# Table of Contents

AT PROGRAM GUIDELINES MANUAL ACKNOWLEDGEMENT ........................................ 4  
UNIVERSITY OF MIAMI NON-DISCRIMINATORY STATEMENT .................................. 5  
ATHLETIC TRAINING PROGRAM OVERVIEW ......................................................... 6  
MISSION STATEMENT ............................................................................................... 7  
GOALS AND OBJECTIVES ...................................................................................... 7  
CLINICAL EDUCATION ............................................................................................ 8  
RETENTION POLICY ............................................................................................... 9  
ACADEMIC PROBATION/DISCIPLINARY GUIDELINES .............................................. 11  
STUDENT GRIEVANCES ......................................................................................... 12  
ACADEMIC TROUBLE SHOOTERS ......................................................................... 13  
ADMINISTRATIVE TROUBLESHOOTERS ................................................................ 14  
WITHDRAWAL FROM THE UNIVERSITY ................................................................. 16  
GUIDELINES FOR TRANSFER STUDENTS ............................................................... 17  
ATHLETIC TRAINING CURRICULUM .................................................................... 18  
SAMPLE COURSE SEQUENCE .............................................................................. 20  
ELECTIVES ........................................................................................................... 21  
ADDITIONAL REQUIREMENTS ............................................................................. 21  
COURSE DESCRIPTIONS ...................................................................................... 22  
TECHNICAL STANDARDS FORM ........................................................................... 27  
2019-2020 COST OF ATTENDANCE ..................................................................... 29  
  2019- 2020 Tuition and Fees............................................................................. 29  
Additional Fees for ATS: AT Program Fees ............................................................ 30  
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS ......................................... 31  
NPI NUMBERS ....................................................................................................... 31  
CLINICAL EDUCATION OVERVIEW .................................................................. 32  
CLINICAL EDUCATION ROTATIONS ..................................................................... 33  
TRANSPORTATION TO CLINICAL SITES ............................................................ 33  
DIRECT SUPERVISION .......................................................................................... 34
CINICALAL EDUCATION HOURS .......................................................................................... 35
CLINICAL EDUCATION GUIDELINES ........................................................................... 36
CLINICAL EDUCATION ROTATION ATTENDANCE POLICY ........................................ 37
ABSENCE REQUEST GUIDELINES ................................................................................... 38
PUNCTUALITY GUIDELINES .......................................................................................... 38
ATHLETIC PARTICIPATION GUIDELINES ..................................................................... 39
STUDYING ABROAD/EXTENDED ABSENCE GUIDELINES ........................................... 39
UNIVERSITY OF MIAMI STUDENT EMPLOYMENT GUIDELINES ................................ 40
CLINICAL EDUCATION EVALUATIONS ....................................................................... 41
COMPETENCIES & CLINICAL INTEGRATIVE PROFICIENCIES .................................... 43
HEALTH REQUIREMENTS ............................................................................................... 47
HEALTHCARE INSURANCE GUIDELINES ..................................................................... 48
IMMUNIZATION REQUIREMENTS .................................................................................... 49
VACCINATION INFORMATION ....................................................................................... 50
Vaccination Costs ........................................................................................................... 52
UNIVERSITY OF MIAMI HEALTHCARE GUIDELINES ................................................... 53
EMERGENCY ACTION PLANS ........................................................................................ 55
CPR & AUTOMATED EXTERNAL DEFIBRILLATION TRAINING .................................... 56
BLOOD BORNE PATHOGEN TRAINING .......................................................................... 57
UNIVERSAL PRECAUTIONS ........................................................................................... 58
ACTIVE COMMUNICABLE DISEASES GUIDELINES ....................................................... 59
LIABILITY INSURANCE .................................................................................................... 60
FLORIDA DEPARTMENT OF HEALTH REGULATION ..................................................... 61
NATA Code of Ethics ....................................................................................................... 63
CLASSROOM DECORUM ................................................................................................. 65
UNSAFE ATHLETIC TRAINING PRACTICE GUIDELINES ............................................. 66
SANCTIONS IMPOSED FOR UNSAFE ATHLETIC TRAINING PRACTICE ....................... 68
SANCTIONS IMPOSED FOR UNSAFE ATHLETIC TRAINING PRACTICE GUIDELINES ACKNOWLEDGEMENT ................................................................. 69
SEXUAL HARASSMENT GUIDELINES ............................................................................. 70
ALCOHOL, DRUGS AND TOBACCO GUIDELINES ........................................................ 71
CONFIDENTIALITY GUIDELINES.................................................................72
HIPAA PRIVACY & SECURITY AWARENESS TRAINING.........................72
DRESS CODE GUIDELINES ........................................................................74
  PERSONAL HYGIENE GUIDELINES: ...............................................75
  UNIVERSITY DRESS STANDARDS ....................................................75
APPENDIX .................................................................................................76
ATHLETIC TRAINING STUDENTS INFORMATION SHEET ......................77
AT PROGRAM ADVISOR CHECKLIST ....................................................78
SANCTIONS IMPOSED FOR UNSAFE ATHLETIC TRAINING PRACTICE79
TECHNICAL STANDARDS FORM ..............................................................80
MEDICAL HISTORY ................................................................................82
PHYSICAL EXAMINATION FORM ........................................................87
SEXUAL HARASSMENT POLICY SIGNATURE FORM ...............................88
CONFIDENTIALITY GUIDELINES SIGNATURE FORM .............................89
RELEASE OF INFORMATION FOR THE SITE VISIT ...............................90
CLINICAL EDUCATION GUIDELINES ....................................................91
ORTHO OBSERVATION & INTERACTIONS FORM ...............................92
NON-ORTHOPEDIC INTERACTION FORM ..........................................93
ORTHOPEDIC EVALUATION/CONDITION PRESENTATION ................94
NON-ORTHO EVALUATION/CONDITION PRESENTATION ..................95

BEYOND PAGE 95 TO THE END OF THE MANUAL, PAGES ARE UNNUMBERED

FORMS INCLUDE:

  • CLINICAL EVALUATION FORMS
  • CLINICAL PROFICIENCY FORMS
  • CIP FORMS
  • HOUR LOGS
  • MISC. FORMS
I, ____________________________________________, have read and understand the Athletic Training Program/ Department of Athletic Training Guidelines Manual. I agree to abide by all of the guidelines stated therein during my matriculation through the Athletic Training Program. If I fail to adhere to guidelines set forth in this manual, I am aware that I may be disciplined in accordance with the School of Education and Human Development and University of Miami policies.

_________________________________________________________
Student Signature                     Date
UNIVERSITY OF MIAMI NON-DISCRIMINATORY STATEMENT

It is the policy of the University of Miami that no person within the jurisdiction thereof shall, on the basis of race, religion, color, sex, age, disability, sexual orientation, gender identity or expression, veteran status, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination or harassment (including all forms of sexual harassment and sexual violence) under any program or activity of the University, regardless of whether such program or activity occurs on-campus or off-campus.
ATHLETIC TRAINING PROGRAM OVERVIEW

Athletic training encompasses the prevention, diagnosis and intervention of emergency, acute and chronic medical conditions involving impairment, functional limitations and disabilities. Athletic training is recognized by the American Medical Association (AMA) as a healthcare profession. Specifically, the certified athletic trainer has demonstrated knowledge and skill in five practice domains. Thus, the overall objectives of the AT Program are to educate students in the following Athletic Training practice domains:

1. **Injury/Illness Prevention and Wellness Protection** – Students identify injury, illness, and risk factors associated with participation in sport and implement all components of a comprehensive injury prevention program.

2. **Clinical Evaluation and Diagnosis** – Students conduct a thorough initial clinical evaluation of injuries and illnesses commonly sustained by the patient and formulate an impression of the injury and or illness for the primary purposes of administering first aid or making appropriate referrals to physicians for diagnosis and medical treatment.

3. **Immediate and Emergency Care** – Students provide appropriate first aid and emergency care for acute injuries according to accepted standards and refers injured or all participants to appropriate personnel for evaluation, diagnosis and follow up care.

4. **Treatment and Rehabilitation** – Students plan and implement a comprehensive rehabilitation and or reconditioning program for injuries and illnesses sustained by the patient.

5. **Organizational and Professional Health and Well-being** – Students plan, coordinate and supervise all administrative components of an athletic training program and address legal issues pertaining to the Athletic Training profession.
MISSION STATEMENT

Athletic training encompasses the prevention, diagnosis and intervention of emergency, acute and chronic medical conditions involving impairment, functional limitations and disabilities. The University of Miami’s Athletic Training Program strives to provide high quality undergraduate education while instilling the knowledge and skills essential for a health care provider. The mission of the Athletic Training Program is to promote Athletic Training knowledge, critical thinking skills, and evidence based practice to prepare our graduates to work in a variety of settings and to be productive members of the profession.

GOALS AND OBJECTIVES

♦ To develop competent athletic training students who qualify to sit for the Board of Certification (BOC) exam.
♦ To teach ethical reasoning abilities and interpersonal skills to students that will allow them to work with the physically active population.
♦ To teach the basic knowledge required to be successful in the field of athletic training through didactic and clinical course work.
♦ To encourage students to assume a leadership role in their professional careers.
♦ To create a positive and stimulating learning environment in which students will receive a high quality of education in both the didactic and clinical components of their course work.
♦ To comply with the educational standards set by the National Athletic Trainers’ Association and their accrediting bodies.
♦ To comply with the professional standards set by state law and the National Athletic Trainers’ Association.
♦ To involve students in the profession of Athletic Training by assisting them in attending national, district, and state conventions and meetings.
♦ To assist in the development of the student into a professional that is a productive member of the Athletic Training field.
CLINICAL EDUCATION

The students will receive clinical experiences at local colleges, high schools, and sports medicine clinics. Attempts will be made to affiliate with professional teams, performing art organizations and with other special events in the community. The hours gained during the clinical education rotations will count towards the 1000 total hours necessary to fulfill course requirements for graduation. In all clinical education rotations, students will be supervised by a certified and state licensed Athletic Trainer or an approved allied health care professional whom is a Preceptor associated with the University’s Athletic Training Program. The majority of the clinical education hours obtained by the Athletic Training Student will occur between the hours of 6:00am and 7:00 p.m., Monday through Friday. However, clinical education rotations also include completing clinical education during Summer, Fall and Spring Breaks, Saturdays and Sundays, and may traveling with the supervision of a preceptor.
RETENTION POLICY

Once admitted into the University, students who declare Athletic Training as their major will be designated as Pre-Athletic Training students. Students will be required to follow the course sequence form for their freshman and sophomore years. Following the successful completion of the retention process in the spring of the sophomore year, students will be formally admitted into the clinical portion of the Athletic Training Program. At this time, students will be designated as Athletic Training majors (ATHT). More information about this process will be discussed when the student enrolls in KIN 140 and again in KIN 210.

Retention Requirements:

♦ Completion of KIN 140, 141, 145, 202, 210, 230, 232, 235, 345, and 234 is required. A grade of “B” (3.0) or better in KIN 140, 141, 145, and 210 is required.

♦ Students starting the program as true freshman should take KIN 184 and KIN 212 during their freshman year. Students starting the major after the freshman year must take KIN 184 and KIN 212 during the course of the program.

♦ A cumulative grade point average of 2.5 or better and an Athletic Training major GPA of 3.0 or better

♦ Submission of a written essay of career goals and objectives to the Program Director

♦ Interview with the Retention Committee (Program Director, Clinical Education Coordinator, Head Athletic Trainer, Department Chair, and an Assistant Athletic Trainer)

♦ Two letters of recommendation from faculty, staff, or professionals outside of the AT Program faculty

RETENTION EVALUATION CRITERIA

(50 point total = 100%)

• Overall GPA = 15 points (30%)
  o GPA points will be as follows: 4.0 – 3.5 = 15 – 13 pts., 3.4 – 3.0 = 12 – 10 pts., 2.9 – 2.5 = 9 – 7 pts.  
  o A cumulative grade point average of 2.5 or better and an Athletic Training major GPA of 3.0 or better is required.
  o A letter grade of “B” (3.0) or better in KIN 140, 141, 145, and 210 is required
  o Completion of the following courses with a grade point average of 3.0 or better is required: *KIN 140, *KIN 141, *KIN 145, *KIN 202, *KIN 210, KIN 230, KIN 234, KIN 235, and KIN 34.

• Completion of 85 clinical observation hours = 10 points (20%)

• Interview = 15 points (30%)
  o Interview will take place once each year around April 15th with the members of the Retention Committee.

• Recommendation Letters= 10 points (20%)
Each recommendation will be scored on a scale of 1-5 points with 5 being the highest score possible. The sum of the two recommendations will be recorded, with 10 being the maximum score possible.

The totals from each of the retention criteria areas are tabulated and reviewed for student retention. Those students that achieve a score of 80% or higher on the Retention Criteria will remain in good standing within the Athletic Training Program.

Once the retention process has been completed during the spring semester of the sophomore year, the student will be notified approximately late-May of the decision of their retention status in the Athletic Training Program. Students who are not successful in meeting the retention criteria to the program will not be permitted to take athletic training clinical courses until the retention criteria has been met. Students may be allowed to continue on a probationary basis at the discretion of the Program Director and Retention Committee. If after the second attempt, the student does not meet the retention criteria to the program, they will be strongly encouraged to seek academic options other than Athletic Training.
ACADEMIC PROBATION/DISCIPLINARY GUIDELINES

Students enrolled in the Athletic Training Program must maintain a university cumulative grade point average \(2.5\) or higher on a 4.0 scale. Athletic Training is an allied health care profession and academic performance should be a priority in the AT Program. The Athletic Training Student (ATS) must maintain a major grade point average of \(3.0\) or higher on a 4.0 scale in the athletic training major.

