



ATEP

HANDBOOK

2008-2009

Documents

The mission of the Athletic Training Education Program at Azusa Pacific University is to fully equip students with a quality education incorporating a Christian perspective to become life-long learners. The educational program incorporates current research and scholarly instruction, in both the clinical and didactic portions of the program, to prepare students to enter the profession as entry-level athletic trainers upon successfully passing the BOC certification examination.

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APU ATEP: <http://www.apu.edu/bas/exercisesport/atep/>

This portion of the ATEP Handbook is the property of Azusa Pacific University, Azusa, CA 91702. If you have questions please email Chris Schmidt at cschmidt@apu.edu

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**ACI & SETTING END OF ROTATION EVALUATION
(Online Survey)**

This is a confidential evaluation of the clinical instructor. Please be as honest as possible.

Enter via drop down menu:

- Name of ATS
- Dates of rotation
- Name of ACI
- Clinical Rotation Setting (specific site)

Evaluate the ACI using the following scale.

Clinical Instructor Evaluation:

5	Superior	Clearly outstanding
4	Good	Above average performance
3	Competent	As expected
2	Marginal	Not up to expectations
1	Deficient	Poor performance
NA	Insufficient Data	Performance not observed or has not had the opportunity observe

1. ____ General knowledge of athletic training/allied health
2. ____ Organizational skills
3. ____ Practical skills
4. ____ Ability to promote high professional standards by word and example
5. ____ Ability to promote individual achievement
6. ____ Ability to analyze athletic training student skills and assist with improvement
7. ____ Ability to instill confidence in athletic training students
8. ____ Ability to communicate effectively with athletic training students
9. ____ Ability to respect athletic training students as individuals
10. ____ Ability to treat athletic training students fairly
11. ____ Ability to be an effective leader
12. ____ Ability to use motivational techniques as a positive influence on the program
13. ____ Ability to show personal enthusiasm for athletic training and the program
14. ____ Ability to use humor in situations, but knows how to be serious
15. ____ Ability to be sensitive to individual needs
16. ____ Ability to demonstrate control in stressful situations
17. ____ Ability to adapt to situations
18. ____ Overall work performance

Clinical Education Setting Evaluation:

3	Excellent	Always	Above Average	3
2	Good	Often	Average	2
1	Marginal	Seldom	Below Average	1
0	Not Applicable/Insufficient Data			0

1. _____ Your opportunity to evaluate patients/athletes
2. _____ Your opportunity to plan treatment programs
3. _____ Your opportunity to implement treatment programs
4. _____ Your opportunity to make patient/athlete referrals
5. _____ Your exposure to a variety of patients/athletes
6. _____ Your opportunity to provide follow-up patient/athlete care
7. _____ Your opportunity to participate in clinical cases or in-services
8. _____ Your opportunity to observe surgeries or other medical interventions
9. _____ Your exposure to modern equipment (i.e. therapeutic modalities, medical treatment)
10. _____ Appropriate patient/athlete volume
11. _____ Adequate space to treat patients/athletes
12. _____ Adequate space for students to learn and practice clinical skills
13. _____ Adequate space designated for staff in-services
14. _____ Rate the function of the facility
15. _____ Rate the overall work environment
16. Y N Were other student interns from different institutions present during this rotation?

Answer the following in text boxes:

Comments (use examples where possible):

What was the single most important learning experience you had in this clinical rotation?

What do you consider to be the STRENGTHS of this clinical instructor?

What do you consider to be the STRENGTHS of this clinical site?

What do you consider to be the WEAKNESSES of this clinical rotation?

How can these weaknesses be addressed? What suggestions do you have to improve this clinical site? (use other side if necessary)



**ACI ANNUAL SELF-EVALUATION
(Online Survey)**

Enter via drop down menu:

- Name of ACI
- Years of experience as a credential professional
- Years of experience as a clinical instructor
- Clinical Rotation Setting (specific site)

Evaluate yourself and your clinical site using the following scale.

Evaluation Scale

5	Superior	Clearly outstanding
4	Good	Above average performance
3	Competent	As expected
2	Marginal	Not up to expectations
1	Deficient	Poor performance
NA	Insufficient Data	Performance not observed or has not had the opportunity observe

- ___ 1. General knowledge of athletic raining/allied health
- ___ 2. Organizational skills
- ___ 3. Practical skills
- ___ 4. Ability to promote high professional standards by word and example
- ___ 5. Ability to promote individual achievement
- ___ 6. Ability to analyze athletic training student skills and assist with improvement
- ___ 7. Ability to instill confidence in athletic training students
- ___ 8. Ability to communicate effectively with athletic training students
- ___ 9. Ability to respect athletic training students as individuals
- ___ 10. Ability to treat athletic training students fairly
- ___ 11. Ability to be an effective leader
- ___ 12. Ability to use motivational techniques as a positive influence on the program
- ___ 13. Ability to show personal enthusiasm for athletic training and the program
- ___ 14. Ability to use humor in situations, but knows how to be serious
- ___ 15. Ability to be sensitive to individual needs
- ___ 16. Ability to demonstrate control in stressful situations
- ___ 17. Ability to adapt to situations
- ___ 18. Overall work performance

Answer in text boxes:

- What do you consider to be your **STRENGTHS** as an ACI?
- What do you consider to be your **WEAKNESSES** as an ACI?
- How can these weaknesses be addressed? What strategies can you utilize to improve your performance as a clinical instructor?
- What can the Clinical Education Coordinator do to better assist you in becoming the best ACI possible?
- Please include any other comments you might have.



ATEP SENIOR QUESTIONNAIRE

1. Name _____ Date _____

2. Summer address _____

3. Phone(_____) _____

4. Permanent address _____

5. Phone(_____) _____

6. Summer employment plans: Full time _____ Part time _____

Position/Title: _____

Organization/Agency: _____

Location (City, State): _____

7. Plans for next year:

A. If graduate school:

College _____

Major area of study _____

B. If employment:

Position or position goal _____

Organization/Agency or _____

Type of Organization/Agency _____

Location (if known) _____

C. Other (please explain)

8. Have you already been hired in this position? Yes _____ No _____

Full time? Yes _____ No _____

If yes, estimate annual salary (optional) \$ _____

9. Have you had any full-time job offers you did not accept? Yes _____ No _____

If yes, please complete information below:

