with no rolled up sleeves.
- Flat-bottomed shoes (no open-toed shoes)
- Socks
- Shorts or pants in one of the following colors: black or khaki (shorts must be fingertip length).
- Students must adhere to the dress code mandated by Preceptor and/or coaching staff.
 - * *Indoor/court sports may require business casual dress*

Proper Attire for Collegiate Practices

- USC (or Plain) collared shirt or t-shirt (No "Cocks" and no rolled up sleeves)
- Flat-bottomed shoes (no open-toed shoes)
- Socks
- Shorts, pants, or wind suit in one of the following colors: garnet, black, gray, or khaki (shorts must be fingertip length).

Proper Attire for Allied Health Sites

- Business Casual attire only (no shorts)
- No open-toed shoes

Additional Guidelines for Appearance at ANY USC AT Program Clinical Site

- No more than 1 earring in each ear (no dangling earrings).
- Tattoos must be covered at all times.
- Facial jewelry must be removed at all times.
- Any natural hair color is acceptable.
- All students should be well groomed.
- Long hair must be tied back at all times.
- Finger nails must be well groomed and kept at an appropriate length.
- No acrylic nails.
- No hats inside the athletic training facility. When outside, hats must be worn visor forward.
- No jeans.
- No running shorts. All shorts at the terminal end must be the same level through the opening for the leg.
- If belt loops are present, belt is required.
- Pants will be worn in an appropriate and neat manner (waist of pants will be on the person's waist, no cut off bottoms, or excess amounts of holes, etc).
- Hairstyles should be neat and maintained.
- For males, facial hair must be kept neatly trimmed. Make it a point to be cleanly shaven (no stubble), especially at athletic events, physicals, or on doctor's visits.

POLICY ON INAPPROPRIATE BEHAVIORS IN CLINICAL EDUCATION AND USC AFFILIATED SITES

The University of South Carolina Athletic Training Program is committed to fostering an environment that promotes academic success for students and instructors at all clinical education sites. Athletic training students should conduct themselves in a professional manner at all times. At no time should they engage in conduct that would undermine their patients' confidence or cause a conflict of interest in their patients' care. Inappropriate and unacceptable behaviors that demonstrate disrespect for others or a lack of professionalism will not be tolerated. Inappropriate relationships include but not limited to those with patients, supervisors, preceptors, coaches, and staff in the clinical education setting can be detrimental to patient care and the learning process. If a pre-existing relationship is present, it is the athletic training student's responsibility to inform the Program Director and Clinical Education Coordinator as soon as possible after receiving clinical site assignments and before reporting to that clinical site for an educational experience. The Clinical Education Coordinator will re-assign the athletic training student to a different clinical assignment to avoid any detriment to patient care and student learning. All USC Preceptors and clinical education sites have the right to dismiss students from their clinical site for inappropriate or unacceptable behaviors.

Violations for inappropriate and unacceptable behaviors could result in failure of clinical education courses (ATEP 292,293,392,393,492) as well as dismissal from the clinical education site and/or athletic training program. All reported cases will be handled on an individual basis by the AT Program Disciplinary Committee. If you have any questions regarding inappropriate relationships and behaviors in the clinical education setting, please contact the Program Director and/or Clinical Education Coordinator.

SOCIAL MEDIA POLICY

The following are guidelines for members of the University of South Carolina (USC) Athletic Training Program (AT Program) who participate in social media (Facebook, MySpace, Twitter, Google+, etc). These guidelines apply whether individuals are posting to their own sites or commenting on other sites:

1. Follow all applicable USC and USC AT Program policies. For example, you must maintain patient privacy. Among the policies most pertinent to this discussion are those concerning patient confidentiality, university affairs, mutual respect, photography and video, and release of patient information to media.
2. Write in the first person. Where your connection to USC and USC AT Program is apparent, make it clear that you are speaking for yourself and not on behalf of USC or USC AT Program. In those circumstances, you should include this disclaimer: "The views expressed on this [blog; website] are my own and do not reflect the views of USC or USC AT Program." Consider adding this language in an "About me" section of your blog or social media profile.
3. If you identify your affiliation to USC or USC AT Program, your social media activities should be consistent with USC and USC AT Program's high standards of professional conduct.
4. If you communicate in the public internet about USC or USC AT Program-related matters, you must disclose your connection with USC or USC AT Program and your role at USC or USC AT Program.
5. Be professional, use good judgment and be accurate and honest in your communications; errors, omissions or unprofessional language or behavior reflect poorly on USC or USC AT Program, and may result in liability for you, USC, or USC AT Program. Be respectful and professional to fellow students, faculty, staff, clinical affiliations, business partners, competitors, and patients.
6. Ensure that your social media activity does not interfere with your USC or USC AT Program commitments.
7. The USC AT Program strongly discourages "friending" of patients on social media websites. Members of the USC AT Program in patient care roles generally should not initiate or accept friend requests except in unusual circumstances such as the situation where an in-person friendship pre-dates the treatment relationship.
8. The USC AT Program discourages Clinical Preceptors from initiating "friend" requests with Athletic Training Students (ATS) they supervise.

WORKERS' COMPENSATION RELATED INJURIES DURING CLINICAL EDUCATION EXPERIENCES

If you are injured during your clinical education experience you may be eligible for Workers' Compensation benefits. When work-related accidents or injuries happen, the Athletic Training Program (AT Program) is required by state law to make sure an injured athletic training student is provided necessary protection and care. Benefits may include payment for medical treatment, replacement of lost wages during periods of disability, and compensation for permanent disability. Injured athletic training students should immediately report any clinical education related injuries to their preceptor and the AT Program immediately and seek medical treatment. ALL INJURIES MUST BE REPORTED, REGARDLESS OF SEVERITY.