A student may repeat a course, but the repetition will not eliminate the previous grade from the record. A course may be repeated only once unless written authorization is provided by the chair of the department in which the course is offered or, in the case of an undepartmentalized school, by the dean. Athletic Training courses in which the ATS earns a grade of \(\text{C-} (1.7)\) or below must retake that course. The initial grade and the repeat grade are included in the computation of the cumulative grade point average for both the university and the AT Program. If the initial grade was a \(\text{C-}(1.7)\) and the repeat grade is passing, the number of credits required for graduation will be increased by the number of credits repeated.

Athletic Training Students that fail to meet these standards (3.0 major GPA and a C or higher in major classes) will be placed on academic probation for one semester during which time the clinical hours will be restricted to those required by athletic training courses the ATS is currently enrolled in. A student that is placed on probation will be given a verbal and written warning, including a possible disciplinary action, if not corrected. The ATS must also meet with the Program Director on a regular basis to ensure academic improvement. The probationary student should continue to see the Program Director periodically throughout the semester for study hall assignments, tutoring services and other counseling. End of the semester grade reports will be collected and sent directly to the Program Director for all students within the AT Program.

If a student is placed on academic probation for a total of 2 semesters, either consecutively or inconsecutively, he/she is then subject to removal from the AT Program. The student will meet with the Program Director of the AT Program and will be given a written dismissal verification notice. A copy will be filed in the student’s academic file maintained by the Program Director. The student does have the right to follow a formal appeals process and seek options other than athletic training or transfer to another institution. Any student in the AT Program has the right to appeal or petition any decision made by the AT Program Action Committee. The appeals process is as follows. The student will appeal in writing to the Program Director. If a student is not satisfied, he/she can appeal to the AT Program Retention Committee. The student may then appeal to the Chair of the Kinesiology and Sport Sciences Department and finally to the Academic and Student Services Committee in the School of Education and Human Development, and the University Ombudsperson.
STUDENT GRIEVANCES

Troubleshooters

Troubleshooters are faculty members and administrators who serve as a resource for students seeking assistance with academic and non-academic matters. When regular channels have failed to bring resolution to your problem and after you have spoken to the appropriate Troubleshooter, you should contact the Ombudsperson.

The troubleshooter for the School of Education and Human Development is:

Gina Astorini, Tel: 305-284-3826, E-mail: gfastorini@miami.edu, Location: 312D Merrick.
Academic troubleshooters can be found at https://ombuds.studentaffairs.miami.edu/who-can-help/academic-troubleshooters/index.html

Ombudsperson

An Ombudsperson interprets University policy for students and make recommendations to the central administration when policy changes are needed. The University of Miami has two Ombudspersons for students. The Academic Ombudsperson works most closely with issues with faculty, coursework, grade appeals, etc. The Administrative Ombudsperson works most closely with administrative issues such as financial registration, access concerns, and university polices and procedures. Ombudspersons connect students to faculty and administrators who will listen, answer questions, interpret policies/procedures and provide guidance on the appropriate steps to consider for a resolution. The Ombudspersons seek to resolve matters informally before they become matters in a formal grievance-appeal proceeding and works with students in establishing next steps to assist in their success at the University. However, if a formal grievance-appeal is most appropriate, they can provide guidance on the process.

University Troubleshooters

University Troubleshooters are faculty members and administrators who serve as a resource for students seeking assistance. They represent in a wide range of campus departments, who assist students with academic and administrative related matters. If a student has spoken to the appropriate University Troubleshooter and have not brought resolution to a student’s concern, students should contact the Ombudsperson.

For more information, visit miami.edu/ombudsperson, call 305-284-4922, email ombudsperson@miami.edu or visit Ashe building 244. Http://www.miami.edu/sa/index.php/ombudsperson/case_submission/
ACADEMIC TROUBLE SHOOTERS

Academic Troubleshooters serve as problem solvers within their specific academic area. When you have attempted to already resolve your issue with your advisor or faculty member, these are the next people to reach out to. For non-academic issues, see Administrative Troubleshooters.

Specific to Athletic Training Students

School of Education and Human Development
Gina Astorini
305-284-3826
gfastorini@miami.edu
Merrick 312D

Academic Ombudsperson
Michelle Gonzalez Maldonado
305-284-9782
mmaldonado@miami.edu
Pentland House
1238 Dickinson Drive #130

For a full list please visit: https://ombuds.studentaffairs.miami.edu/who-can-help/academic-troubleshooters/index.html
## ADMINISTRATIVE TROUBLESHOOTERS

Troubleshooters are defined individuals in areas who can help you find a resolution to a concern you are facing. These are folks to contact when you have already taken steps to resolve your concern.

<table>
<thead>
<tr>
<th>Area</th>
<th>Troubleshooter</th>
<th>Phone</th>
<th>Email</th>
<th>Office/Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admission - Undergraduate</td>
<td>Nate Crozier</td>
<td>305-284-4323</td>
<td><a href="mailto:nac132@miami.edu">nac132@miami.edu</a></td>
<td>University Center 1210</td>
</tr>
<tr>
<td>Cammer Center For Academic Resources</td>
<td>Mykel Mangrum Billups</td>
<td>305-284-4790</td>
<td><a href="mailto:m.mangrum@miami.edu">m.mangrum@miami.edu</a></td>
<td>University Center N-2400</td>
</tr>
<tr>
<td>Cane Success Center</td>
<td>Darby Plummer</td>
<td>305-284-1807</td>
<td><a href="mailto:darby@miami.edu">darby@miami.edu</a></td>
<td>University Center 2275</td>
</tr>
<tr>
<td>Counseling Center</td>
<td>Kirt McClellan</td>
<td>305-284-5511</td>
<td><a href="mailto:k.mcclellan@miami.edu">k.mcclellan@miami.edu</a></td>
<td>University Center 2275</td>
</tr>
<tr>
<td>Counseling Impact</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dining Services</td>
<td>Marco Gonzalez</td>
<td>305-284-1545</td>
<td><a href="mailto:mgonzalez@miami.edu">mgonzalez@miami.edu</a></td>
<td>University Center 1620</td>
</tr>
<tr>
<td>Discipline/Honor Code</td>
<td>Ryan Holmes</td>
<td>305-284-5353</td>
<td><a href="mailto:ryanholmes@miami.edu">ryanholmes@miami.edu</a></td>
<td>University Center 2250</td>
</tr>
<tr>
<td>Financial Assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internatinoal Student and Scholar Services</td>
<td>Sevgi Ural</td>
<td>305-284-2928</td>
<td><a href="mailto:s.ural@miami.edu">s.ural@miami.edu</a></td>
<td>University Center 2275</td>
</tr>
<tr>
<td>Multicultural Student Affairs</td>
<td>Renee Dickens Callan</td>
<td>305-284-2855</td>
<td><a href="mailto:rcallan@miami.edu">rcallan@miami.edu</a></td>
<td>University Center 2300F</td>
</tr>
<tr>
<td>Office of the Registrar</td>
<td>Marilin Cabassi</td>
<td>305-284-9121</td>
<td><a href="mailto:mcabassi@miami.edu">mcabassi@miami.edu</a></td>
<td>1306 Stanford Drive, 1230</td>
</tr>
<tr>
<td>Orientation and Commuter Student Involvement</td>
<td>Michael Baumhardt</td>
<td>305-284-5646</td>
<td><a href="mailto:m.baumhardt@miami.edu">m.baumhardt@miami.edu</a></td>
<td>Shalala Student Center, Suite 203</td>
</tr>
<tr>
<td>Parking</td>
<td>Richard Sobaram</td>
<td>305-284-3081</td>
<td><a href="mailto:rsobaram@miami.edu">rsobaram@miami.edu</a></td>
<td>McKnight 107</td>
</tr>
<tr>
<td></td>
<td>Nick Poynter</td>
<td>305-284-5021</td>
<td><a href="mailto:npoynter@miami.edu">npoynter@miami.edu</a></td>
<td>McKnight 104</td>
</tr>
</tbody>
</table>
Housing Assignments
Kathleen Batson
305-284-4505
kbatson@miami.edu
Eaton Residential College 153

Residential Life
Ivan Ceballos
305-284-4505
i.ceballos@miami.edu
Eaton Residential College 153

Student Account Services
Milagros Benitez
305-284-5684
mbenitez@miami.edu
Ashe 158

Student Health Service
Linda Walker
305-284-5921

lwalker@miami.edu
Lennar Foundation Medical Center 128

University of Miami Police
Captain William Gerlach
305-284-1629
wgerlach@miami.edu
Flipse 114

University Ombudsperson
Jennifer Rau
305-284-4922
jrau@miami.edu
Ashe 244

Assistant Director of Divisional Initiatives & Student Advocacy
Heather Stevens
305-284-5221
hstevens@miami.edu
Shalala Student Center 210A
WITHDRAWAL FROM THE UNIVERSITY

Undergraduate students wishing to officially withdraw from the University of Miami should note:

To officially withdraw from the University of Miami, undergraduate students are required to meet with an Advisor in the 'Cane Success Center. Walk-in appointments are available Monday - Friday from 9:00 AM – 2:00 PM or by appointment by calling (305) 284-4500 or emailing success@miami.edu. The 'Cane Success Center is located on the 2nd Floor of the University Center, Suite 2275 (also known as "The Nest").

Withdrawing Student Checklist - For more details about the withdrawal process and for helpful hints on making a smooth transition out of the University, visit the Undergraduate Withdrawing Student Checklist page: https://success.miami.edu/_assets/pdf/csc-withdrawl-checklist.pdf

For students who are no longer on campus – If you have already left the University but did not complete the withdrawal process before your departure, please call or email the ‘Cane Success Center at (305) 284-4500 or success@miami.edu to begin the withdrawal process. Your withdrawal will not be finalized until an Exit Interview is completed.

Withdrawal Date Appeal Form – If you were unable to attend classes due to a serious accident or illness, and this prevented you from notifying the University of your withdrawal in a timely manner, a Withdrawal Date Appeal Form can be submitted for consideration by an Appeals Committee. Appeals are submitted AFTER completing the official withdrawal process above and must include supporting documentation as to what prevented a timely notification. All appeals must be submitted within 30 calendar days of the official withdrawal date established with the ‘Cane Success Center or if the appeal is being submitted for a semester that has already completed, it must be submitted within 30 calendar days of the last day of the end of the semester in question. Appeals should be submitted via email to registrar@miami.edu or by mail.

If you have a Merit-based Scholarship and want to return to UM – If you withdraw from the University but choose to return within one calendar year, and you have continued to meet the requirements of your scholarship, then your merit scholarship will be waiting for you here. Contact the ‘Cane Success Center to begin the process of readmission. *Frost School of Music students will need to re-audition after one semester away from the University.

Military Withdrawal – If you need to withdraw from the University as a result of being called to active duty in the United States military, please review the military withdrawal policy by downloading the Military Withdrawal Information PDF (see website above).
GUIDELINES FOR TRANSFER STUDENTS

Transfer students are welcome at the University of Miami under the following guidelines:

- All required core athletic training classes must be taken at the University of Miami.
- All students will be required to complete a minimum of 1000 clinical hours in conjunction with four semesters of KIN Athletic Training Labs at the University of Miami.
- All students will be required to meet the Retention Criteria of the program.
- Transfer students must begin the Athletic Training major course sequence during the fall semester.
- There must be sufficient evidence and documentation for any exceptions to the above guidelines to ensure instruction and evaluation of all competencies and proper sequencing of classes and learning over time.
## ATHLETIC TRAINING CURRICULUM

<table>
<thead>
<tr>
<th>Major Requirements 67 Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>KIN 140 Introduction to Athletic Training</td>
</tr>
<tr>
<td>KIN 141 Introduction to Athletic Training Lab</td>
</tr>
<tr>
<td>KIN 145 Responding to Emergencies</td>
</tr>
<tr>
<td>KIN 184 Athletic and Sport Injuries</td>
</tr>
<tr>
<td>KIN 202 Applied Nutrition for Health and Performance</td>
</tr>
<tr>
<td>KIN 210 Foundations in Athletic Training</td>
</tr>
<tr>
<td>KIN 212 Elements of Sports Psychology</td>
</tr>
<tr>
<td>KIN 221 Exercise Physiology: Biochemistry and Skeletal Muscle</td>
</tr>
<tr>
<td>KIN 230 Medical Terminology and Documentation</td>
</tr>
<tr>
<td>KIN 232 Basic Human Physiology</td>
</tr>
<tr>
<td>KIN 234 Functional Human Anatomy</td>
</tr>
<tr>
<td>KIN 235 Personal and Community Health</td>
</tr>
<tr>
<td>KIN 250 Orthopedic Assessment: Lower Extremity</td>
</tr>
<tr>
<td>KIN 251 Orthopedic Assessment: Lower Extremity Lab</td>
</tr>
<tr>
<td>KIN 260 Orthopedic Assessment: Upper Extremity</td>
</tr>
<tr>
<td>KIN 261 Orthopedic Assessment: Upper Extremity Lab</td>
</tr>
<tr>
<td>KIN 264 General Medical Conditions Evaluation</td>
</tr>
<tr>
<td>KIN 345 Kinesiology</td>
</tr>
<tr>
<td>KIN 365 Exercise Programming</td>
</tr>
<tr>
<td>KIN 443 Clinical Athletic Training Lab I</td>
</tr>
<tr>
<td>KIN 444 Clinical Athletic Training Lab II</td>
</tr>
<tr>
<td>KIN 455 Clinical Athletic Training Lab III</td>
</tr>
<tr>
<td>KIN 456 Clinical Athletic Training Lab IV</td>
</tr>
<tr>
<td>KIN 461 Therapeutic Modalities</td>
</tr>
<tr>
<td>KIN 462 Therapeutic Modalities Laboratory</td>
</tr>
<tr>
<td>KIN 463 Therapeutic Rehabilitation</td>
</tr>
<tr>
<td>KIN 464 Therapeutic Rehabilitation Laboratory</td>
</tr>
<tr>
<td>KIN 465 Pharmacology</td>
</tr>
<tr>
<td>KIN 470 Administrative Aspects of Athletic Training</td>
</tr>
<tr>
<td>Course</td>
</tr>
<tr>
<td>----------</td>
</tr>
<tr>
<td>KIN 476</td>
</tr>
<tr>
<td>KIN 488</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Calculus</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MTH 161</td>
<td>Calculus I (or equivalent)</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statistics and Research Methods</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>EPS 351</td>
<td>Introduction to Statistics and Research Design</td>
<td>3</td>
</tr>
<tr>
<td>KIN 415</td>
<td>Evidence Based Sports Medicine</td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Required Courses</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Cognate Courses</td>
<td></td>
<td>18</td>
</tr>
<tr>
<td>ENG 105</td>
<td>English Composition I</td>
<td>3</td>
</tr>
<tr>
<td>ENG 106</td>
<td>English Composition II</td>
<td>3</td>
</tr>
<tr>
<td>Electives</td>
<td></td>
<td>13</td>
</tr>
<tr>
<td>MTH (per placement) or Electives</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td><strong>Total Credit Hours</strong></td>
<td></td>
<td><strong>121</strong></td>
</tr>
</tbody>
</table>