Position _____

Organization/Agency _____

Estimated annual salary _____

Reason for refusal _____

Position _____

Organization/Agency _____

Estimated annual salary _____

Reason for refusal _____

10. Long-range career goals (what do you expect to be doing in five years?):

11. Do you plan to take any other allied health certification courses and exams? (e.g. ACSM, CSCS)

If yes, what, where, and when? _____

12. Do you plan to take BOC Inc. certification exam for Athletic Training (ATC)? Yes _____ No _____

If yes, where and when? _____

13. Which professional organizations do you plan to join?

	Yes	No
American College of Sports Medicine	_____	_____
American Alliance for Health, Physical Education, Recreation and Dance	_____	_____
National Athletic Trainers' Association	_____	_____
Other _____	_____	_____

14. Please rate the ATEP on the items below using the following scale:

5 = Excellent 4 = Very Good 3 = Good 2 = Poor 1 = Needs Significant Attention

_____ Athletic Training courses (“AT” prefix)

_____ Science core courses for AT (biology, anatomy, physiology, kinesiology, exercise physiology)

_____ Allied Health course work (health education, nutrition, psychology courses)

_____ Academic Advising

_____ Clinical Experiences – on-campus (ACIs, rotations, treatment/respect from APU coaching staff)

_____ Clinical Experiences – off-campus (ACIs, rotations, treatment/respect from other coaches/allied health professionals)

_____ Combined academic and clinical experiences (Is there a proper progression of academic courses and clinical experiences? Did you feel prepared for the clinical rotation?)

_____ Administration of the ATEP (Day-to-day operations, ATEP handbook, effectiveness of academic and clinical staff, timely notifications of changes in policies/procedures)

_____ Professional Opportunities (AT Club, notification of: scholarship opportunities; state, district, and national meetings; GA/job placement announcements)

Please include any comments from the above items in the space provided below:

15. List some of your most valuable academic courses. Why were they valuable?

16. List some of the least valuable or most disappointing courses. Why were they less valuable or disappointing?

17. Major overall strengths of the Athletic Training Education Program (not specific courses):

18. Overall weaknesses of the Athletic Training Education Program (not specific courses):

19. Suggestions for changes in program, emphasis, advising, etc.:

20. Suggestions for future off-campus sites (places you would recommend):

22. Write a 3-4 sentence paragraph that highlights your most meaningful experiences as an APU Athletic Training major – something we can quote in publicity releases, etc.:

23. Please sign here for permission to use your remarks for publicity purposes.

Signature

Thank you for taking the time to help the ATEP. Your comments are *greatly* appreciated.



**ATS TWO WEEK EVALUATION
(Online Survey)**

ACI enters via drop down menu:

- Name of ATS
- Dates of rotation
- Number of hours student logged during the previous two weeks
- Name of ACI
- Clinical Rotation Setting (emphasis of rotation)

Evaluate the ATS using the following scale.

Evaluation scale for a student at this level:

5	Superior	Self initiation, needing no reminders to complete task or objective
4	Good	Periods of self initiation, requiring reminders to complete task or objective
3	Competent	Requires reminders but willing to complete task or objective
2	Marginal	Hesitant/reluctant to complete task or objective needing constant reminders
1	Deficient	The student did not make an attempt to meet this task or objective
NA	Insufficient Data	Not applicable/scored

1. ___ Student is punctual in reporting for daily assignments.
 2. ___ Student has met time requirements for clinical assignments.
 3. ___ Student dresses appropriately for clinical assignment.
 4. ___ Student dresses appropriate for event/competitions.
 5. ___ Student follows directions.
 6. ___ Student follows policies and procedures of the clinical setting.
 7. ___ Student displays effective communication with ACI/Certified Athletic Trainer.
 8. ___ Student demonstrates a positive attitude.
 9. ___ Student completes assigned tasks and clinical skills as appropriate (i.e. rehabilitation and general medical, etc.).
 10. ___ Student demonstrates leadership for younger students.
- ___ **Subtotal**

Answer using a text box:

- Please provide additional comments about the ATS.
- Please verify that you discussed this evaluation with the ATS. Describe how and when you provided appropriate feedback to the ATS regarding the scoring of this evaluation.



LEVEL I ATS END OF ROTATION EVALUATION
(Online Survey)

ACI enters via drop down menu:

- Name of ATS
- Dates of rotation
- Number of hours student logged during the previous two weeks
- Name of ACI
- Clinical Rotation Setting (emphasis of rotation)

Evaluate the ATS using the following scale.

Psychomotor evaluation scale for a student at this level:

5	Superior	Clearly outstanding, requiring no rehearsal
4	Good	Above average performance with no prompting
3	Competent	As expected, performs skill accurately with minor verbal prompting
2	Marginal	Not up to expectations, is able to perform the skill with physical guidance
1	Deficient	Poor performance, needs considerable physical guidance and verbal prompting
NA	Insufficient Data	Performance not observed or has not had the opportunity to try the skill

1. ___ Taping of the ankle
 2. ___ Taping of other body areas
 3. ___ Proper care of open wounds
 4. ___ Management of emergency situations (splinting, EAP, spine boarding, other first aid procedures)
 5. ___ Accuracy in fitting crutches
 6. ___ Accuracy in fitting ankle braces
 7. ___ Accuracy in fitting other braces/splints
 8. ___ Application of cryotherapy
 9. ___ Application of thermotherapy
 10. ___ Application of strength training strategies
 11. ___ Application of flexibility exercises
 12. ___ Following OSHA standards for handling bodily fluids
- ___ **Subtotal**

Evaluation scale for a student at this level

5	Superior	Self initiation, needing no reminders to complete task or objective
4	Good	Periods of self initiation, requiring reminders to complete task or objective
3	Competent	Requires reminders but willing to complete task or objective
2	Marginal	Hesitant/reluctant to complete task or objective needing constant reminders
1	Deficient	The student did not make an attempt to meet this task or objective
NA	Insufficient Data	Not applicable/scored

1. ___ Provides proper and timely first aid to injured athletes.
 2. ___ Communicates with the supervising ACI and upper class student athletic trainers.
 3. ___ Maintains accurate and up-to-date medical records in the computer.
 4. ___ Responds to criticism with openness and a willingness to learn through mistakes.
 5. ___ Arrives on-time for assignment with the proper attire.
 6. ___ Maintains confidentiality of all medical records and information.
 7. ___ Uses medical terminology accurately.
 8. ___ Maintains the proper condition of the athletic training room.
 9. ___ Keeps the athletic training kit well stocked and organized.
 10. ___ Develops rapport and shows empathy with the athletes concerning their health and status.
 11. ___ Works cooperatively with other athletic training student.
 12. ___ Displays confidence while performing athletic training tasks.
 13. ___ Demonstrate the use of prevention strategies such as assisting during stretching and hydration.
 14. ___ Remains attentive to what is occurring during practices and games.
- ___ **Subtotal**

Answer using a text box:

- Please provide additional comments about the ATS.
- Please verify that you discussed this evaluation with the ATS. Describe how and when you provided appropriate feedback to the ATS regarding the scoring of this evaluation.



