



MS in Athletic Training

Department of Kinesiology, Health and Sport Science

Handbook Updated 2023-2024

MS in Athletic Training
Department of Kinesiology, Health and Sport Science
225 Zink Hall
Phone: (724) 357-2770
Fax: (724) 357-2770

including educational, corporate, medical, and community sites.

Mission Statement and Program Objectives

The Athletic Training Program at Indiana University of Pennsylvania seeks to provide its students with a high quality, comprehensive, challenging, and diverse academic and clinical education in athletic training. Our graduates will have the knowledge, skills and critical thinking abilities to pass the Board of Certification examination, and the experience necessary to function as effective health care professionals in a variety of settings in which certified athletic trainers function.

Program Student Learning Outcomes (PLSOs)

Upon completion of the Master of Science in Athletic Training program, student will:

1. employ the Core Competencies as outlined in the Athletic Training Education Standards.
2. create and implement evidence-based strategies and programs to prevent the incidence and/or severity of injuries and illnesses and optimize their clients'/patients' overall health and quality of life.
3. develop evidence-based clinical examination techniques and apply clinical-reasoning skills to accurately diagnosis and effectively treat patients.
4. assess a patient's status using clinician- and patient-oriented outcome measures and select the appropriate therapeutic intervention to maximize the patient's participation and health-related quality of life.
5. recognize, intervene, and refer clients/patients exhibiting abnormal social, emotional, and mental behaviors.
6. explain the athletic trainer's role in the healthcare system and understand the importance of risk management, healthcare delivery mechanisms, insurance, reimbursement, documentation, patient privacy, and facility management.
7. value the importance of maintaining current competence in the constantly changing world of healthcare and embrace the need to practice within the limits of state and national regulation using moral and ethical judgment.

Program Goals

1. **Goal:** Deliver quality classroom instruction aimed at developing high level Athletic Training knowledgebase.
 - 1.1. Guide students towards fulfillment of all knowledge content within the Curricular Content Standards, as established by the Commission on Accreditation of Athletic Training Education (CAATE).
 - 1.2. Provide a challenging curriculum that will effectively bring about a high level of knowledge in subject matters pertinent to the profession of athletic training.
 - 1.3. Provide a comprehensive curriculum that will provide students with critical knowledge in various subject matters that may contribute to the overall education of well-rounded allied health care professionals.
 - 1.4. Ensure an educational environment that is conducive to achieving the highest learning potential in all students (resources, facilities, technology, instructors, methods).
2. **Goal:** Assist students in developing high levels of athletic training clinical skills.
 - 2.1. Guide students towards fulfillment of all skills content within the "Competencies in Athletic Training", as established by the Commission on Accreditation of Athletic Training Education (CAATE).

Programs and Degrees

MS in Athletic Training

Professional Athletic Training education programs use a competency-based approach in both the classroom and clinical settings. Using a medical-based education model, Athletic Training students are educated to provide comprehensive client/patient care in five domains of clinical practice: prevention; clinical evaluation and diagnosis; immediate and emergency care; treatment and rehabilitation; and organization and professional health and well-being. The educational requirements for CAATE-accredited Athletic Training education programs include acquisition of knowledge, skills, and clinical abilities along with a broad scope of foundational behaviors of professional practice. Students complete an extensive clinical learning requirement. Students will receive fo

Fall (9 credits)

KHSS 634 Current Literature in Health, Fitness, and Sport	3
KHSS 676 Athletic Training Clinical Practicum III	6

Spring (9 credits)

KHSS 640 Research Methods for Health, Sport, and Physical Activity	3
KHSS 685 Professional Issues in Athletic Training	3
KHSS 677 Athletic Training Clinical Practicum IV	3

Certification and/or Licensure

Graduates of the program are eligible to sit for the Board of Certification (BOC) for the Athletic Trainer Examination. Passing the BOC Examination is a requirement for most state credentialing agencies.

Course Descriptions

Please refer to the Graduate Catalog for Course Descriptions. [Athletic Training, MS](#)

Evaluation of Students

For information regarding School of Graduate Studies and Research policies on grading, view the Graduate Catalog: www.iup.edu/gradcatalog

Athletic Training students will be evaluated using a variety of assessment techniques, including but not limited to written examinations, practical examinations, preceptor assessments, research papers and other competency-based projects.

Comprehensive/Candidacy Examinations

Program retention, completion, and Board of Certification examination endorsement are contingent upon students passing course comprehensive final examinations including a mock/practice certification exam.

Degree Completion

Students must maintain a minimum of a 3.0 GPA during their graduate studies to maintain degree candidacy.

The program coordinator will work with each student to assure program progression and timeliness of applying for graduation.