* Students in the Athletic Training major are not required to declare a minor.
# SAMPLE COURSE SEQUENCE

## Freshman Year

<table>
<thead>
<tr>
<th>FALL SEMESTER</th>
<th>Cr.</th>
<th>Clinical</th>
<th>SPRING SEMESTER</th>
<th>Cr.</th>
<th>Clinical</th>
</tr>
</thead>
<tbody>
<tr>
<td>*ENG 105 Composition I</td>
<td>3</td>
<td></td>
<td>*ENG 106 Composition II</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>*KIN 184 Athletic and Sport Injuries</td>
<td>3</td>
<td></td>
<td>* KIN 212 Elements of Sports Psychology</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

Total 15 15

## Sophomore Year

<table>
<thead>
<tr>
<th>FALL SEMESTER</th>
<th>Cr.</th>
<th>Clinical</th>
<th>SPRING SEMESTER</th>
<th>Cr.</th>
<th>Clinical</th>
</tr>
</thead>
<tbody>
<tr>
<td>***MTH 161 Calculus I</td>
<td>4</td>
<td></td>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KIN 140 Introduction to Athletic Training</td>
<td>2</td>
<td></td>
<td>KIN 202 Appl Nutrition for Health &amp; Performance</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KIN 141 Introduction to Athletic Training Lab</td>
<td>1</td>
<td>35 hrs</td>
<td>KIN 210 Foundations in Athletic Training</td>
<td>2</td>
<td>50 hrs.</td>
</tr>
<tr>
<td>KIN 145 Responding to Emergencies</td>
<td>2</td>
<td></td>
<td>KIN 230 Medical Terminology and Documentation</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>*KIN 232 Basic Human Physiology</td>
<td>3</td>
<td></td>
<td>KIN 235 Personal and Community Health</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KIN 234 Functional Human Anatomy</td>
<td>3</td>
<td></td>
<td>*KIN 345 Kinesiology</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

Total 15 35 hrs. 15 50 hrs.

## Junior Year

<table>
<thead>
<tr>
<th>FALL SEMESTER</th>
<th>Cr.</th>
<th>Clinical</th>
<th>SPRING SEMESTER</th>
<th>Cr.</th>
<th>Clinical</th>
</tr>
</thead>
<tbody>
<tr>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KIN 250 Orthopedic Assessment: Lower Extremity</td>
<td>3</td>
<td></td>
<td>*KIN 221 Ex Phys: Bioenergetics &amp; Skeletal Muscle</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KIN 251 Orthopedic Assessment: Lower Lab</td>
<td>1</td>
<td>100 hrs.</td>
<td>KIN 260 Orthopedic Assessment: Upper Extremity</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KIN 443 Clinical Athletic Training Lab I</td>
<td>2</td>
<td>150 hrs.</td>
<td>KIN 261 Orthopedic Assessment: Upper Lab</td>
<td>1</td>
<td>100 hrs.</td>
</tr>
<tr>
<td>KIN 465 Pharmacology</td>
<td>1</td>
<td></td>
<td>KIN 264 General Medical Conditions Evaluation</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>**KIN 461 Therapeutic Modalities</td>
<td>2</td>
<td></td>
<td>KIN 365 Exercise Programming</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>**KIN 462 Therapeutic Modalities Lab</td>
<td>1</td>
<td>50 hrs.</td>
<td>KIN 444 Clinical Athletic Training Lab II</td>
<td>2</td>
<td>150 hrs.</td>
</tr>
</tbody>
</table>

Total 13 300 hrs. 17 250 hrs.

## Senior Year

<table>
<thead>
<tr>
<th>FALL SEMESTER</th>
<th>Cr.</th>
<th>Clinical</th>
<th>SPRING SEMESTER</th>
<th>Cr.</th>
<th>Clinical</th>
</tr>
</thead>
<tbody>
<tr>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
<td>* General Education Requirement</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>***KIN 351 Introduction to Statistics</td>
<td>3</td>
<td></td>
<td>KIN 415 Evidence Based Sports Medicine</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KIN 455 Clinical Athletic Training Lab III</td>
<td>2</td>
<td>150 hrs.</td>
<td>* Electives (if applicable)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KIN 463 Therapeutic Rehabilitation</td>
<td>2</td>
<td></td>
<td>* Electives (if applicable)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>KIN 464 Therapeutic Rehabilitation Lab</td>
<td>1</td>
<td>100 hrs.</td>
<td>KIN 456 Clinical Athletic Training Lab IV</td>
<td>2</td>
<td>150 hrs.</td>
</tr>
<tr>
<td>KIN 470 Administrative Aspects of Ath Training</td>
<td>2</td>
<td></td>
<td>KIN 476 Seminar in Athletic Training</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>*KIN 488 Gross Anatomy</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total 16 250 hrs. 16 150 hrs.

Total=120 credits

No minor required
ELECTIVES

Electives may be chosen from any courses offered by the University. The student should consult an advisor before selecting elective courses. At least six credit hours must be at the 300 level or above.

ADDITIONAL REQUIREMENTS

Student must fulfill the University English, Writing, and Cognate Requirements

• Athletic Training Math Proficiency Requirements (Please see your advisor)
  • MTH 161, Calculus 1 (or equivalent)
  • EPS 351, Introduction to Statistics
  • KIN 415, Evidence Based Sports Medicine

Seniors are required to participate in the General Education Assessment prior to graduation as part of the SACS review process.

Athletic Training majors are not required to have a minor. Athletic Training majors are not allowed to minor in Sports Medicine.

Please meet with your advisor to obtain his/her approval signature and submit a copy of the signed Course Advising Plan to the Office of Student Services, MB 312, no later than the end of your first semester of enrollment.

This program of study and course advising plan is subject to change.
COURSE DESCRIPTIONS
(Does not include Math Proficiency Requirements)

KIN – 140 2 hrs. Introduction to Athletic Training
Introduction to the profession of athletic training. Introduction to Athletic Training with emphasis on study of the sports medicine team, legal concerns, nutrition, and pre-participation physicals. Course will discuss the basic principles of injury prevention including the role of conditioning, equipment, and protective padding. Emphasis will be familiarization with various community and university agencies, as well as the University of Miami athletic training staff, and policies and procedures used in the clinic/athletic facilities. Corequisite: KIN 141. Requisite: Athletic Training, Pre-Athletic Training, and Sophomore Status.

KIN – 141 1 hr. Introduction to Athletic Training Lab
Introduction to clinical athletic training for pre-athletic training major. Hands-on knowledge for the entry level athletic training student. Observation hours in the athletic training room will give the student the opportunity to use the knowledge, skills, and techniques learned in this course. The student must complete 35 clinical observation hours. There is a $65 lab fee for this class. Corequisite: KIN 140. Requisite: ATHT, PAT Majors only and a Sophomore Status.

KIN – 145 3 hrs. Responding to Emergencies
Students will become familiar with accident, injury, and illness situations, techniques for immediate first aid, and legal parameters involved when administering emergency care. There is a $45 lab fee for this class. Requisite: ATHT Majors only and Sophomore Status.

KIN – 184 3 hrs. Athletic and Sports Injuries
Students will become familiar with athletic injuries in sports that occur over the principal joints in the body and the inclusion of anatomical structures that are frequently damaged. Basic operational treatments and rehabilitation programs after surgery will be discussed.

KIN – 202 3 hrs. Applied Nutrition for Health and Performance
The study of nutrition, diet analysis, biochemical processes in energy metabolism, nutrition and health problems, and nutrition as it relates to physical performance. The class will have 3 sections: 1) nutritional links to chronic disease; 2) nutrition before, during and after exercise bout; and 3) nutritional supplements for health and performance.

KIN – 210 2 hrs. Foundations in Athletic Training
Students will be introduced to the study of etiology and mechanisms of injury, pathology, and recognition of clinical signs and symptoms of athletic injury. The student must complete 50 clinical observation hours, which are required for the retention process of the Athletic Training Program. Requisite: Sophomore Status or Higher.
KIN – 212  3 hrs.  Elements of Sports Psychology
Introduction to the field of sport and exercise psychology by examination of psychological theories and research related to sport and exercise behavior.

KIN – 221  3 hrs.  Exercise Physiology: Biochemistry & Skeletal Muscle
This course will offer an overview of the biochemistry pertaining to neuroendocrine responses, nutrition, and neuromuscular function; as well as the physiological and biochemical plasticity within skeletal muscle associated with various interventions, diseases, injuries, and aging. Majors must receive a grade of B- or higher.

KIN – 230  1 hr.  Medical Terminology and Documentation
Terminology, note writing, and documentation techniques in sports medicine. A treatment cycle model will be introduced.

KIN – 232  3 hrs.  Basic Human Physiology
This course presents a general overview of the major systems of the human organism with an examination of how they function in the human body. Majors must receive B- or higher.

KIN – 234  3 hrs.  Functional Human Anatomy
The study of human anatomy specifically for the sports medicine practitioner.

KIN – 235  3 hrs.  Personal and Community Health
Overview of current strategies and practices for healthy living, including health maintenance and disease prevention.

KIN – 250  3 hrs.  Orthopedic Assessment: Lower Extremity
Common types of orthopedic/sports dysfunctions to the lower extremity will be discussed. Injuries will be discussed from the following viewpoints: etiology and mechanism of injury, pathology, recognition and evaluation techniques, protocols, and prevention.

KIN – 251  1 hr.  Orthopedic Assessment: Lower Extremity Lab
Techniques used to evaluate orthopedic and sports injuries occurring to the lower extremity. The student must complete 100 clinical education hours. Clinical education hours will emphasize lower extremity orthopedic assessment, goniometry, manual muscle testing techniques, and gait evaluations.

KIN – 260  3 hrs.  Orthopedic Assessment: Upper Extremity
Common types of orthopedic/sports dysfunctions to the upper extremity will be discussed. Injuries will be discussed from the following viewpoints: etiology and mechanism of injury, pathology, recognition and evaluation techniques, protocols, and prevention.
KIN - 261 1 hr. Orthopedic Assessment: Upper Extremity Lab
Techniques used to evaluate orthopedic and sports injuries occurring to the upper extremity. The student must complete 100 clinical education hours. Clinical education hours will emphasize upper extremity orthopedic assessment, goniometry, and manual muscle testing techniques.
Corequisite: KIN 260.

KIN - 264 2 hr. General Medical Conditions Evaluation
This class is the study of the clinical signs and symptoms of General Medical conditions that will present to the Certified Athletic Trainer. Emphasis will be placed on the techniques and instrumentation used for performing appropriate evaluation procedures.

KIN – 345 3 hrs. Kinesiology
Structure and function of the skeletal, joint, and muscular systems, with emphasis on the mechanics of the movement of the human body and its relationship to sport and physical performance.

KIN – 365 3 hrs. Exercise Programming
This class is the study of the theory and principles behind the development of exercise programs. Students will learn how to accurately evaluate and develop individual exercise prescription based upon sound scientific research. Exercise prescriptions will be developed in accordance with the guidelines set forth by the National Strength and Conditioning Association and the American College of Sports Medicine. This course is a designated Upper Level Communication Requirement; Advanced written, digital and/or oral communication proficiencies will be emphasized in this course. Credit for ENG105 and ENG106 (or equivalent) is required for this course.

KIN – 443 2 hrs. Clinical Athletic Training Lab I
The application of athletic training practices in selected clinical education settings. The student must complete 150 hours of documented clinical education hours, which apply toward the graduation requirement of 1000 hours. Clinical education hours will emphasize emergency procedures, first aid, and protective equipment. Prerequisite: Successful completion of the retention process and formal admittance into the clinical portion of the Athletic Training Program. Students are required to return to campus for pre-season orientation prior to the start of the school year.
Requisite: ATHS Majors Only.