**LEVEL II ATS END OF ROTATION EVALUATION
(Online Survey)**

ACI enters via drop down menu:

- Name of ATS
- Dates of rotation
- Number of hours student logged during the previous two weeks
- Name of ACI
- Clinical Rotation Setting (emphasis of rotation)

Evaluate the ATS using the following scale.

Psychomotor evaluation scale for a student at this level:

5	Superior	Clearly outstanding, requiring no rehearsal
4	Good	Above average performance with no prompting
3	Competent	As expected, performs skill accurately with minor verbal prompting
2	Marginal	Not up to expectations, is able to perform the skill with physical guidance
1	Deficient	Poor performance, needs considerable physical guidance and verbal prompting
NA	Insufficient Data	Performance not observed or has not had the opportunity to try the skill

1. ___ Taping of the ankle
2. ___ Taping of other body areas
3. ___ Proper care of open wound
4. ___ Management of emergency situations (splinting, EAP, spine boarding, other first aid procedures)

5. ___ Accuracy in fitting crutches
6. ___ Accuracy in fitting ankle braces
7. ___ Accuracy in fitting other braces/splints
8. ___ Evaluation of the lower extremity
9. ___ Evaluation of the upper extremity
10. ___ Evaluation of the trunk/spine
11. ___ Evaluation of the head/neck
12. ___ Application of cryotherapy
13. ___ Application of thermotherapy
14. ___ Application of strength training strategies
15. ___ Application of flexibility exercises
16. ___ Electric stimulation for edema reduction

17. ___ Electric stimulation for muscle relaxation
18. ___ Electric stimulation for pain reduction
19. ___ Electric stimulation for muscle reeducation or strengthening
20. ___ Ultrasound for non-thermal effects
21. ___ Ultrasound for thermal effects
22. ___ Therapeutic massage
23. ___ Whirlpool treatments
24. ___ Following OSHA standards for handling bodily fluids

___ **Subtotal**

Evaluation scale for a student at this level:

5	Superior	Self initiation, needing no reminders to complete task or objective
4	Good	Periods of self initiation, requiring reminders to complete task or objective
3	Competent	Requires reminders but willing to complete task or objective
2	Marginal	Hesitant/reluctant to complete task or objective needing constant reminders
1	Deficient	The student did not make an attempt to meet this task or objective
NA	Insufficient Data	Not applicable/scored

1. ___ Provides proper and timely first aid to injured athletes.
2. ___ Communicates with the supervising ACI.
3. ___ Develops rapport and shows empathy with the athletes concerning their health and status.
4. ___ Evaluates athletic injuries accurately and with confidence.
5. ___ Provides personal assessment of an injury to the supervising ACI after completing the evaluation.
6. ___ Maintains accurate and up-to-date medical records and coaches' reports.
7. ___ Arrives on-time for assignment with the proper attire.
8. ___ Maintains confidentiality of all medical records and information.
9. ___ Uses medical terminology accurately.
10. ___ Maintains proper condition of the athletic training room.
11. ___ Keeps the athletic training kits well stocked and organized.
12. ___ Works cooperatively with other athletic training student.
13. ___ Displays confidence while performing athletic training tasks.
14. ___ Demonstrates the use of prevention strategies such as assisting during stretching and hydration.
15. ___ Remains attentive to what is occurring during competition.

___ **Subtotal**

Answer using a text box:

- Please provide additional comments about the ATS.
- Please verify that you discussed this evaluation with the ATS. Describe how and when you provided appropriate feedback to the ATS regarding the scoring of this evaluation.



**LEVEL III ATS END OF ROTATION EVALUATION
(Online Survey)**

ACI enters via drop down menu:

- Name of ATS
- Dates of rotation
- Number of hours student logged during the previous two weeks
- Name of ACI
- Clinical Rotation Setting (emphasis of rotation)

Evaluate the ATS using the following scale.

Psychomotor evaluation scale for a student at this level:

5	Superior	Clearly outstanding, requiring no rehearsal
4	Good	Above average performance with no prompting
3	Competent	As expected, performs skill accurately with minor verbal prompting
2	Marginal	Not up to expectations, is able to perform the skill with physical guidance
1	Deficient	Poor performance, needs considerable physical guidance and verbal prompting
NA	Insufficient Data	Performance not observed or has not had the opportunity to try the skill

1. ___ Management of emergency situations (splinting, EAP, spine boarding, other first aid procedures)
2. ___ Electric stimulation for edema reduction
3. ___ Electric stimulation for muscle relaxation
4. ___ Electric stimulation for pain reduction
5. ___ Electric stimulation for muscle reeducation or strengthening
6. ___ Ultrasound for non-thermal effects
7. ___ Ultrasound for thermal effects
8. ___ Therapeutic massage
9. ___ Whirlpool treatments
10. ___ Orthopedic evaluation skills
11. ___ General medical evaluation skills (heart, lung, abdominal, eyes, and ENT)
12. ___ Therapeutic exercise skills (PRE for various orthopedic conditions)
13. ___ Manual therapy skills (strain-counterstrain, PNF, myofascial release, ART, muscle energy)
14. ___ Return to play skills (throwing programs, functional programs)
15. ___ Taping techniques (advance techniques, Kinesiotaping, McConnell)
16. ___ Functional bracing techniques
17. ___ Biofeedback (simple, tactile, EMG)
18. ___ Diagnostic testing and evaluation (EMG, isokinetic, KT 1000, x-ray, MRI)

19. ____ Following OSHA standards for handling bodily fluids

____ **Subtotal**

Evaluation scale for a student at this level:

5	Superior	Self initiation, needing no reminders to complete task or objective
4	Good	Periods of self initiation, requiring reminders to complete task or objective
3	Competent	Requires reminders but willing to complete task or objective
2	Marginal	Hesitant/reluctant to complete task or objective needing constant reminders
1	Deficient	The student did not make an attempt to meet this task or objective
NA	Insufficient Data	Not applicable/scored

1. ____ Provides leadership for Level I and II athletic training students.
2. ____ Performs athletic training duties and skills.
3. ____ Works well independently.
4. ____ Adheres to professional standards of dress and behavior.
5. ____ Communicates with the coaching staff concerning the health and playing status of the student athletes.
6. ____ Communicates with the supervising ACI.
7. ____ Maintains accurate and up-to-date medical records and coaches' reports.
8. ____ Uses proper medical terminology both written and verbally.
9. ____ Evaluates athletic injuries accurately and with confidence.
10. ____ Determines, with the supervising ACI, when to use particular modalities and with what parameters.
11. ____ Works with the supervising ACI to coordinate and supervise the rehabilitation of the injured athletes.
12. ____ Asks questions and seeks related athletic training information.
13. ____ Works cooperatively with other athletic training students, coaches, sports, and supervising ACIs.
14. ____ Develops rapport and shows empathy with the athletes concerning their health and status.