For more information, view the Graduate Catalog: www.iup.edu/gradcatalog

University Policies and Procedures

University policy is the baseline policy; programs may have policy that is more stringent than the University baseline policy; however, not less stringent than the University baseline policy. For questions

- x an active ATrack account
- x current criminal background check documents on file
- x completed annual IUP Title IX/Mandated reporter training
- x completed annual HIPPA training
- x completed annual OSHA training
- x reviewed clinical site-specific policies with a preceptor including but not limited to the following
 - o emergency action plan
 - o BBP exposure plan
 - o Communicable and infectious disease policies
 - o Documentation policies and procedures
 - o Patient privacy and confidentiality protections
 - o Plan for clients/patients to be able to differentiate practitioners from students
 - o Dress code
- x been instructed and evaluated for proficiency in a clinical skill prior to applying the skill in patient care

Student Identification

Athletic training students are required to wear a name badge identifying them as a student when engaged in clinical education activities. Name badges can be obtained from the I-Card office in Clark

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 communicate at a level consistent with competent professional practice.

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SIGN ONLY ONE

III. METHODS OF COMPLIANCE

A. UNIVERSAL PRECAUTIONS

equipment. If soap and water are not available, a waterless cleanser may be used. When other skin areas or mucous membranes come in contact with blood or other potentially infectious materials, the skin will be washed with soap and water, and the mucous membranes shall be flushed with water, as soon as possible.

The clinical care provider should wash hands between patients, before and after contact with open wounds or lesions, after removing gloves, or in any other instance where contact has occurred/may have occurred with any potentially infectious materials.

The clinical care provider should observe the following rules for proper hand washing:

- Vigorously lather hands using soap and rub together for at least 15 seconds under a moderate stream of water at a comfortable temperature.
-

Assess equipment and/or instruments for contamination, and decontaminate if possible, before servicing or shipping. Equipment and/or instruments which have not been fully decontaminated must have a label attached with information about which parts remain contaminated

Sterile instruments will be wiped off with isopropyl alcohol following use and will then be bagged and

The clinical facilities will be maintained in a clean and sanitary condition. Countertops, treatment tables, rehabilitation equipment and other work surfaces will be cleaned using

an antiviral/fungal/bacterial cleaning solution. Cleaning will take place in the following situations:

- after completing procedures on an individual patient
- immediately or as soon as feasible after overt contamination with of blood or OPIM
- at the end of each day if the surface may have become contaminated since the last cleaning.

9. Laundry

A clinical care provider who may handle contaminated laundry are to wear latex gloves and other appropriate personal protective equipment as needed. Universal precautions will be used when dealing with laundry that has come into contact with blood or OPIM

Contaminated laundry will be handled as little as possible with a minimum of agitation. It will not to be sorted or rinsed, but will be placed in a container or bag immediately.

Contaminated laundry which may soak-through or cause leakage will be put in a biohazard bag to prevent soak through or leakage of fluids to the exterior.

10. Communication of Hazards

Warning labels will be easily visible on all containers of regulated waste. Labels shall be fluorescent orange or orange-red with lettering or symbols in a contrasting color. The label is either to be an integral part of the container or affixed as close as possible to the container by a method which prevents loss or unintentional removal of the label. The label shall have the biohazard symbol and the text BIOHAZARD.

Red bags or red containers may be substituted for the warning label.

Identification of additional hazards will be occur through annual blood-borne pathogen training as presented in the Introduction, Section I and Section V of this document.

IV. PROCEDURES FOR EVALUATION AND FOLLOW-UP FOR EXPOSURE

Persons who have had an exposure incident shall report the incident immediately to the IUP-ATEP Clinical Coordinator and to their clinical supervisor (IUP Staff Athletic Trainer or Affiliated Site Preceptor). Should the staff Athletic Trainer or Preceptor be exposed they will be responsible in following the procedures as stated below. All clinical care providers who incur an exposure will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard. This follow-up will include the following:

1. Written documentation of the route of exposure and the circumstances related to the incident are to be reported as soon as possible following the exposure. This is to be returned to the Head of the Athletic Training program within 48 hours.

- x General explanation of the epidemiology, modes of transmission and symptoms of blood borne diseases
- x Explanation of this exposure control plan and how it will be implemented
- x Procedures which may expose employees or students to blood or other potentially infectious materials
- x

INDIANA UNIVERSITY OF PENNSYLVANIA
ATHLETIC TRAINING PROGRAM

BLOOD BORNE PATHOGENS EXPOSURE CONTROL PLAN
EXPOSURE REPORTING FORM

Exposure Location: _____

Exposed Provider's Name & DOB: _____

Exposed Provider's Contact Information: _____

Date of Exposure: _____ Route of Exposure: _____

Exposed Provider's Testing and Follow-up Details: _____

Source Individual's Name & DOB: _____

Source Individual's Contact Information: _____

Source Individual's Testing and Follow-up Details: _____

Name

Signature

Date

Head of AT Services, Health Center

Staff or School Nurse

Signature Page

My signature below indicates that I am responsible for reading and understanding the information provided and referenced in this department/program student handbook.

_____[please initial] I understand my program coordinator may share this document with the School of Graduate Studies and Research.

Print Name

Signature _____ 3.88J0 Tc 0 Tw 19.951 0 Td()TjjEMC /P-3.88JD 7 BDC -4.61