KIN – 444 2 hrs. Clinical Athletic Training Lab II
The application of athletic training practices in selected clinical and educational settings. The student must complete 150 hours of documented clinical education hours, which apply toward the graduation requirement of 1000 hours. Clinical education hours will emphasize general medical conditions, nutritional issues, psychosocial intervention, and injury prevention and risk management. Depending on the student’s clinical education rotation, students may be required to start their clinical education hours prior to the start of the semester.
Prerequisite: KIN 443.
KIN – 455 2 hrs. Clinical Athletic Training Lab III
The application of athletic training practices in selected clinical and educational settings. The student must complete 150 hours of documented clinical education hours, which apply toward graduation requirement of 1000 hours. Clinical education hours will emphasize acute care of injuries and illnesses, lower extremity orthopedic assessment, and risk management and injury prevention. Students are required to return to campus for pre-season orientation prior to the start of the school year.
Prerequisite: KIN 444.

KIN – 456 2 hrs. Clinical Athletic Training Lab IV
The application of athletic training practices in selected clinical and educational settings. The student must complete 150 hours of documented clinical education hours. Clinical education hours will emphasize upper extremity orthopedic assessment, conditioning and rehabilitation, and therapeutic modalities. Depending on the student’s clinical education rotation, students may be required to start their clinical education hours prior to the start of the semester.
Prerequisite: KIN 455.

KIN – 461 2 hrs. Therapeutic Modalities
Students will acquire the theoretical knowledge necessary for the clinical application of therapeutic modalities. Principles of electrophysics and biophysics, specific physiological effects and therapeutic indications and contraindications associated with cryotherapy, paraffin, ultrasound, electrotherapeutic and hydrotherapeutic modalities, intermittent compression, massage, and other contemporary modalities will be discussed.

KIN – 462 1 hr. Therapeutic Modalities Lab
This laboratory will help students apply the techniques and clinical skills related to the application of therapeutic modalities. Clinical education hours will give the student the opportunity to use the knowledge, skills, and techniques learned in this course. Students must complete 50 hours of documented clinical education hours.
Corequisite: KIN 461.

KIN – 463 2 hrs. Therapeutic Rehabilitation
Students will acquire the theoretical knowledge for the clinical application of a rehabilitation program, physical examination, principles of therapeutic exercise, open and closed chain exercise, muscle reeducation, and special therapeutic techniques such as aquatic therapy.

KIN – 464 1 hr. Therapeutic Rehabilitation Lab
This laboratory will place emphasis on the techniques and clinical skills relating to the rehabilitation of athletic injuries. Clinical education hours in a therapeutic rehabilitation facility will give the students the opportunity to use the knowledge, skills, and techniques learned in this course. The student must complete 100 hours of documented clinical education hours, which apply toward the clinical education requirement for graduation.
Corequisite: KIN 463.
KIN – 465  1 hrs. Pharmacology
Introduction to the basic principles of pharmaceutical intervention and the implications for rehabilitation as related to the Certified Athletic Trainer.
Requisite: ATHS Majors Only.

KIN – 470  2 hrs. Administrative Aspects of Athletic Training
Basic concepts of legal liability, budget, financial management, inventory control, facilities design and maintenance will be addressed. Additionally, the student will discuss the day to day supervision, scheduling and general administration of the athletic training facility.
Requisite: ATHS Majors Only.

KIN – 476  2 hrs. Seminar in Athletic Training
Topics in Athletic Training with discussions covering the NATA competencies and objectives in written and oral practical formats. Students will be required to register and take the BOC exam as a class requirement. Approx. cost $350.00

KIN – 488  3 hrs. Gross Anatomy
The essentials of Myology, Osteology, and Arthrology. Major nerves and arteries are also dissected. Many of the dissection areas are major injury sites in sports such as the knee, shoulder, elbow, neck and spinal areas. There is a laboratory fee of $100 required for this course.
Requisite: ATHS Majors Only.

Additional AT Program Fees
In addition to the noted BOC exam fee for KIN 476, laboratory fees for KIN 140, 145, and KIN 488, a $75 per semester administration fee is required of all Athletic Training Majors. Students may also incur cost for a physical exam, transportation to clinical education sites, and for background check, additional vaccines, and uniforms if required by the site. These costs may vary.
TECHNICAL STANDARDS FORM

Athletic Training education requires that the accumulation of scientific knowledge be accompanied by the simultaneous acquisition of skills and professional attitudes and behavior.

The University of Miami School of Education and Human Development, Department of Kinesiology & Sports Sciences, awards a Bachelor’s of Science Athletic Training degree to students who successfully complete the curriculum. Students are expected to acquire a broad base of knowledge and skills, and competencies of an entry-level Athletic Trainer as well as meet the expectations of the program’s accrediting agency, The Commission on Accreditation of Athletic Training Education (CAATE).

Bachelors of Science Athletic Training degree will be required to acquire the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care. In order to learn the variety of tasks needed to become proficient as an Athletic Trainer, the student must be able to perform the following tasks, which are all essential requirements of the program: observation, communication, motor, conceptual (integrative and quantitative), and behavioral/social.

Observation
The candidate must be able to observe demonstrations and experiments in basic and applied sciences, including, but not limited to human anatomy and physiology, neuroscience, as well as in didactic courses in Athletic Training theory and practice for normal and pathologic states. A candidate must be able to observe a patient accurately at a distance and close at hand. Observation requires the use of common sense, as well as the functional use of the senses of vision, audition, olfaction, and palpation.

Communication
A candidate must be able to elicit information from patients, describe the patient’s mood, activity and posture, and perceive and accurately report nonverbal communications. A candidate must be able to communicate effectively and sensitively with coaches, administrators, patients and their families. Communication includes not only oral, but also reading and writing. The candidate must be able to communicate effectively and efficiently with all members of the health care team in both immediate and recorded modes.

Motor
Candidates should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, manual positioning of body segments and other evaluative procedures. A candidate must be able to do basic screening and examinations (physiological measures such as BP, HR and respiration), diagnostic procedures (palpation, manual muscle testing, goniometry, ligament laxity testing, sensory evaluation, gait analysis, balance assessment), and review X-rays. A candidate must be able to lift an adequate amount of weight (approximately 50 pounds) in order to assess and lift a patient as necessary. A candidate must be able to execute motor movements reasonably required to provide general care and emergency treatment to patients. Examples of emergency treatment reasonably required of Athletic Training students are cardiopulmonary resuscitation, spine stabilization for head or neck injury and application of pressure to stop bleeding. Additionally, candidates must be able to perform debridement of wounds and other physical assessment maneuvers, where such actions require coordination of both gross and
fine muscular movements, equilibrium and functional use of the senses of touch and vision.

**Conceptual-Integrative and Quantitative Analysis**
These abilities include measurement, calculation, reasoning, analysis, synthesis, and retention of complex information. Problem solving, the critical skill demanded of Athletic Training practitioners, requires all of these intellectual abilities. In addition, the candidate should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.

**Behavioral/Social Attitudes**
Candidates must possess the emotional health required for full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to an evaluation, diagnosis and care of patients, and be able to develop mature, sensitive and effective relationships with patients. Candidates must be able to tolerate physically-taxing workloads and to function effectively under stress. They must be able to adapt to changing environments both indoor and outdoor, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities that are assessed during the admissions and education process.

Completion of the program’s technical standards does not guarantee a student’s eligibility for the Board of Certification (BOC) exam.

Students requesting accommodation to meet the technical standards must contact the Office of Disability Services prior to the start of the program or immediately upon a change in health status.

Students must read and sign indicating they understand the technical standards listed above that are required of students selected to participate in the Athletic Training Program and understand that they are essential requirements of the program. If for any reason, the student’s health status changes, they are required to update their signature.

(Signature form can be found in the Appendix)
2019-2020 COST OF ATTENDANCE

1) Cost of Attendance values are based on assumed full-time enrollment. Amounts may be prorated based on a student’s actual enrollment after add/drop.

2) Transportation allowances will vary regionally.

3) Once you receive your financial aid award notification, please check your CaneLink in the “View Financial Aid” section to see your actual Cost of Attendance.

<table>
<thead>
<tr>
<th>Expenses</th>
<th>Undergrad On Campus</th>
<th>Undergraduate Off Campus or University Village</th>
<th>With Parent/Relative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition (1)</td>
<td>$50,400</td>
<td>$50,400</td>
<td>$50,400</td>
</tr>
<tr>
<td>Fees</td>
<td>$1,530</td>
<td>$1,530</td>
<td>$1,530</td>
</tr>
<tr>
<td>Housing and Meals</td>
<td>$14,658</td>
<td>$18,238</td>
<td>$6,020</td>
</tr>
<tr>
<td>Books</td>
<td>$1,000</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>Personal</td>
<td>$2,160</td>
<td>$2,160</td>
<td>$2,160</td>
</tr>
<tr>
<td>Transportation (2)</td>
<td>$1,158</td>
<td>$1,158</td>
<td>$1,158</td>
</tr>
<tr>
<td><strong>Total Cost of Attendance:</strong></td>
<td><strong>$70,906</strong></td>
<td><strong>$74,486</strong></td>
<td><strong>$62,268</strong></td>
</tr>
</tbody>
</table>

2019-2020 Tuition and Fees

<table>
<thead>
<tr>
<th></th>
<th>Full Time (12 - 20 credit hours)</th>
<th>Part Time (1 - 11 credit hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition (flat rate)</td>
<td>$25,200.00</td>
<td>Tuition per credit:</td>
</tr>
<tr>
<td>Tuition (per credit in excess of 20)</td>
<td>$2,100.00</td>
<td>&quot;0&quot; Research Credit Courses</td>
</tr>
<tr>
<td>Audit - no degree credit (per course)</td>
<td>$2,100.00</td>
<td>Activity Fee (optional)</td>
</tr>
<tr>
<td>Activity Fee</td>
<td>$167.00</td>
<td>Athletic Fee (optional)</td>
</tr>
<tr>
<td>Athletic Fee</td>
<td>$90.00</td>
<td>Wellness Center Fee (optional)</td>
</tr>
<tr>
<td>Wellness Center Fee</td>
<td>$156.00</td>
<td>Student Health and Counseling Center Fee</td>
</tr>
<tr>
<td>Student Health and Counseling Center Fee</td>
<td>$186.00</td>
<td>Student Center Complex Fee</td>
</tr>
<tr>
<td>Student Center Complex Fee</td>
<td>$166.00</td>
<td></td>
</tr>
</tbody>
</table>
2019-2020 STUDENT HEALTH INSURANCE PLAN

<table>
<thead>
<tr>
<th>2019-2020 Annual Rates</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate, Graduate, and International Students</td>
<td>$3,556.00</td>
</tr>
<tr>
<td>MS1 MD</td>
<td>$3,260.00</td>
</tr>
<tr>
<td>MS2-4 MD and MS1-4 MD/MPH</td>
<td>$1,806.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2020 Spring/Summer Rates</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate, Graduate, and International Students</td>
<td>$2,074.00</td>
</tr>
<tr>
<td>MS1-4 MD and MD/MPH Semi-Annual Rate</td>
<td>$1,778.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2020 Summer Rates</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate, Graduate, and International Students</td>
<td>$889.00</td>
</tr>
</tbody>
</table>

* Tuition and fees rates may change before the beginning of the school year.

**Additional Fees for ATS: AT Program Fees**

In addition, the following fees are required for Athletic Training Students (Continuing Undergraduates):

- Athletic Training Administration Fee $75/semester
- KIN 488 Gross Anatomy Lab Fee $100
- KIN 141 Introductions to Athletic Training Lab Fee $65
- KIN 145 Responding to Emergencies Lab Fee $45
- KIN 476 requires that students register and take BOC exam approx. $365-390

NOTE: In addition, there may be additional cost associated with clinical education requirements such as, the cost of a physical exam, transportation cost, vaccinations, uniforms/clothing, and background/substance screening checks.

**Athletic Training Program Administration, Program Director, and Coordinators:**

- Dr. Laure Kohn Wood  Dean, 305-284-3001 l.kohnwood@miami.edu
- Dr. Warren Whisenant  Department Chairperson 305-284-3024 wwwhisenant@miami.edu
- Dr. Kysha Harriell  Program Director 305-284-3201 kharriell@miami.edu
- Dr. Ajaya Williams  Clinical EdCoordinator 305-284-6727 ajaya.williams@miami.edu
- Maria Paolercio  Administrative Assistant 305-284-3024 mpaolercio@miami.edu
- Ruth Signorile  Administrative Assistant (305) 284-4078 r.signorile@miami.edu

For more information, please contact Kysha Harriell PhD, LAT, ATC  
Program Director, Athletic Training Program  
kharriell@miami.edu  
(305) 284-3201
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS

Athletic Training Students are strongly encouraged to join various professional organizations within the field of Athletic Training on the local, regional, and national level. The Athletic Training Students also are encouraged to attend the various local, regional, and national conventions sponsored by these groups. These organizations provide many benefits including scholarships, informational services, educational symposiums, scholarly journals, lobbying of government agencies, and job placement services. Examples of professional organizations include the following:

National Athletic Trainers’ Association (NATA)
Southeast Athletic Trainers’ Association (SEATA)
Athletic Trainers’ Association of Florida (ATAF)

Both the Hurricane Athletic Training Students and the Iota Tau Alpha student groups, require officers to members of the NATA prior to election.

Membership and membership fee information can be found on the following websites:

NATA: www.nata.org
SEATA: www.seata.org
ATAF: www.ataf.org

NPI NUMBERS

In addition, students are highly encouraged to apply for a NPI number. An NPI is a unique 10-digit identification number used in standard health care transactions. It is issued to health care professionals and covered entities that transmit standard HIPAA electronic transactions (e.g., electronic claims and claim status inquiries). The NPI fulfills a requirement of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). It also replaces all provider identifier numbers assigned by payers and is used by health care professionals. Covered entities under HIPPA are required by regulation to use NPIs to identify health care providers in HIPPA standard transactions.