____ **Subtotal**

Answer using a text box:

- Please provide additional comments about the ATS.
- Please verify that you discussed this evaluation with the ATS. Describe how and when you provided appropriate feedback to the ATS regarding the scoring of this evaluation.



CLINICAL EXPERIENCE CONTRACT

Athletic Institution

(1 clinical credit/60 hours minimum)

Institution _____ Sport(s) _____ Level I II III Rotation 1 2 3 4

	Name/Institution	Address	Phone	Email
ATS				
A/CI				
CEC	Jen Livingston, MS, ATC Azusa Pacific University	701 E. Foothill Blvd. Azusa, 91702	626-815-6000 x 5214 626-224-0189	jlivingston@apu.edu

Athletic Institute Goals

The following set of goals developed by the CEC will be used as guidelines for determining whether the requirements of the clinical experience have been met.

1. The ATS will demonstrate professional behaviors and appropriate application of clinical proficiencies as indicated by the level specific ATS Evaluation and corresponding practicum course (Refer to ATEP Handbook).
2. Increase contact with various athletic populations.
3. Develop an understanding of different athletic training service philosophies.
4. Work with different personnel including: coaches, parents, administrators, physicians and other staff members.
5. Develop professional confidence and independence.

ATS/ACI Goals

Additional goals should be developed by the ATS and the clinical instructor.

1. _____
2. _____
3. _____
4. _____
5. _____

ATS Learning Style and Strengths

Learning Style: _____ Strengths: _____

Athletic Training Student's Responsibilities

1. The ATS is responsible for following the policies and procedures as outlined in the APU ATEP and ATR Handbook.
2. The ATS is responsible for following the policies and procedures of the clinical site for the safety of the patient and associated personnel consistent with voluntary employment.
3. The ATS is required to submit a clinical hour verification form every 2-weeks.
4. The ATS is required to evaluate the clinical experience through the ATS Self-Evaluation and ACI & Setting Evaluation.

Clinical Instructor's Responsibilities (clinical site supervisor)

1. The A/CI will be responsible for communicating the policies and procedures for that clinical site for the safety of the patient, ATS, and those associated with the clinical site.
2. The A/CI will be responsible for facilitating student learning through appropriate utilization of clinical skills.
3. The A/CI will provide direct supervision (verbal and auditory communication) to intervene on behalf of the ATS.
4. The A/CI is required to evaluate the clinical performance of the ATS through the Clinical Experience Contract, proficiency assessments (ACI only), 2-week ATS Evaluations, and level specific ATS Evaluation.

Clinical Education Coordinator's Responsibilities

1. The CEC will monitor the clinical experience through site visits and formal evaluations, charting the progress of the ATS, ACI effectiveness, and the overall quality of the clinical rotation.
2. The CEC will be available as a resource for both the clinical site supervisor and the ATS.
3. The CEC will maintain communication with clinical site supervisor, ATS, and the practicum instructor regarding the student's performance to establish a grade in the following practicum courses (AT 242, 340, 342, 440, 442, and 444). This includes the number of credits earned (hours) and clinical performance evaluation.

Signatures: *All agree to abide by the guidelines outlined for the satisfactory completion of this clinical education experience.*

ATS _____

Date _____

A/CI _____

Date _____

CEC _____

Date _____



CLINICAL EXPERIENCE CONTRACT
Equipment Intensive
(1 clinical credit/60 hours minimum)

Institution _____ Sport _____ Level I II III Rotation 1 2 3 4

	Name/Institution	Address	Phone	Email
ATS				
A/CI				
CEC	Jen Livingston, MS, ATC Azusa Pacific University	701 E. Foothill Blvd. Azusa, 91702	626-815-6000 x 5214 626-224-0189	jlivingston@apu.edu

Equipment Intensive Goals

The following set of goals developed by the CEC will be used as guidelines for determining whether the requirements of the clinical experience have been met.

1. The ATS will demonstrate professional behaviors and appropriate application of clinical proficiencies as indicated by the level specific ATS Evaluation (Refer to ATEP Handbook).
2. Identify correct biomechanics of tackling and/of physical contact in the prevention and management of musculoskeletal and general medical conditions.
3. Identify hazardous play, common injuries, and management/treatment strategies associated with collision and equipment intensive sports.

ATS/ACI Goals

Additional goals should be developed by the ATS and the clinical instructor.

1. _____
2. _____
3. _____
4. _____
5. _____

ATS Learning Style and Strengths

Learning Style: _____ Strengths: _____

Athletic Training Student’s Responsibilities

1. The ATS is responsible for following the policies and procedures as outlined in the APU ATEP and ATR Handbook.
2. The ATS is responsible for following the policies and procedures of the clinical site for the safety of the patient and associated personnel consistent with voluntary employment.
3. The ATS is required to submit a clinical hour verification form every 2-weeks.
4. The ATS is required to evaluate the clinical experience through the ATS Self-Evaluation and ACI & Setting Evaluation.

Clinical Instructor’s Responsibilities (clinical site supervisor)

1. The A/CI will be responsible for communicating the policies and procedures for that clinical site for the safety of the patient, ATS, and those associated with the clinical site.
2. The A/CI will be responsible for facilitating student learning through appropriate utilization of clinical skills.
3. The A/CI will provide direct supervision (verbal and auditory communication) to intervene on behalf of the ATS.
4. The A/CI is required to evaluate the clinical performance of the ATS through the Clinical Experience Contract, proficiency assessments (ACI only), 2-week ATS Evaluations, and level specific ATS Evaluation.