When an Injury Occurs

- Immediately tell your preceptor and the AT Program (program director or clinical coordinator) if you are injured at your clinical education experience so that medical treatment may be authorized and a Workers' Compensation claim filed. Failure to immediately report the injury may deprive you of the right to

compensation.

- Complete an Employee Injury Report at Thomson Student Health Center or the USC Family Practice in Columbia.

The Benefits Office must report this injury to the S.C. Workers' Compensation Commission within 10 days.

Who Is Covered For What

All athletic training students participating in clinical education experience through the University of South Carolina AT Program are covered by Workers' Compensation. Any accidental injury or occupational disease sustained by the athletic training student in the course of performing their clinical education experiences may be covered. Any accidental injury or occupational disease sustained by the athletic training student outside of AT Program sanctioned clinical education experiences WILL NOT be covered.

Receiving Medical Treatment

- The athletic training student must receive medical treatment for work related injuries at the medical facility designated for your campus. USC Columbia - Thomson Student Health Center located behind the Russell House on Greene Street.
- If the injury occurs when the designated facility is closed, or if the injury is serious, athletic training students in Columbia should go to the Palmetto Health Richland Emergency Room. Athletic training students that are outside of the Columbia should go to emergency room nearest their location.

CLINICAL EDUCATION EXPERIENCE HOURS REQUIREMENTS

Clinical Education Hours Policy

The athletic training student Clinical Education Experience Hours Policy was created to assure that students, faculty, and preceptors all follow the same guidelines in accordance with accreditation standards. This policy outlines the minimal and maximal amount of clinical experience hours students are expected to complete as part of their clinical course requirements (ATEP 292, 293, 392,393, 492, and 494).

Each student participating in ATEP 292, 293, 392, 393, 492, and 494 (Athletic Training Clinical I, II, III, IV, V, and Senior Seminar) must complete a minimum of 12 hours and a maximum of 30 hours of supervised field experience every week in the clinical environment they are assigned while school is in session. The athletic training student must provide documentation, including reasoning and Preceptor signature, for any week where 12 hours of clinical educational experience were not completed. This documentation must be turned in to the Clinical Coordinator.

It is the responsibility of the student to make time in their schedule to attend the clinical site or event as scheduled by the AT Program Clinical Coordinator. Athletic training students must keep track of their clinical hours. The Preceptor (at the sport or site that you are assigned) is responsible for verifying the completed hours by signing their name on your hours sheet. Completing the minimal clinical hours will be a part of the student's grade in their corresponding clinical class (see the instructor's syllabus for points associated with clinical education hours). The Department of Exercise Science requires a C or higher in all AT Program core courses for the course to count toward graduation credit. Failure to receive a C or higher will prohibits students to continue in the AT Program course sequence, and the student will have to retake the course. Athletic Training Students must document clinical education experience hours during their rotation. Clinical hour log sheets are available on Blackboard and must be handed in at the end of every month. Athletic Training Students are also required to

submit all hours to the administrative assistant for the Athletic Training Program.

The AT Program establishes that a one week period runs from Sunday to Saturday. At the conclusion of the week period, each student must have his/her clinical education hours initialed by the supervising Preceptor. At the conclusion of the month, all clinical education hours will be verified that the minimum of clinical education hours were met. The AT Program Director may accept clinical education hours below the minimum requirement of 12 hours a week for extraneous factors that are not controllable by the athletic training student if the proper documentation was submitted.

Any students that are found to have violated a policy of the AT Program while completing a Clinical Education Experience can have his/her clinical education hours invalidated for that period of time. The invalidation of these hours could result in the student failing to meet the minimum number of required clinical education hours the clinical setting in which they are assigned.

Clinical Education Supervision Policy

Athletic Training Students must be supervised during ALL clinical education experiences. CAATE defines DIRECT supervision as the Preceptor being able to intervene on the behalf of the Athletic Training Student and/or the Patient.

CRIMINAL BACKGROUND CHECK AND REPORTING POLICY

The Athletic Training Program (AT Program) conducts criminal background checks for Athletic Training Students as required by the University of South Carolina and/or Clinical Affiliated Sites. A criminal conviction or pending criminal charge may be a factor in your position within the AT Program and/or clinical site placement. The information request to conduct a criminal background check will not be used for any other purpose.

Discrimination based on age, gender, race or any other protected class status is prohibited by University policy. A record of conviction and/or pending criminal charges is not an absolute bar to the AT Program or clinical site placement. Such information will be considered only if there is a substantial relationship between the circumstances of the conviction and/or pending charge and the position within the AT Program. Your completion of this form is part of your participation in the AT Program. Athletic Training Students must fill out the form accurately and completely, to the best of their knowledge, disclosing all convictions and/or pending criminal charges for any felony or misdemeanor. Individuals who fail to complete and return the form in a timely fashion will not be further considered or remain within the AT Program. All students must also complete University of South Carolina Acknowledgement and Authorization for Background Check (www.hr.sc.edu/forms/Authorization_Background_Check.pdf) and the Personal Information Supplemental Form for Background Checks (http://hr.sc.edu/forms/Personal_Information_Supplemental_Form.pdf).

An athletic training student's failure to accurately and completely disclose his or her criminal conviction history may be grounds for removal from the AT Program.