Applying for your NPI is quick, easy and free. Visit the CMS National Plan & Provider Enumeration System to complete your application today. Follow the NATA Step-by-Step NPI Application Instructions to apply.
CLINICAL EDUCATION OVERVIEW

Students will receive clinical experiences at local colleges, high schools, and sports medicine clinics. Attempts will be made to affiliate with professional teams, and other organizations and with special events in the community. The hours gained during the clinical education rotations will count towards the 1000 total hours necessary to fulfill course requirements. In all clinical rotations, students will be supervised by a certified and state licensed Athletic Trainer or an approved allied health care professional whom is a preceptor associated with the University’s Athletic Training Program. The majority of the clinical education hours obtained by the Athletic Training Student will occur between the hours of 7:00am and 7:00 p.m., Monday through Friday. Clinical education rotations also include Saturday and Sunday events, returning prior to the start of the semesters, and traveling with the supervision of a preceptor.

A Preceptor will supervise each student and evaluate each student on his/her performance and clinical proficiency. Refer to the Appendix for the evaluation tools utilized by the Preceptor.

Clinical education must provide students with authentic, real-time opportunities to practice and integrate athletic training knowledge, skills, and clinical abilities, including decision-making and professional behaviors required of the profession in order to develop proficiency as an Athletic Trainer.
CLINICAL EDUCATION ROTATIONS

All Athletic Training Students are required to have clinical experiences with:

- both a male and female sports;
- both in-season and out-of-season sports;
- protective equipment (i.e. football, lacrosse, hockey)
- adolescent patient population (i.e. high school)
- non-sports or other allied health care settings (i.e. Sports Medicine Clinic, Physical Therapy Clinics, Hospitals, and others)

In addition, all ATS students will complete a minimum of:

- Eight Non-Ortho Interactions (observations and patient presentations)
- Twelve Orthopedic Physician Interactions (observations and patient presentations)
- Four surgery observations
- Approx. 100 clinical education hours of intermittent clinical immersion experiences, where a student completes full days of immersion in the daily roles and responsibilities of an Athletic Trainer (50 hours as a junior, and 50 hours as a senior). These immersions can occur anytime students are not in classes such as during pre-seasons, post-seasons, school holiday breaks, weekends, or during days when classes don’t conflict with a full day immersion. These clinical hours can be spread out over several types of immersion experiences and over several days, weeks, or months. However, they must occur under the supervision of University of Miami approved preceptors and they must comply with the programs weekly maximum hour policy. These hours are part of and not in addition to the required clinical education hours for KIN 443 and KIN 455. Please see the Clinical Education Coordinator for more details. Also, note, this requirement is subject to change based on special circumstances and at the discretion of the instructor for KIN 443 and KIN 455.

TRANSPORTATION TO CLINICAL SITES

Students are responsible for their own transportation to and from all clinical education sites. This includes all associate costs.
DIRECT SUPERVISION

The preceptor must be physically present and have the ability to intervene on behalf of the athletic training student to provide on-going and consistent education. In addition, the preceptor must consistently and physically interact with the athletic training student at the site of the clinical experience.

- The preceptor must provide direct supervision in the form of visual and auditory contact with the student.
- Some form of educational instruction is to be included during clinical education hours.
- The preceptor is to conduct a regularly scheduled weekly education session for all ATS.
- Educational instruction may take the form of discussion, demonstrations, or research.

Athletic Training clinical education hours can only be obtained under the direct supervision of a preceptor. Direct supervision means the preceptor has direct visual and auditory contact with the ATS. The NATA, CAATE, and the AT Program at the University of Miami **DO NOT** endorse Athletic Training students working as First Responders or as First Aid Providers. Any hours during which a student is acting as a First Responder or a First Aid Provider are not considered clinical education hours and may be a violation of the Florida State Practice Act.
CINICALAL EDUCATION HOURS

Clinical education hours accumulated under the direct supervision of a preceptor must be recorded by the ATS on the Athletic Training Hours Form. This form requires the documentation of the month, the year, the type athletic training experience, and the athletic training hours accumulated for each day. At the end of each day, the ATS must total the hours and obtain the signature of the preceptor. The ATS must then submit a copy of the signed Athletic Training Hours form to the Program Director and to the instructor of the course. **The student must have a minimum of ten clinical education hours and no more than of 40 hours each week. Any exception to the minimum requirement must be approved by the CEC or PD.**

Clinical education hours cannot exceed 40 hours in a week and all ATS should have at least one day off a week from the clinical education site. Students must ensure that they obtain the required semester hour total while staying within the maximum and minimum hour’s policy. The semester minimum policy is determined by the total number of hour required by clinical lab classes (Junior Spring = 150 for KIN 444 and 100 for KIN 261 = 250-hour semester minimum, the semester maximum is calculated by the number of weeks in the semester x the weekly maximum of 40 hours per week (approx. 14weeks x 40-hour maximum).
CLINICAL EDUCATION GUIDELINES

I have read and understand the following (please initial):

_________ ATS are NOT allowed to perform skills in which you have not been instructed (Instruction can be in the classroom or in the clinical setting).

_________ Clinical education hours must be recorded on the Athletic Training Hours form as verification for meeting class requirements (including the documentation of the day, month, year, and the type of athletic training experience). You must obtain the signature of your preceptor at the end of each day and each week (monthly log due at each monthly meeting).

_________ ATS are NOT allowed to travel with a team without direct supervision by preceptor (this policy in effective for all clinical education sites and even includes local travel).

_________ All athletic training clinical education hours must be obtained under the DIRECT SUPERVISION of a preceptor.

_________ Clinical education hours may be counted for the following:

- Patient interactions
- Preparation of patients for practices/competitions
- Treatments before and after practices/competitions
- AT duties during practices/competition
- Injury evaluation/Clinic with a team physician
- Rehabilitation
- Observation of a surgery
- In-services
- Administrative duties
- Escorting an patient to an appointment with a physician or to the emergency room

_________ Clinical education hours may NOT be counted for the following:

- Traveling time with a team (on a plane, bus, etc.)
- Team meetings or Team meals
- Social Time

_________ Students must complete a minimum of 10 hours per week and not exceed a maximum of 40 hours a week. (Exceptions will be made for illnesses, when classes are not in session and for other special circumstances approved by the PD or CEC)

I, ____________________________________________, have read and understand the Athletic Training Program Clinical Education Guidelines.

_________________________________________  _____________
CLINICAL EDUCATION ROTATION ATTENDANCE POLICY

Clinical education is a part of your academic responsibility. Students are required to attend all clinical experiences per the specific site’s schedule. Therefore, students are excepted to attend clinical assignments according to their schedule organized between preceptor and student during their initial conference. Students are to adhere to their team’s practice, treatment, and competition schedule (if applicable). In the case of the high school hospital or clinic, you are to be in attendance when the facility is open, and your preceptor is working and with patients. Students should communicate regularly with their preceptor to determine potential conflicts and should plan ahead if needing to miss clinical obligations. Failure to do so could result in a change to your associated course (s) grade. Any work schedules or extracurricular activities you need to attend should be scheduled around your clinical education responsibilities. Students must complete a minimum of 10* and no more than 40 clinical education hours each week. Also, students are responsible for meeting the minimum clinical hours required for each of their clinical education classes for the semester.

Exceptions to this policy are as follows:

- UM Classes
- Day(s) off (At least once a week)
- A Day off scheduled through a absence request form or
- Student has met the maximum of 40 hours per week
- A student is sick as defined by the Active & Communicable Disease Policy or with any other injury or illness with documentation from a physician
- Any University approved absence (see clinical education syllabus or University Bulletin)

*The minimum 10 hours a week rule, is to ensure clinical education is spread out over the semester and not an option for students to decide to only compete 10 hours. Again, the exact number of hours per week will be determined by the nature of the clinical experience as determined by the preceptor and must be within the 10-40 hours min/max policy.

Personal Absence Request: Proper approval must be obtained by submitting the Clinical Education Absence Request Form (refer to the Appendix of your Guidelines Manual). Students must get permission from his/her preceptor, and/or the Clinical Coordinator or PD a minimum of 2 weeks before the requested personal day. Any exception to this rule must be approved and documented by the CEC or the PD.
ABSENCE REQUEST GUIDELINES

If an ATS is going to be absent, it is his/her responsibility to inform the preceptor two weeks prior to the expected absence. Athletic Training Students must submit an Absence Request Form (refer to Appendix) to the preceptor. In cases of emergency, the ATS must attempt to contact the preceptor as soon as possible.

PUNCTUALITY GUIDELINES

Punctuality is very important when reporting to the assigned preceptor as scheduled. The Athletic Training Student must notify his/her preceptor in a timely manner if he/she will be arriving late.

Preceptors may request that a student be removed from a clinical site for repeated violations of the above policies.
ATHLETIC PARTICIPATION GUIDELINES

Athletic Training Students are not prohibited from participating in athletics; however, they are advised that athletic participation may prolong their education process. The courses in the Athletic Training major are designed to be taken in sequence to maximize student learning. The education process may be prolonged due to the possible difficulty in fulfilling classroom requirements and in obtaining clinical education experience while in season.

STUDYING ABROAD/EXTENDED ABSENCE GUIDELINES

Studying abroad is a very good experience and the University encourages it. Thus, Athletic Training Students are not prohibited from studying abroad, nor will students be expelled from the program due to extenuating circumstances resulting in a prolonged absence. However, students will be advised that these situations might prolong their education process. The courses in the Athletic Training major are designed to be taken in sequence to maximize student learning. The student must complete the major in sequence, therefore, upon returning to the program the student must re-enter in the proper sequence. The education process may be prolonged for one to two additional years. Athletic Training Students are advised that there are very limited clinical education experiences at the University of Miami during the summer sessions; therefore, clinical education experience are usually only available during the fall and spring semesters.

The Athletic Training Program is currently exploring specific Athletic Training study abroad options and opportunities for the future.
UNIVERSITY OF MIAMI STUDENT EMPLOYMENT GUIDELINES

Athletic Training Students are not allowed to receive any monetary remuneration during their Athletic Training education experience, excluding scholarships.

Federal Work Study Program
Through the Federal Work Study Program, the University offers on-campus jobs to undergraduate students demonstrating financial need. A student’s work schedule may not, under the regulations, conflict with the class schedule. The basic rate of pay is the prevailing Federal minimum wage, with high higher rate paid for varying skill levels.

Student Employment Guidelines
Athletic Training Students are eligible for work-study through the University of Miami; however, they are not permitted to receive work-study in the Athletic Training Department or with the Athletic Training Program. These are the guidelines of the Athletic Training Program since students are not permitted to receive payment while being educated in the clinical setting. Furthermore, students that may have an off-campus clinical assignment and will not be able to receive work-study or additional employment at that clinical facility.

Off-campus Student Employment
Students seeking assistance in obtaining off-campus employment should contact the Office of Career Planning and Placement for an off-campus referral. Again, Athletic Training Students are not allowed to receive any monetary remuneration during this education experience, excluding scholarships.
CLINICAL EDUCATION EVALUATIONS

Copies of these evaluations can be found in the Appendix. However, as of Fall 2016, many of these evaluations will be completed electronically.

Goal Sheets (currently offered electronically)
Within the first few weeks of the clinical education rotation, the Athletic Training Student (ATS) and the Preceptor must discuss the student’s goals for clinical education rotation/semester. This should assist the preceptor in creating an optimal learning experience and concentrating on the areas that would best benefit the student.

Self-Evaluations (currently offered electronically)
The ATS will perform a self-evaluation after the first month of the Clinical rotation. The purpose of this evaluation is to give a student a chance to evaluate their own clinical performance and assess their areas in need of improvement. The ATS will complete this form and go over it with their assigned preceptor.

Mid-term and Final Formal Evaluations (currently offered electronically and by paper)
Preceptors will provide regular informal feedback to students regarding their performance. Formal evaluation of student performance will occur two times during each semester.

The first formal evaluation that the preceptor completes on the student is approximately mid-way through the Clinical Athletic Training Rotation. The purpose of this evaluation is to appraise both the ATS’s progress and areas in need of improvement. The second is a summative evaluation of the ATS’s performance completed by the preceptor at the end of the Clinical Education Rotation. These evaluations will be considered in conjunction with the clinical proficiency evaluations while determining the ATS’s grade for the Clinical Athletic Training Lab.

Juniors: Clinical Proficiency Forms (Program Requirement)
Seniors: Clinical Integrative Proficiencies (Matrix Requirement)

Junior Athletic Training students in KIN 251, 261, 443, 444, and 462 are assessed on clinical proficiency scenarios during clinical education rotations and in clinical labs. AT students’ progress to Clinical Integrative Proficiency assessments during their senior year.

Assuring ATSs mastery of competencies is accomplished through clinical proficiency evaluation forms. The clinical proficiencies are attached to didactic courses that ATSs must complete for the Athletic Training major; therefore, the designated clinical proficiencies must be completed to satisfy the requirements of the didactic course.

- Each clinical proficiency skill/behavior is graded using a Likert scale ranging from one (0) to five (5). Each score on the Likert scale corresponds to specific skill/behavior that the ATS must demonstrate to obtain that given score. A score of one reflects an inability to complete the proficiency whereas a score of one, two, three, four, or five reflects an ability to complete the proficiency at a poor, fair, good, or superior level, respectively. Successful completion of the skill/behavior includes the proper demonstration with a score of 3 or better from the preceptor. However, students must earn a minimum total score of 26/35 on each clinical proficiency.
• The clinical proficiency or CIP evaluation forms are provided to the ATSs in the corresponding clinical athletic training laboratory class. The ATS is responsible for maintaining and possessing these clinical proficiency evaluation forms on a daily basis. At the beginning of the clinical rotation, the preceptor and ATS will review and discuss the clinical proficiency evaluation forms to inform the preceptor about the clinical proficiency mastery accomplished by the student. The ATS must be able to present their clinical proficiency evaluations immediately upon request by a preceptor.