Clinical Education Coordinator’s Responsibilities

1. The CEC will monitor the clinical experience through site visits and formal evaluations, charting the progress of the ATS, ACI effectiveness, and the overall quality of the clinical rotation.
2. The CEC will be available as a resource for both the clinical site supervisor and the ATS.
3. The CEC will maintain communication with clinical site supervisor, ATS, and the practicum instructor regarding the student’s performance to establish a grade in the following practicum courses (AT 242, 340, 342, 440, 442, and 444). This includes the number of credits earned (hours) and clinical performance evaluation.

Signatures: *All agree to abide by the guidelines outlined for the satisfactory completion of this clinical education experience.*

ATS _____

Date _____

A/CI _____

Date _____

CEC _____

Date _____



CLINICAL EXPERIENCE CONTRACT

General Medical Services

(20 contact hours)

Institution _____

Level I II III

Rotation 1 2 3 4

	Name/Institution	Address	Phone	Email
ATS				
A/CI				
CEC	Jen Livingston, MS, ATC Azusa Pacific University	701 E. Foothill Blvd. Azusa, 91702	626-815-6000 x 5214 626-224-0189	jlivingston@apu.edu

General Medical Services Goals

The following set of goals developed by the CEC will be used as guidelines for determining whether the requirements of the clinical experience have been met.

1. The ATS will demonstrate professional behaviors and appropriate application of clinical proficiencies as indicated by the level specific ATS Evaluation and corresponding practicum course (Refer to ATEP Handbook).
2. Increase direct contact with various patient populations.
3. Develop a comprehensive patient management plan for general medical conditions.
4. Understand medical insurance and reimbursement.
5. Review patient charts and laboratory test results.
6. Understand the appropriate use of diagnostic and evaluation equipment.

ATS/ACI Goals

Additional goals should be developed by the ATS and the clinical instructor.

1. _____
2. _____
3. _____
4. _____
5. _____

ATS Learning Style and Strengths

Learning Style: _____ Strengths: _____

Athletic Training Student’s Responsibilities

1. The ATS is responsible for following the policies and procedures as outlined in the APU ATEP and ATR Handbook.
2. The ATS is responsible for following the policies and procedures of the clinical site for the safety of the patient and associated personnel consistent with voluntary employment.
3. The ATS is required to submit a clinical hour verification form every 2-weeks.
4. The ATS is required to evaluate the clinical experience through the ATS Self-Evaluation and ACI & Setting Evaluation.

Clinical Instructor’s Responsibilities (clinical site supervisor)

1. The A/CI will be responsible for communicating the policies and procedures for that clinical site for the safety of the patient, ATS, and those associated with the clinical site.
2. The A/CI will be responsible for facilitating student learning through appropriate utilization of clinical skills.
3. The A/CI will provide direct supervision (verbal and auditory communication) to intervene on behalf of the ATS.
4. The A/CI is required to evaluate the clinical performance of the ATS through the Clinical Experience Contract, proficiency assessments (ACI only), 2-week ATS Evaluations, and level specific ATS Evaluation.

Clinical Education Coordinator’s Responsibilities

1. The CEC will monitor the clinical experience through site visits and formal evaluations, charting the progress of the ATS, ACI effectiveness, and the overall quality of the clinical rotation.
2. The CEC will be available as a resource for both the clinical site supervisor and the ATS.
3. The CEC will maintain communication with clinical site supervisor, ATS, and the practicum instructor regarding the student’s performance to establish a grade in the following practicum courses (AT 242, 340, 342, 440, 442, and 444). This includes the number of credits earned (hours) and clinical performance evaluation.

Signatures: *All agree to abide by the guidelines outlined for the satisfactory completion of this clinical education experience.*

ATS _____

Date _____

A/CI _____

Date _____

CEC _____

Date _____



CLINICAL EXPERIENCE CONTRACT

Lower Extremity Intensive

(1 clinical credit/60 hours minimum)

Institution _____ Sport _____ Level I II III Rotation 1 2 3 4

ATS	Name/Institution	Address	Phone	Email
A/CI				
CEC	Jen Livingston, MS, ATC Azusa Pacific University	701 E. Foothill Blvd. Azusa, 91702	626-815-6000 x 5214 626-224-0189	jlivingston@apu.edu

Lower Extremity Intensive Goals

The following set of goals developed by the CEC will be used as guidelines for determining whether the requirements of the clinical experience have been met.

1. The ATS will demonstrate professional behaviors and appropriate application of clinical proficiencies as indicated by the level specific ATS Evaluation (Refer to ATEP Handbook).
2. Identify correct biomechanics of kicking, jumping, and/or running in the prevention and management of musculoskeletal injuries.
3. Identify hazardous play, common injuries, and management/treatment strategies associated with lower extremity intensive sports.

ATS/ACI Goals

Additional goals should be developed by the ATS and the clinical instructor.

1. _____
2. _____
3. _____
4. _____
5. _____

ATS Learning Style and Strengths

Learning Style: _____ Strengths: _____

Athletic Training Student’s Responsibilities

1. The ATS is responsible for following the policies and procedures as outlined in the APU ATEP and ATR Handbook.
2. The ATS is responsible for following the policies and procedures of the clinical site for the safety of the patient and associated personnel consistent with voluntary employment.
3. The ATS is required to submit a clinical hour verification form every 2-weeks.
4. The ATS is required to evaluate the clinical experience through the ATS Self-Evaluation and ACI & Setting Evaluation.

Clinical Instructor’s Responsibilities (clinical site supervisor)

1. The A/CI will be responsible for communicating the policies and procedures for that clinical site for the safety of the patient, ATS, and those associated with the clinical site.
2. The A/CI will be responsible for facilitating student learning through appropriate utilization of clinical skills.
3. The A/CI will provide direct supervision (verbal and auditory communication) to intervene on behalf of the ATS.
4. The A/CI is required to evaluate the clinical performance of the ATS through the Clinical Experience Contract, proficiency assessments (ACI only), 2-week ATS Evaluations, and level specific ATS Evaluation.

Clinical Education Coordinator’s Responsibilities

1. The CEC will monitor the clinical experience through site visits and formal evaluations, charting the progress of the ATS, ACI effectiveness, and the overall quality of the clinical rotation.
2. The CEC will be available as a resource for both the clinical site supervisor and the ATS.
3. The CEC will maintain communication with clinical site supervisor, ATS, and the practicum instructor regarding the student’s performance to establish a grade in the following practicum courses (AT 242, 340, 342, 440, 442, and 444). This includes the number of credits earned (hours) and clinical performance evaluation.