**Preceptor/Clinical Site Evaluation (currently offered electronically)**
At the conclusion of the clinical experience, the clinical site is evaluated anonymously in conjunction with the evaluation of the preceptor. The ATS submits this evaluation to the CEC for review. At the conclusion of the academic year, the CEC and PD provides the preceptor with general feedback from the evaluation conducted by the ATSs. The CEC or Program Director and the preceptor meet at the conclusion of the academic year to discuss the evaluation and determine the appropriate changes necessary to improve the clinical education experience for the students.

**Clinical Hour Log and Patient Interaction Form**
Students track clinical hour forms on a log form found in their Clinical Education Notebook. In addition, students are required to fill out a daily clinical hour log and patient interaction form.

**Senior Exit Program Evaluations**
The program also utilized a senior program evaluation, BOC performance data, and teaching evaluations to regularly asses and make clinical education and didactic improvements.
COMPETENCIES & CLINICAL INTEGRATIVE PROFICIENCIES

The Athletic Training Educational Competencies serve as a guide for the development of educational programs and learning experiences leading to a student’s eligibility to challenge the BOC examination. Junior level students will complete the required University of Miami AT Program clinical proficiency skills check-offs, while senior level students will complete clinical integrative proficiencies (CIP) that are required by the 5th edition competencies. The Athletic Training Educational Competencies are categorized into eight content areas comprising the knowledge and skill set of entry level athletic trainers:

Evidence-Based Practice (EBP)
Evidence-based practitioners incorporate the best available evidence, their clinical skills, and the needs of the patient to maximize patient outcomes. An understanding of evidence-based practice concepts and their application is essential to sound clinical decision-making and the critical examination of athletic training practice.

Prevention and Health Promotion (PHP)
Athletic trainers develop and implement 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. These strategies and programs also incorporate the importance of nutrition and physical activity in maintaining a healthy lifestyle and in preventing chronic disease (e.g., diabetes, obesity, cardiovascular disease).

Clinical Examination and Diagnosis (CE)
Athletic trainers must possess strong clinical examination skills in order to accurately diagnosis and effectively treat their patients. The clinical examination is an on-going process, repeated to some extent each time the patient is treated. The development of these skills requires a thorough understanding of anatomy, physiology, and biomechanics. Athletic trainers must also apply clinical-reasoning skills throughout the physical examination process in order to assimilate data, select the appropriate assessment tests, and formulate a differential diagnosis.

Acute Care of Injuries and Illnesses (AC)
Athletic trainers are often present when injuries or other acute conditions occur or are the first healthcare professionals to evaluate a patient. For this reason, athletic trainers must be knowledgeable and skilled in the evaluation and immediate management of acute injuries and illnesses.

Therapeutic Interventions (TI)
Athletic trainers assess the patient’s status using clinician- and patient-oriented outcome measures. Based on this assessment and with consideration of the stage of healing and goals, a therapeutic intervention is designed to maximize the patient’s participation and health-related quality of life.

Psychosocial Strategies and Referral (PS)
Athletic trainers must be able to recognize clients/patients exhibiting abnormal social, emotional, and mental behavior. Coupled with recognition is the ability to intervene and refer these individuals as necessary. Additionally, athletic trainers appreciate the role of mental health in injury and recovery and use interventions to optimize the connection between mental health and restoration of participation.
**Healthcare Administration (HA)**
Athletic trainers function within the context of a complex healthcare system. Integral to this function is an understanding of risk management, healthcare delivery mechanisms, insurance, reimbursement, documentation, patient privacy, and facility management.

**Professional Development and Responsibility (PD)**
The provision of high quality patient care requires that the athletic trainer maintain current competence in the constantly changing world of healthcare. Athletic trainers must also embrace the need to practice within the limits of state and national regulation using moral and ethical judgment. As members of a broader healthcare community, athletic trainers work collaboratively with other healthcare providers and refer clients/patients when such referral is warranted.

**Clinical Integration Proficiencies (CIP)**
The clinical integration proficiencies (CIPs) represent the synthesis and integration of knowledge, skills, and clinical decision-making into actual client/patient care. The CIPs have been reorganized into this section (rather than at the end of each content area) to reflect their global nature. For example, therapeutic interventions do not occur in isolation from physical assessment. A simple “check off list” can be used to determine psychomotor and cognitive competency, but cannot assess decision making abilities.

**Clinical Proficiencies and CIP Requirements**
- All Clinical Proficiencies and CIP must be completed with a score of 3 or better on each evaluation component (where applicable).
- Must have a minimum total score of 26/35 on CIP.
- Must be accompanied by other required documentation where applicable (i.e. injury reports, personal health profile.)
- Must be signed by both the student and preceptor
CLINICAL INTEGRATIVE PROFICIENCIES REQUIRED BY CLASS

**See appendix or clinical education notebooks for evaluation forms by class.

KIN 251: Clinical Proficiencies
Orthopedic Assessment: Lower Lab

KIN 261: Clinical Proficiencies
Orthopedic Assessment: Upper Lab

KIN 461: Clinical Proficiencies
Therapeutic Modalities

KIN 464: Clinical Proficiencies
Therapeutic Rehabilitation Lab

KIN 443: Clinical Proficiencies

KIN 444: Clinical Proficiencies Check Off List
Clinical Athletic Training Lab II

KIN 455 and KIN 456: Clinical Integrative Proficiencies
Clinical Athletic Training Lab III and Lab IV
1. Prevention & Health Promotion: Personal Health/Wellness Profile
2. Prevention & Health Promotion: Asthma, Diabetes, Heat Illness, or SCT
3. Prevention & Health Promotion: Lower Extremity Taping and Wrapping
4. Prevention & Health Promotion: Upper Extremity Taping and Wrapping
5. Prevention & Health Promotion: Standard Protective Equipment
6. Clinical Assessment & Diagnosis / Acute Care / Therapeutic Intervention: Lower Extremity Injury or Condition
7. Clinical Assessment & Diagnosis / Acute Care / Therapeutic Intervention: Upper Extremity Injury or Condition
8. Clinical Assessment & Diagnosis / Acute Care / Therapeutic Intervention: Low Back/Thoracic Spine Injury or Condition
9. Clinical Assessment & Diagnosis / Acute Care / Therapeutic Intervention: Head/Neck/Spine Injury or Condition
10. Clinical Assessment & Diagnosis / Acute Care / Therapeutic Intervention: Common Illness/Condition
11. Clinical Assessment & Diagnosis / Acute Care / Therapeutic Intervention: Emergency Injury or Condition
12. Clinical Assessment & Diagnosis / Acute Care / Therapeutic Intervention: Healthcare Administration
13. Psychosocial Strategies and Referral: Recognition and Referral
14. Psychosocial Strategies and Referral: Psychosocial Techniques
HEALTH REQUIREMENTS

All students enrolled in the AT Program are required to complete a medical history questionnaire and a physical examination by a physician to verify that the student is able to meet the physical and mental requirements-with or without reasonable accommodation-of an athletic trainer. The physical exam is required by the completion of the KIN 140/141 class. These are used in part to demonstrate that the student is able to meet the technical standards adopted by the AT Program. All registered students must meet the University’s immunization requirements. In addition, it is suggested that all students receive a Hepatitis B vaccine.

- The physical examinations are submitted to the Program Director.

- The immunization records are maintained by the Student Health Center.

- The Technical Standards form containing the signature of the ATS documenting acknowledgement of this requirement is maintained by the Program Director of the AT Program. Students resign this form annually.

- Flu Shots and TB Testing as required for all hospital clinical education hours and surgery observations. Please see CEC regarding dates for flu-season vaccinations. This paper work is submitted to the requiring clinical sites.

- All records are kept confidential and will not be released without the student’s permission or court order.
HEALTHCARE INSURANCE GUIDELINES

Athletic Training Students will be subject to the same health care standards and policies as every other University of Miami Student. Please refer to the Undergraduate Catalog.
IMMUNIZATION REQUIREMENTS & VACCINATION INFORMATION

All new students are required to provide proof of immunization against measles, mumps and rubella, and tetanus, diphtheria and pertussis. All new students must also provide proof of immunization against hepatitis B and meningococcal meningitis or sign a waiver declining these immunizations. An immunization form must be completed and immunization information must be entered at mystudenthealth.miami.edu, and the completed immunization form must be uploaded to mystudenthealth.miami.edu prior to arrival on campus. For students, less than 18 years old, the meningitis/ hepatitis vaccine waivers must be signed by a parent or legal guardian. Students should also consider immunization against varicella (chicken pox).

All international students must also be screened for risk of tuberculosis by completing page two of the immunization form, and all nursing, physical therapy and medical (M.D) students are required to obtain additional immunizations and tuberculosis screening as described on the nursing and physical therapy immunization form and medical student immunization form. Health Sciences students are now able to complete their annual symptom reviews (PPD questionnaires) at mystudenthealth.

- Sign onto mystudenthealth.miami.edu
- Click on ‘forms and resources’ on the left-hand column
- Then click ‘Annual PPD questionnaire’.
- Answer the question and click ‘submit’.

Immunization information must be entered at mystudenthealth.miami.edu prior to uploading to allow for verification. Flu Shots and TB Testing as required for all hospital clinical education hours and surgery observations. Please see CEC regarding dates for flu-season vaccinations.

Immunization information is provided to the State of Florida FLORIDA SHOTS immunization registry. Students can opt-out of the immunization registry by contacting us at studenthealth@miami.edu. This is an opt-out of sharing immunization information with the State of Florida registry and NOT an opt out of the immunization requirement.

Deadlines for submission of immunization records are Fall-August 22nd, Spring-January 15th and Summer-April 15th for all except medical students. Medical student deadlines are as stated on the medical student immunization form. Failure to comply with these immunization requirements prior to the beginning of your first semester will interfere with registration and a $50.00 late processing fee will be charged for any form received after the start of the semester. Forms will be processed within 48 hours of receipt, and immunization status can be verified via mystudenthealth.miami.edu.

Most students will be able to obtain the required immunization information from their prior medical providers or from their prior high school, college or university. Students who believe that they were
previously immunized but are unable to provide proof of immunization may either obtain blood tests confirming immunity or obtain the necessary immunizations. Immunizations and blood tests documenting immunity are available at the Student Health Service. All charges are in addition to processing fees for late forms.

All students living on campus will also be asked to document receipt of hepatitis and meningococcal meningitis immunizations, or to acknowledge both receipt of information about these vaccines and preference against immunization. This can be done during completion of the immunization form or via mystudenthealth.miami.edu.

VACCINATION INFORMATION

Tuberculosis Screening
Tuberculosis screening must be completed by all international students, and requires completion of page two of the Immunization Form. International students who have not had contact with others sick with tuberculosis, who were born in a country considered low risk for tuberculosis, and have never lived in or traveled to any country other than USA considered low risk for tuberculosis do not require additional screening. All other international students must have additional screening with a PPD Test within six months prior to arrival on campus, or by one month after arrival on campus.

Hepatitis B
Hepatitis B is a serious infectious disease that attacks the liver and can lead to lifelong infection and even death. The virus is spread when an individual comes in contact with blood or other body fluids of an infected person through broken skin or mucous membranes. Each year approximately 3,000 - 5,000 people die from hepatitis B. Although there is no cure, the infection can be prevented by vaccination. The Centers for Disease Control and Prevention (CDC) recommends vaccination of everyone 18 years of age and under, as well as others at high risk for hepatitis B, including anyone with more than one lifetime sexual partner.

Unprotected sex, non-sterile body piercing and tattoos, sharing needles, toothbrushes, razors and pierced earrings, and travel abroad to countries where hepatitis B is common, can increase the risk for college students. In addition, health sciences students (e.g., nursing and medical students) are at particular risk of exposure through patient care.

The hepatitis B vaccine is safe and effective but should not be given to anyone who has had a life threatening reaction to baker's yeast or to a previous dose of the vaccine. The most common side effect of the vaccine is soreness at the site of the injection. Vaccination requires a series of three shots over a six month period and provides long term immunity. In addition to vaccination, people can attempt to reduce their risk by using condoms during sex and avoiding tattooing and body piercing with non-sterile instruments or techniques. They should also avoid sharing needles, pierced earrings, razors or toothbrushes.
Meningitis (Meningococcal Disease)

Meningococcal disease is a rare but potentially fatal bacterial disease that occurs either as meningococcal meningitis, inflammation of the lining of the brain and spinal cord or meningococcemia, presence of bacteria in the blood. Meningococcal disease occurs in about 1-3 out of 100,000 people each year, but is more common among freshman students living in on-campus housing. About 10-15% of those affected die in spite of antibiotic treatment and of those who survive, another 10-20% lose limbs, become deaf, have neurological problems, become mentally disabled or suffer seizures or strokes.

Meningococcal bacteria are transmitted through the air via droplets of respiratory secretions, and through direct contact with persons infected with the disease. Oral contact with shared items such as cigarettes or drinking glasses or through intimate contact such as kissing, could put a person at risk for acquiring the infection. People identified as close contacts of a patient with meningococcal disease should receive antibiotics to prevent the disease.

Symptoms include high fever, severe headaches, neck stiffness, rash, nausea, vomiting and lethargy (confusion, sleepiness, being hard to wake up). Because the disease progresses rapidly, often in as little as 12 hours, those who experience two or more of the above symptoms are urged to seek immediate medical care.