Signatures: *All agree to abide by the guidelines outlined for the satisfactory completion of this clinical education experience.*

ATS _____

Date _____

A/CI _____

Date _____

CEC _____

Date _____



CLINICAL EXPERIENCE CONTRACT

Rehabilitative Services

(1 clinical credit/60 hours minimum)

Institution _____ Level I II III Rotation 1 2 3 4

	Name/Institution	Address	Phone	Email
ATS				
A/CI				
CEC	Jen Livingston, MS, ATC Azusa Pacific University	701 E. Foothill Blvd. Azusa, 91702	626-815-6000 x 5214 626-224-0189	jlivingston@apu.edu

Rehabilitation Services Goals

The following set of goals developed by the CEC will be used as guidelines for determining whether the requirements of the clinical experience have been met.

1. The ATS will demonstrate professional behaviors and appropriate application of clinical proficiencies as indicated by the level specific ATS Evaluation and corresponding practicum course (Refer to ATEP Handbook).
2. Increase direct contact with various patient populations.
3. Observe long-term rehabilitation of post-surgical patients.
4. Develop a comprehensive patient treatment plan for orthopedic conditions.
5. Design and direct PREs for a variety of patients.
6. Develop manual therapy skills.
7. Understand medical insurance and reimbursement.
8. Review patient charts and diagnostic imaging results.
9. Understand the appropriate use of diagnostic and evaluation equipment.

ATS/ACI Goals

Additional goals should be developed by the ATS and the clinical instructor.

1. _____
2. _____
3. _____
4. _____
5. _____

ATS Learning Style and Strengths

Learning Style: _____ Strengths: _____

Athletic Training Student's Responsibilities

1. The ATS is responsible for following the policies and procedures as outlined in the APU ATEP and ATR Handbook.
2. The ATS is responsible for following the policies and procedures of the clinical site for the safety of the patient and associated personnel consistent with voluntary employment.
3. The ATS is required to submit a clinical hour verification form every 2-weeks.
4. The ATS is required to evaluate the clinical experience through the ATS Self-Evaluation and ACI & Setting Evaluation.

Clinical Instructor's Responsibilities (clinical site supervisor)

1. The A/CI will be responsible for communicating the policies and procedures for that clinical site for the safety of the patient, ATS, and those associated with the clinical site.
2. The A/CI will be responsible for facilitating student learning through appropriate utilization of clinical skills.
3. The A/CI will provide direct supervision (verbal and auditory communication) to intervene on behalf of the ATS.
4. The A/CI is required to evaluate the clinical performance of the ATS through the Clinical Experience Contract, proficiency assessments (ACI only), 2-week ATS Evaluations, and level specific ATS Evaluation.

Clinical Education Coordinator's Responsibilities

1. The CEC will monitor the clinical experience through site visits and formal evaluations, charting the progress of the ATS, ACI effectiveness, and the overall quality of the clinical rotation.
2. The CEC will be available as a resource for both the clinical site supervisor and the ATS.
3. The CEC will maintain communication with clinical site supervisor, ATS, and the practicum instructor regarding the student's performance to establish a grade in the following practicum courses (AT 242, 340, 342, 440, 442, and 444). This includes the number of credits earned (hours) and clinical performance evaluation.

Signatures: *All agree to abide by the guidelines outlined for the satisfactory completion of this clinical education experience.*

ATS _____

Date _____

A/CI _____

Date _____

CEC _____

Date _____



CLINICAL EXPERIENCE CONTRACT

Upper Extremity Intensive

(1 clinical credit/60 hours minimum)

Institution _____ Sport _____ Level I II III Rotation 1 2 3 4

ATS	Name/Institution	Address	Phone	Email
ATS				
A/CI				
CEC	Jen Livingston, MS, ATC Azusa Pacific University	701 E. Foothill Blvd. Azusa, 91702	626-815-6000 x 5214 626-224-0189	jlivingston@apu.edu

Upper Extremity Intensive Goals

The following set of goals developed by the CEC will be used as guidelines for determining whether the requirements of the clinical experience have been met.

1. The ATS will demonstrate professional behaviors and appropriate application of clinical proficiencies as indicated by the level specific ATS Evaluation (Refer to ATEP Handbook).
2. Identify correct biomechanics of throwing and/or hitting for the purpose of injury prevention and modification.
3. Design and demonstration a functional throwing and/or hitting program.
4. Identify hazardous play, common injuries, and management/treatment strategies associated with upper extremity intensive sports.

ATS/ACI Goals

Additional goals should be developed by the ATS and the clinical instructor.

1. _____
2. _____
3. _____
4. _____
5. _____

ATS Learning Style and Strengths

Learning Style: _____ Strengths: _____

Athletic Training Student’s Responsibilities

1. The ATS is responsible for following the policies and procedures as outlined in the APU ATEP and ATR Handbook.
2. The ATS is responsible for following the policies and procedures of the clinical site for the safety of the patient and associated personnel consistent with voluntary employment.
3. The ATS is required to submit a clinical hour verification form every 2-weeks.
4. The ATS is required to evaluate the clinical experience through the ATS Self-Evaluation and ACI & Setting Evaluation.

Clinical Instructor’s Responsibilities (clinical site supervisor)

1. The A/CI will be responsible for communicating the policies and procedures for that clinical site for the safety of the patient, ATS, and those associated with the clinical site.
2. The A/CI will be responsible for facilitating student learning through appropriate utilization of clinical skills.
3. The A/CI will provide direct supervision (verbal and auditory communication) to intervene on behalf of the ATS.
4. The A/CI is required to evaluate the clinical performance of the ATS through the Clinical Experience Contract, proficiency assessments (ACI only), 2-week ATS Evaluations, and level specific ATS Evaluation.

Clinical Education Coordinator’s Responsibilities

1. The CEC will monitor the clinical experience through site visits and formal evaluations, charting the progress of the ATS, ACI effectiveness, and the overall quality of the clinical rotation.
2. The CEC will be available as a resource for both the clinical site supervisor and the ATS.
3. The CEC will maintain communication with clinical site supervisor, ATS, and the practicum instructor regarding the student’s performance to establish a grade in the following practicum courses (AT 242, 340, 342, 440, 442, and 444). This includes the number of credits earned (hours) and clinical performance evaluation.

Signatures: *All agree to abide by the guidelines outlined for the satisfactory completion of this clinical education experience.*

ATS _____

Date _____

A/CI _____

Date _____

CEC _____

Date _____



CLINICAL EDUCATION SETTING SELF-ASSESSMENT

This form is to be completed by the Site Supervisor/Approved Clinical Instructor annually as required by the Athletic Training Education Program in conjunction with the accreditation Standards set by the JRC-AT/CAATE.

Name of affiliated institution: _____ Site-Supervisor: _____

Title: _____ Phone: _____ Email: _____

Address: _____ Date: _____

Evaluation Scale:

3	Excellent	Always	Above Average	3
2	Good	Often	Average	2
1	Marginal	Seldom	Below Average	1
0	Insufficient Data			0

Rate the staff:

1. _____ Overall morale
2. _____ Willingness to use or learn new or different ideas
3. _____ Use of a variety of skills
4. _____ Interaction with other allied health professionals
5. _____ Size when compared to patient/athlete load
6. _____ Time to appropriately supervise and instruct students
7. _____ Participation in professional activities
8. _____ Encouragement of student professional involvement
9. _____ Communication with CEC/Curriculum Director (APU)
10. _____ Communication between CIs/Site-Supervisor
11. _____ Communication with other allied health members (i.e. sponsoring physician)

Rate the following learning opportunities provided to students:

12. _____ Assessing/evaluating patients/athletes
13. _____ Planning treatment programs
14. _____ Implementing treatment programs
15. _____ Making patient/athlete referrals
16. _____ Exposure to a variety of patients/athletes
17. _____ Providing follow-up patient/athlete care
18. _____ Participating in clinical cases (case studies)
19. _____ Observing surgeries or other medical interventions
20. _____ Exposure to modern equipment (i.e. therapeutic modalities, medical treatment)

21. _____Appropriate patient/athlete volume

Rate the physical environment of the facility:

22. _____Adequate space to treat patients/athletes

23. _____Adequate space for students to learn and practice clinical skills

24. _____Adequate space designated for staff in-services

25. _____Function of the facility for its intended purpose

26. _____ Comfortableness of the work environment

Evaluation Scale:

1	Yes	1
0	No	0

Indicate if the institution does the following:

27. _____Is the NATA Code of Ethics available to the staff and students?

28. _____Is the State Practice Act available?

29. _____Does the institution discuss a written policy for ethical standards of practice?

30. _____Is there a reporting structure for unethical/illegal practice?

31. _____Does the institution follow (CAL) OSHA guidelines?

32. _____Does the institution instruct students regarding specific OSHA guidelines?

33. _____Does the facility provide appropriate blood-borne pathogen barriers, biohazard disposal equipment, and standard first aid/emergency equipment for student use?

34. _____Does the facility post emergency action plans?*

35. _____Does the facility have a copy of policy regarding communicable diseases available to the student?*

36. _____Does the facility have an operational policy and procedure manual available to the student?*

37. _____Do your administrators provide support (financial or release time) for ongoing continuing education?

38. _____Do your administrators demonstrate an interest in athletic training clinical education? If so, explain:

Additional Comments:

* Affiliated Clinical Site must submit a copy to the ATEP to keep on file for accreditation purposes.

Please submit this completed evaluation form to:

Jennifer Livingston, MS, ATC, Clinical Education Coordinator, Athletic Training Education Program, Azusa Pacific University, 701 East Foothill, PO Box 7000, Azusa, CA 91702. For questions call: (626) 815-6000 x 5214 or email jlivingston@apu.edu



OSHA/BLOOD BORNE PATHOGEN REVIEW

I _____ completed the OSHA/Blood Borne Pathogen (BBP) review
(print name)
held on _____. The following information was covered and explained:

1. modes and risks of transmission of BBP,
2. methods of protection against contracting a BBP,
3. universal precautions,
4. procedures to follow if I think I have been exposed to a pathogen.

I was given the opportunity to ask questions. My questions were answered satisfactorily and I clearly understand the information presented.

Signature _____

Date _____

Witness _____

Date _____



**Athletic Training Student
Statement of Understanding and Code of Conduct
Azusa Pacific University**

The following statements of understanding are the necessary requirements and criteria for completion of the Athletic Training Education Program. Each requirement must be fulfilled in order to graduate from APU with a B.A. in Athletic Training. In addition, completion of these requirements as well as graduating in “good standing” within the ATEP is necessary to receive program endorsement for the BOC Inc. examination to become a Certified Athletic Trainer.

My understanding of the Athletic Training Education Program:

_____ (*initials*) I am aware and plan to comply with the Azusa Pacific University Athletic Training Student Code of Conduct:

It is presumed that individuals involved in the Athletic Training Education Program (ATEP) at Azusa Pacific University possess a sincere desire to promote a program of Christ-centered excellence with a spirit of service. This spirit should challenge you, the athletic training student (ATS), to live these principles throughout the academic year, and allow them to be a motivating force in your life.

The Role of the Athletic Training Student:

- Demonstrate a willingness to follow the leadership of the academic and clinical faculty and the more experienced ATs. In addition, recognize your own potential to provide leadership, through actions, words, and deeds.
- Exceed the educational outcomes established by the athletic training education program and the university.
- Present yourself in a professional manner in conduct, speech, and appearance. This brings credit to yourself, others, and Azusa Pacific University.
- Display individual standards of excellence socially and spiritually.
- Abide by the Azusa Pacific University Student Standards of Conduct which governs the use of alcohol, tobacco, and controlled substances.
- Demonstrate loyalty to the university, the athletic training education program, and affiliated clinical sites.
- Display respect for the academic and clinical faculty, the staff and patients, and your peers.
- Demonstrate stewardship for the facilities and equipment available for your use.
- Present yourself as a servant to others, following the example of Christ.
- Support the Azusa Pacific University Athletic Training Education Program mission statement which reads:

The mission of the Athletic Training Education Program at Azusa Pacific University is to fully equip athletic training students with a quality education incorporating a Christian perspective to become life-long learners. The educational program incorporates current research and scholarly instruction, in both the clinical and didactic portions of the program, to prepare athletic training students to enter the profession as entry-level athletic trainers upon successfully passing the BOC certification examination.

_____ (*initials*) I am aware and plan to complete all of the following Athletic Training Major course work requirements and expectations:

1. Complete all Athletic Training Major course work with the following criteria:
 - a. Maintain a minimum cumulative GPA of 2.5
 - b. Maintain a minimum GPA of 3.0 in all AT didactic courses (AT 101, 160, 220, 240, 270, 351, 352, 355, 360, 364, 452, 465, 469, 490) with no course grade below a “C.”
 - c. Must successfully complete all practicum courses (AT 242, 340, 342, 440, 442) with no course grade below a “B”.
 - d. Must successfully complete all allied health courses (PE 240, 363; PSYC 110, 385; BIOL 101 or 151, 230/231 or 250/251).
 - e. Submit mid-semester grade evaluations as requested.
 - f. Failure to maintain didactic and clinical requirements may result in probation, suspension, or dismissal.
2. Maintain full-time student status at Azusa Pacific University. Less than full-time status requires written request and approval by the Program Director.
3. Attend mandatory ATEP meetings and in-services.
4. Demonstrate professional development by becoming an NATA student member and attending workshops and conferences.
5. Maintain contact with the ATEP following graduation for tracking purposes and alumni updates and complete Alumni Surveys following graduation from APU.