The vaccine is considered to be safe, but should not be given to those who have had a serious allergic reaction to any of the vaccine components. Anyone with a history of Guillain-Barre Syndrome should speak to their health care provider before getting the conjugate (Menactra) vaccine. Some people have mild side effects including redness or pain at the injection site or fever. The vaccine does not completely eliminate the possibility of infection, but is effective against the strains responsible for two thirds of the cases on college campuses.

**Meningococcal Meningitis and Hepatitis B immunizations are available at the University of Miami Student Health Service.**

Varicella (Chickenpox)

Chickenpox is more than just a childhood disease. While the symptoms are usually mild in children, college students may be 10 times more likely than children to develop serious complications, including pneumonia, encephalitis, and even death. Each year, approximately 11,000 people are hospitalized and 100 die due to chickenpox.

Chickenpox may spread more easily in a college living environment, and college students are considered to be more susceptible to the disease. As with hepatitis B, health sciences students are at particular risk of exposure to chickenpox through patient care and furthermore may transmit the infection to patients at high risk of complications. A vaccine is available to prevent chickenpox, and the CDC and ACHA recommend all college students who have not had chickenpox be vaccinated against the disease. If your child has not had chickenpox, it is strongly recommended by health officials that he or she get vaccinated.

**Varicella (Chicken Pox) vaccines are available at the University of Miami Student Health Service.**
More information is available at www.miami.edu/student-health.

**Pertussis**

Pertussis is a bacterial respiratory illness characterized by severe spasms of coughing that can last for several weeks or even for months. According to the CDC, in the United States, 5000-7000 cases of pertussis are reported each year. There has been an overall increase in cases since 1990, with a disproportionate increase in adolescents and adults. Pertussis is highly contagious with up to 90% of susceptible household contacts developing clinical disease following exposure to an index case. Adolescents and adults who have been vaccinated as children often have mild or no symptoms, but may have classic pertussis. Infected individuals can pass the disease to non-immunized or not completely immunized infants, and the disease can be severe in these individuals. Due to the increased prevalence of pertussis, recent guidelines have recommended that tetanus boosters, which previously included diphtheria, should include pertussis as well. This combined vaccine (Tdap) should be given to adolescents. The Tdap vaccine can be given regardless of interval since the last tetanus or diphtheria-toxoid containing vaccine.

**HPV Vaccine**

The Human Papilloma virus (HPV) vaccine is recommended for girls 11-12 years old, and for girls and women 13-26 years old and is also available for boys and men up to age 26. The vaccine targets HPV subtypes that cause 70% of all cervical cancers and about 90% of genital warts, and is given in a series of three doses in a 6 month period. The vaccine is currently available at the Student Health Service. More information is available from the CDC.

**Vaccination Costs**

The cost of the physical examination and vaccinations are the student’s responsibility. Hepatitis B Vaccines can be obtained at the Student Health Center.
UNIVERSITY OF MIAMI HEALTHCARE GUIDELINES

The Student Health Center is a modern, on-campus, outpatient medical center. Through its staff of qualified physicians, physician assistants, and nurse practitioners, the Health Center diagnoses and treats minor injuries, and new or ongoing illnesses. Services include primary care, select specialty care routine laboratory services, x-ray, pharmacy services, advice on health-related issues, and referral to medical specialists when necessary. Many services are provided at no charge. Specialty clinics include women’s health, allergy, nutritional counseling, and orthopedic clinics. All full-time undergraduate students and all other students who have paid the University Fee are eligible for care at the Health Center. The spouse of the student may pay a Health Care Fee and become eligible for care at the Health Center. All medical records are confidential, are not part of the University records, and will not be released without the patient’s permission or court order.

Student Health Center
E-mail - studenthealth@miami.edu
Appointments / Enter Immunization Information - mystudenthealth.miami.edu
Insurance Waivers - myUM (Life at UM Tab)

Main Number 305-284-9100
Administration 305-284-5921
Pharmacy 305-284-5922
Health Insurance 305-284-1652
Immunization 305-284-5933

If a sudden, severe illness or serious accident occurs while on campus, contact the Department of Public Safety at (305) 284-6666 or dial 911. While off campus, dial 911 for emergency transport. The charges for all off campus emergency care and ambulance service are the responsibility of the patient.

All students should have adequate health insurance to pay for illnesses, accidents, surgery, psychiatric emergencies, and for off campus emergency room care. All new domestic students taking six or more credit hours per semester are required to obtain adequate health insurance. The annual premium for the health insurance plan offered through the Student Health Service will be added to each student’s fee. Domestic students with alternative insurance coverage may request a fee waiver by providing the name of the insurance company and the policy number at or prior to registration. A waiver request form for domestic students can be obtained at the Student Health Center or on the web International students and scholars are required to enroll in the University sponsored health insurance program. International students with alternative insurance
coverage may request a fee waiver by submitting an Insurance Waiver Request form to the Student Health Service. A waiver request form for international students can be obtained at the Student Health Center or on the web site: www.miami.edu/student-health.
EMERGENCY ACTION PLANS

***Athletic Training Students must have access to a written emergency action plan at each clinical site. These EAP must me posted at the site and be site specific.

The following steps must be taken:

a. The preceptor must give the ATS a copy of the Emergency Action Plan (EAP) by the first day of the clinical education rotation.

b. If the preceptor does not provide the student with a EAP, the student is to request a copy from the preceptor.

c. If the preceptor is unable to furnish a copy of the EAP, the student is to notify the Clinical Education Coordinator or the Program Director immediately (the Program Director and Clinical Education Coordinator keep copies of the EAP for all sites).

d. The preceptor should show the student where the EAP is located at the Clinical Site.

e. Students may submit a copy of the EAP or complete other assignments to their Clinical Lab Instructor as proof that the EAP was given to the students.
CPR & AUTOMATED EXTERNAL DEFIBRILLATION TRAINING

The Athletic Training Staff and the Athletic Training Students will receive annual Automatic External Defibrillation (AED) training program conducted by the Athletic Training Staff member or local EMS. The AED training program consists of a thorough explanation of how to work the AED, and a hypothetical situation in which the AED is used to treat a patient. The following points are addressed during the training session:

- The proper use, maintenance, and periodic inspection of the AED.
- Defibrillator safety precaution to enable the user to administer a shock without jeopardizing the safety of the patient, the user, or other persons.
- Assessment of an unconscious person to determine if cardiac arrest has occurred and the appropriateness of applying an AED.
- Recognizing that an electrical shock has been delivered to the patient and that the defibrillator is no longer charged.
- Rapid, accurate assessment of the patient’s post-shock status to determine if further activation of the AED is necessary.
- The operations for the local emergency medical services system, including methods of access to the emergency response system, and interaction with emergency medical services personnel.
- The role of the user and coordination with other emergency medical service providers in the provision of CPR, defibrillation, basic life support, and advanced life support.
- The responsibility of the user to continue care until the arrival of medically qualified personnel.
BLOOD BORNE PATHOGEN TRAINING

The Athletic Training Staff and the Athletic Training Students are required to attend the annual OSHA Blood Borne Pathogen training program conducted by the Office of Environmental Health and Safety or a designated representative. The ATSs must sign in, including their student number, prior to the start of the training program and must complete a written examination at the conclusion of the training program. The Office of Environmental Health and Safety has developed documents regarding Blood Borne Pathogens and Biohazard Waste which, are published in this Guidelines Manual. The OSHA manuals are maintained in the Athletic Training Facility Office.

The on-campus Athletic Training Facility contains the following universal precaution materials: latex gloves, gowns, masks, face shields, safety needles, and biohazard bags and containers. These materials are maintained through the Athletic Training budget. Stericycle is a biohazard waste removal company contracted by the Athletic Training Department for the disposal of biohazard waste.

UNIVERSITY OF MIAMI BLOOD BORNE PATHOGENS GUIDELINES

Exposure Control Plan

In the case of an exposure, please see on-site exposure control plan.

Call Employee Health Office IMMEDIATELY!

Office: (305) 243-3400 — Monday-Friday 9am-5pm
Cell: (305) 299-4684 (24 hours)
After hours, weekends, holidays.

- Complete Accident Report Form
- Notify supervisor of incident
- Notify Risk Management (305) 284-3163

For more information regarding Bloodborne Pathogens go to OSHA’s website: http://www.osha.gov/SLTC/bloodbornepathogens/index.html
UNIVERSAL PRECAUTIONS

According to the concept of Universal Precautions, all human blood components, products made from human blood, and certain other materials are treated and handled as if known to be infectious for HIV (the virus that causes AIDS), HBV (hepatitis B), and other blood-borne pathogens. The following body fluids should be treated under the Universal Precautions guidelines:

- Amniotic Fluid
- Cerebrospinal Fluid
- Pericardial Fluid
- Peritoneal Fluid
- Pleural Fluid
- Semen
- Synovial Fluid
- Vaginal Secretions
- Any body fluid that is visibly contaminated with blood
- All body fluids in situations where it is difficult or impossible to differentiate between body fluids.

The following guidelines, or work practice controls, are recommended for Athletic Training Students at the University of Miami:

- All Athletic Training Students must wash their hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as possible following contact of such body areas with blood or other potentially infectious materials. This shall be done immediately following the removal of latex gloves or other personal protective equipment.
- Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is reasonable likelihood of occupational exposure.
- Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets, or on countertop or bench tops where blood or other potentially infectious materials are present.
- All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.
- Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.
- Resuscitation devices including mouthpieces or resuscitation bags shall be available for use in areas where the need for resuscitation is predictable.
- Equipment, which may become contaminated with blood or other potentially infectious materials, shall be examined prior to servicing or shipping and shall be decontaminated as necessary unless decontamination is not feasible. It must be properly labeled and information conveyed to all affected people so precautions can be taken.
If an ATS is experiencing any of the following signs or symptoms, they should refrain from their clinical education site until their symptoms have resolved or until they receive medical clearance from a physician.

1. Fever
2. A cold accompanied by a sore throat
3. A cold, which also includes serious congestion, requiring you to blow your nose frequently, or which, causes you to sneeze often.
4. A cold accompanied by headaches, and other aches and pains.
5. Vomiting

If you have a respiratory illness with a fever, go to the Student Health Service. Do not attend classes, work or social events and avoid contact with other people as much as possible to keep from infecting them.

For the health and safety of the individuals working in the University of Miami Athletic Training Department and the Athletic Department, including the athletes, no student, or employee is able to return to work if they were diagnosed with an active communicable disease without medical clearance from a licensed physician. The Blood Borne Pathogen Policy adopted by the Office of Environmental Health and Safety was the guideline used to establish this policy.

I have read and I understand the Active Communicable Diseases Guidelines

__________________________________________  _______________________
Student’s name (please print)       C Number

__________________________________________  _______________________
Student’s signature     Date
LIABILITY INSURANCE

Athletic Trainers are not immune to litigation. If the Athletic Training Student adheres to the Guidelines as set forth in this manual and those particular to their own clinical site assignment and does not attempt to perform duties outside the scope of their limitations, the chances of litigation are greatly reduced. The following guidelines should be adhered to at all times:

1. Consider everyone you see, talk to or touch as a potential plaintiff.

Adhere to FERPA and HIPPA which deal with releasing confidential information. A written release from the patient must be signed before releasing any information.

2. Know the limits of your competence and responsibilities.

3. Be attentive and develop good evaluative skills.

4. Maintain a good rapport and open communication with your patients, clinical supervisor, administrators and faculty.

5. Maintain good records and documentation of athletic injuries.


7. Maintain a good rapport with the team physicians. Athletic Trainers function under the guidance and direction of the Team Physicians.

In an effort to protect Athletic Training Students in the event of litigation, the University purchases liability insurance for all AT students under a University policy. This coverage is purchased each year. As posted in the bulletin, the Clinical Athletic Training Students are charged a nonrefundable administration fee that is due at registration - $75.00.
(1) A licensed athletic trainer shall apply principles, methods and procedures within the following domains that provide the foundation of the scope of the athletic trainer’s practice.
   (a) Injury and Illness Prevention and Wellness Promotion;
   (b) Examination, Assessment and Diagnosis;
   (c) Immediate and Emergency Care;
   (d) Therapeutic Intervention;
   (e) Healthcare Administration and Professional Responsibility;

(2) A licensed athletic trainer shall apply the following principles, methods and/or procedures within the scope of the profession:
   (a) Rehabilitation through the use of safe and appropriate physical rehabilitation practices, including those techniques and procedures following injury and recovery that restore and maintain normal function status;
   (b) Application of principles and methods related to strength training, cardiovascular fitness, and performance enhancement;
   (c) Performance of tests and measurements to prevent, evaluate and monitor acute and chronic injuries or conditions;
   (d) Selection of preventive and supportive devices, temporary splinting and bracing, protective equipment, taping, strapping, and other devices or techniques to protect an injury or condition, facilitate ambulation and restore normal functioning;
   (e) Organization and administration including the development and implementation of strategies and procedures to minimize risk and to promote safety and wellness;
   (f) Recognition of factors related to injuries, illnesses, and conditions within the scope of the profession as well as correcting or modifying inappropriate, unsafe, or dangerous activity;
   (g) Design, review and/or revise policies and procedures related to prevention, care, and rehabilitation as well as emergency action plans to guide appropriate patient care, establish a sound, unified response to events, and to optimize outcomes overall;
   (h) Implementation of appropriate emergency and immediate care procedures;
   (i) Implementation of systematic, evidence-based examinations and assessments within the scope of the profession to ensure appropriate care, referral and course of action;
   (j) Education and counseling regarding wellness and the care and prevention of injury or conditions within the scope of the profession;
   (k) Creating, maintaining, and completing patient care and administrative documentation consistent with professional practice guidelines or requirements;
   (l) Knowledge of professional standards of practice and ethics, and ensure those standards are implemented as part of an athletic trainer’s duties and responsibilities;
   (m) Knowledge of basic business principles, policies and procedures, organizational, and resource management.