_____ (*initials*) I am aware and plan to complete all of the following Clinical Education requirements and expectations:

1. Athletic Training Students must adhere to the NATA Code of Ethics, BOC Inc. Standards of Professional Practice, the Azusa Pacific University Campus Policies, the Azusa Pacific University Athlete Code of Conduct, the Azusa Pacific University Athletic Training Student Code of Conduct, and the laws governing The United States of America.
2. Follow the policies and procedures of the designated affiliated clinical site. This includes professional dress and behavior, consistent with voluntary employment.
3. Requesting time off should be conducted according to the affiliated clinical site policies. If time requested is greater than one (1) week, written request and approval must be given by the Coordinator of Clinical Education.
4. Clinical experiences will require on average 15-17 hours per week over 10 clinical rotations.
 - a. A maximum of 25 clinical hours per week during the academic year.
5. Clinical experiences will require time commitment outside the normal undergraduate academic calendar (e.g. time spent in August, December, and May).
 - a. A maximum of 50 clinical hours per week during non-academic (vacation) time.
6. Clinical experiences may require travel and use of a personal vehicle and proper insurance.
7. Maintain patient confidentiality and athlete privacy policy.
8. Maintain annual CPR for the Professional Rescuer certification.
9. Complete annual OSHA and Blood Borne Pathogen training.
10. Follow Communicable Disease Policy in the event of contracting an infectious disease.
11. Demonstrate the ability to meet the Technical Standards for Admission and continued participation in the ATEP.
12. Adhere to the Direct Supervision Policy as stated in the ATEP Handbook.
13. Complete a clinical field experience (clinical rotation) in each of the following categories: upper extremity, lower extremity, equipment intensive, general medical, athletic institution, and rehabilitative services.
 - a. Complete 50 clinical credits for Level I-III students of clinical field experience under the direct supervision of an approved clinical instructor (AT 242, 340, 342, 440, 442).
 - b. Submit electronic 2-Week Evaluation and clinical credit/hour verification form via email within 1 week of completion to ACI and Coordinator of Clinical Education.

- c. Submit a Clinical Experience Contract for each clinical rotation.
 - d. Evaluate the clinical field experience through the ATS Self-Evaluation and ACI & Setting Evaluation.
14. Complete all pre-athletic training, Level I, II, and III psychomotor competencies and clinical proficiencies (scenario challenge). Completion of the course work, psychomotor competencies and clinical proficiencies demonstrates basic competence required of an entry-level athletic trainer preparing the ATS to sit for the BOC Inc. examination.

_____ (*initials*) I am aware and plan to complete all of the following APU Graduation requirements and expectations:

- 1. Completion of all General Studies requirements (see current undergraduate catalog)
- 2. Completion of all Athletic Training Major course work
- 3. Completion of a minimum of 126 units and maintain minimum cumulative GPA
- 4. Completion of all chapel and student ministry requirements (120 credits)
- 5. Adhere to all APU Student Handbook and Campus Policies

_____ (*initials*) I am aware and knowledgeable regarding the contents of the following resources:

- 1. Current APU ATEP Handbook
- 2. Current APU ATR Manual of Policies and Procedures
- 3. Current affiliated clinical site policies and procedures
- 4. Current APU Undergraduate Catalog
- 5. Current APU Student Handbook and Campus Policies
- 6. NATA Code of Ethics
- 7. BOC Inc. Standards of Professional Practice

Failure to comply with these statements may result in disciplinary action (See ATEP Handbook).

Student's Signature

Date

Student's Name (print)

Student ID



CLINICAL PROFICIENCY SCENARIO CHALLENGE

- | |
|------------------------------------------------------------------------------|
| <input type="checkbox"/> mock case
<input type="checkbox"/> clinical case |
|------------------------------------------------------------------------------|

ATS _____

Proficiency Group _____

Level _____

TTxP (# of days) _____

Date _____

Today is day # _____

Subjective [describe the athlete’s history (Hx), chief complaint (c/c) or complains of (c/o), mechanism of injury (MOI), injury onset, and treatments attempted (Tx), limitations, prescriptions (Rx)]:

Objective [Measurements: point tenderness, swelling, ROM, strength testing, sensory, gait, balance, girth measurements, vital signs, reflexes, special test and functional test. Treatments given: type of exercise, manual therapy, gait training, (reps, sets, resistance, duration), balance, flexibility exercises, Cardiorespiratory ex., modalities (FITT) etc.]:

Assessment [include the actual injury (diagnosis and prognosis) or surgical procedure, problem list*, goals* and patient treatment compliance/tolerance. (* may be listed in P)]:

Plan [include any additions to program for next Tx time, treatments time/frequency/location, re-assessment plans, referrals, and HEP instructions.]:



**ATEP & BILL ITO
SCHOLARSHIP AWARDS APPLICATION**

Name of Applicant: _____ **Date:** _____

APU Student ID Number: _____

Current Address: _____ **Permanent Address:** _____

Email Address: _____ **Current Phone Number:** _____

Total Number of Course Units Completed Toward Graduation: _____
(Do not include any 0** number courses or repeated units.)

Grade Point Average: Overall _____ "AT" Major* _____

Clinical Evaluation Scores ("End-of Rotation Scores) for previous year:

Dates of Rotation	Supervisor	Score
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

NATA Membership Number _____

On a separate page, attach an essay describing your career goals in athletic training (500 words or less).

Athletic Training Education Scholarship - Application Criteria

1. Full-time, returning student in the Athletic Training Education Program
2. Senior status at time of receipt of award
3. Minimum ATEP GPA of 3.30 (*"AT" major – this information is found on Degree Works in the "Major in Athletic Training" heading)
4. Minimum overall GPA of 2.70 (also found on Degree Works)
5. Member of the National Athletic Trainers' Association
6. Submit "End-of-Rotation" Clinical Evaluation scores for the previous 4 clinical rotations
7. Submit essay describing career goals in athletic training (500 words or less)
8. Submit all materials to the Program Director on or before the **first Monday in April**