(3) For treatment and rehabilitation of musculoskeletal injuries the athletic trainer may utilize the following therapeutic interventions:
   (a) Therapeutic Exercise;
   (b) Massage and soft tissue mobilization;
(c) Mechanical Devices (e.g., continuous passive motion, isokinetics, treadmill with or without differential air pressure);
(d) Cryotherapy (e.g., ice, cold packs, cold water immersion, spray coolants);
(e) Thermotherapy (e.g., topical analgesics, moist/dry hot packs, heating pads, paraffin bath);
(f) Other therapeutic agents with the properties of water (e.g., whirlpool); electricity (e.g., electrical stimulation, diathermy); light (e.g., infrared, ultraviolet, laser therapy); or sound (e.g., ultrasound).

(4) The athletic trainer may apply topical prescription medications (e.g., steroid preparation for phonopheresis) only at the direction of a physician.

(5) A licensed athletic trainer shall report new or recurring injuries or conditions to a physician in the manner requested by the physician.

(6) Nothing herein shall be construed to prevent a person from administering standard first aid treatment. In the absence of a physician being available at a practice, competitive event, or other setting where a licensed athletic trainer is present, the licensed athletic trainer may provide first aid and preventative measures and implement appropriate procedures and strategies for transport and/or referral to a physician’s office, hospital, or other healthcare facility.

(7) A licensed athletic trainer shall maintain the following regarding the standards of practice:
   (a) A licensed athletic trainer shall neither practice nor condone discrimination on the basis or race, creed, national origin, sex, age, handicap, disease entity; social status, financial status or religious affiliation;
   (b) A licensed athletic trainer shall provide competent care consistent with both the requirements and the limitation of the athletic training profession;
   (c) A licensed athletic trainer shall comply with applicable local, state, and federal laws;
   (d) A licensed athletic trainer shall preserve the confidentiality of privileged information and shall not release such information to a third party not involved in the patient’s care unless the patient consents to such release or release is permitted or required by law;
   (e) A licensed athletic trainer shall report illegal or unethical practice pertaining to athletic training to the appropriate person or authority;
   (f) A licensed athletic trainer shall not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, qualifications, identity, or services;
   (g) A licensed athletic trainer employing, supervising, or evaluating the performance of other staff members shall fulfill such responsibilities in a fair, considerate, and equitable manner;
   (h) A licensed athletic trainer shall not practice when their ability is impaired by the use of drugs or alcohol.


See the following link for the latest edition:
https://www.flrules.org/gateway/ChapterHome.asp?Chapter=64B33-4
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, WELL-BEING, AND DIGNITY OF OTHERS

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

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

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

2. MEMBERS SHALL COMPLY WITH THE LAWS AND REGULATIONS GOVERNING THE PRACTICE OF ATHLETIC TRAINING, NATIONAL ATHLETIC TRAINERS’ ASSOCIATION (NATA) MEMBERSHIP STANDARDS, AND THE NATA CODE OF ETHICS

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

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

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

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

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

2.6 Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.
3. MEMBERS SHALL MAINTAIN AND PROMOTE HIGH STANDARDS IN THEIR PROVISION OF SERVICES

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

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

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

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

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

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

4. MEMBERS SHALL NOT ENGAGE IN CONDUCT THAT COULD BE CONSTRUED AS A CONFLICT OF INTEREST, REFLECTS NEGATIVELY ON THE ATHLETIC TRAINING PROFESSION, OR JEOPARDIZES A PATIENT’S HEALTH AND WELL-BEING.

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

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

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

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

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

September 2005, Revised 2018
CLASSROOM DECORUM

The University seeks to promote a teaching and learning environment free from material and substantial classroom disruptions. Faculty and students have a joint responsibility to develop and maintain an optimal learning environment. Faculty members and teaching staff have the authority and responsibility to effectively manage their classroom environments. *Instructors may determine the time and manner for student questions and expression of points of view in the instructional setting. Accordingly, instructors should establish, communicate and enforce reasonable expectations of classroom behavior and decorum via the syllabus and classroom discussion.* This policy is not intended to discourage appropriate classroom expression, discussion, or disagreement, but rather to promote respectful interactions.
UNSAFE ATHLETIC TRAINING PRACTICE GUIDELINES

DEFINITION: Unsafe Athletic Training Practice is jeopardizing a patient’s life, health or safety, engaging in unprofessional conduct, or violating the ethical code for Athletic Training. Unsafe athletic training practice is defined to include, but is not limited to, the following behaviors of a Staff Athletic Trainer, Physical Therapist or an Athletic Training Student:

- Failure to supervise adequately the performance of acts by any person working at the Staff or Athletic Training Student’s direction; or
- Delegating or accepting the delegation of an athletic training function or prescribed health care function when the delegation or acceptance could reasonably be expected to result in unsafe or ineffective patient care; or
- Failure to utilize appropriate judgment in administering safe athletic training practices based upon the expected level of athletic training preparation; or
- Performing new athletic training techniques or procedures without proper education and preparation; or
- Failure to report through the proper channels the unsafe or illegal practice of any person who is providing athletic training care; or
- Engaging in activities which do not fall within the realm of standardized athletic training practice; or
- Endangering the welfare of the patient through own physiological or mental health status.

Unprofessional conduct is athletic training behavior (acts, knowledge, and practices) which fails to conform to the accepted standards of the Athletic Training profession and which could jeopardize the health and welfare of the people which shall include but not be limited to the following:

- Inaccurate recording, reporting, falsifying or altering client records; or
- Verbally or physically abusing patients; or
- Falsifying manipulating patient records; or
- Appropriating without authority, medications, supplies or personal items of the patient; or
- Falsifying documents submitted to the athletic training program
- Leaving an athletic training assignment without properly advising appropriate personnel
- Violating the confidentiality of information or knowledge concerning the client; or
- Conduct detrimental to the public interest; or
- Discriminating in the rendering of athletic training services; or
• Impersonating a licensed practitioner, or permitting another person to use his/her athletic training identification for any purpose; or

• Aiding, abetting or assisting any other person to violate or circumvent any law or rule or regulation intended to guide the conduct of a Staff Athletic Trainer, Physical Therapist or a Athletic Training Student; or

• Presenting a forged prescription; or

• Selling or attempting to sell a controlled dangerous substance or otherwise making such drugs available without authority to self, friends, or family members; or

• Socializing with patients or clients at local clubs or establishments; or

• Dating patients or clients; or

• While caring for a patient, engaging in conduct with a patient or athlete that is sexual or may reasonably be interpreted as sexual, or in any verbal behavior that is seductive or sexually demeaning to a client, or engaging in sexual exploitation of a client; or

• Obtaining money, property or services from a patient through the use of undue influence, harassment, duress, deception or fraud; or

• Engaging in fraudulent billing practices, including violations of federal Medicare and Medicaid laws of the state medical assistance laws; or

• Allowing own value system to interfere with patient care/well-being.

Violating the ethical code for Athletic Trainers shall include, but not be limited to, the following:

• Lack of respect for human dignity and the uniqueness of the patient, restricted by considerations of social or economic status, personal attributes, or the nature of health problems.

• Fails to safeguard the client’s right to privacy.

• Fails to act to safeguard the client and the public when health care are affected by the incompetent, unethical, or illegal practice of any person.

• Fails to assume responsibility and accountability for individual athletic training judgments and actions.

• Fails to exercise informed judgment and use individual competence and qualifications when seeking consultation, accepting responsibilities, and delegating athletic training activities to others.
An Athletic Training Student is a student and not a Certified Athletic Trainer and is therefore subject to the academic standard review of the Unsafe Athletic Training Practice Guidelines. A violation of these guidelines is a violation of academic standards. Conduct which, falls under these guidelines may also be subject to disciplinary action under the applicable University of Miami conduct code.

SANCTIONS IMPOSED FOR UNSAFE ATHLETIC TRAINING PRACTICE

If an Athletic Training Student demonstrates unsafe behavior in a course(s) or clinical assignment, or Staff assignment, the Athletic Training faculty and/or Athletic Training Staff or Athletic Administration may impose any of the following sanctions:

- Additional learning assignments designed by the faculty to contribute to the achievement of course objectives and change unsafe behavior.
- Immediate suspension from the setting.
- Immediate dismissal from the course.
- Immediate dismissal from the clinical assignment.
- Grade of “F” for course and dismissal from the Athletic Training Program.
- Immediate dismissal from the Athletic Training Staff, Physical Therapy Staff or Athletic Department.

SANCTIONS IMPOSED FOR UNSAFE ATHLETIC TRAINING PRACTICE

If an Athletic Training Student or Staff Member demonstrates unsafe behavior in a course(s) or clinical assignment, or Staff assignment, the Athletic Training faculty and/or Athletic Training Staff or Athletic Administration may impose any of the following sanctions:

♦ Additional learning assignments designed by the faculty to contribute to the achievement of course objectives and change unsafe behavior.
♦ Immediate suspension from the setting.
♦ Immediate dismissal from the course.
♦ Immediate dismissal from the clinical assignment.
♦ Grade of “F” for course and dismissal from the Athletic Training Program.
♦ Immediate dismissal from the Athletic Training Staff, Physical Therapy Staff or Athletic Department.
UNIVERITY OF MIAMI
Department of Athletic Training

UNSAFE ATHLETIC TRAINING PRACTICE GUIDELINES ACKNOWLEDGEMENT

I, ________________________________, have read and understand the Department of Athletic Training/Athletic Training Program Unsafe Athletic Training Practice Guidelines. I agree to abide by all of the guidelines stated therein. If I fail to adhere to the Unsafe Athletic Training Practice Guidelines, I am aware that I may be disciplined as stated above.

_________________________________________  _____________
Signature                                      Date
SEXUAL HARASSMENT GUIDELINES

Sexual harassment includes, but is not limited to, physical or verbal abuse of a sexual nature including graphic commentaries about an individual's body, sexually degrading remarks used to describe an individual, or unwelcome propositions and physical advances of a sexual nature. Sexual harassment also includes the threat or insinuation that sexual submission or the lack thereof will be used as a basis for employment or education decisions affecting or interfering with an individual's salary, academic standing or other conditions of employment, academic, or career development. Sexual harassment of or by any administrator, faculty member, employee, or student is absolutely prohibited. A violation of the student sexual harassment Guidelines shall constitute grounds for disciplinary action up to and including dismissal/expulsion from the University. The University reaffirms its commitment to the concept of nondiscrimination and to providing an educational forum and work environment free of sexual harassment.

The University student sexual harassment policy provides for an informal and formal grievance procedure. Students who feel they have been sexually harassed or need information about the University of Miami Sexual Harassment Guidelines should contact the Office of Equalit[...]

The Athletic Training Program has adopted the University of Miami Sexual Harassment Guidelines. The following list contains explanations of inappropriate behavior that may be construed as sexual harassment:

- Engaging in conduct with an athlete or patient that is sexual, or may reasonably be interpreted as sexual, is inappropriate behavior and is grounds for immediate dismissal from the AT Program.
- Verbal remarks or comments that are seductive or sexually demeaning to an athlete or patient is inappropriate behavior and is grounds for immediate dismissal from the AT Program.
- Engaging in sexual exploitation of an athlete or patient is inappropriate behavior and is grounds for immediate dismissal from the AT Program.

Athletic Training Students that feel they are a victim of sexual harassment must report this issue to the preceptor immediately. The Program Director and the Head Athletic Trainer must be notified of this issue as well.
ALCOHOL, DRUGS AND TOBACCO GUIDELINES

The use of alcohol, drugs, and tobacco while working as an Athletic Training Student is strictly prohibited. If an ATS is suspected of being under the influence of alcohol, drugs, and/or tobacco they will be dismissed from their responsibilities for the day and they will be subject to disciplinary measures. If there is a second offense, the ATS will be referred to the University of Miami Counseling Center, 21R Merrick Drive, on the Coral Gables campus and removed from the clinical education component of the AT Program. When the ATS demonstrates the initiation and continuation of counseling, he/she may be reinstated into the clinical component of the AT Program. A third offense will constitute grounds for permanent dismissal from the AT Program.

The Program Director/Head Athletic Trainer, along with the Senior Associate Athletic Director, have the discretion to require that the Athletic Training Students be held to the same athletic Drug Testing Guidelines for athletes while working in the Athletic Department at the University of Miami. Please refer to the Student Athlete Handbook for the athletic Drug Testing Guidelines.
CONFIDENTIALITY GUIDELINES

Disclosing any information about a patient’s condition is considered unethical by the NATA. Information regarding an patient’s condition is highly confidential. Any Athletic Training Student that discusses this information outside of the University of Miami health care system may be dismissed from the Athletic Training Program. Athletic Training Students are not permitted to speak to the media, their classmates, their friends, their family, or anyone outside the Athletic Training Staff regarding an patient’s injury/illness. Information regarding the injury/illness of an athlete is released to the media through the Sports Information Office only.

Refer to the Appendix for the Acknowledgement of the Confidentiality Guidelines form that all Athletic Training Students must sign and submit to the Program Director. Students who do not submit this form to the Program Director will be removed from their clinical education setting until the signed form is submitted.

HIPAA PRIVACY & SECURITY AWARENESS TRAINING

Use to following link to complete HIPPA Training
http://privacyoffice.med.miami.edu/documents/hipaa/index.html

Please follow the instructions to complete the training:

1. Click "Next" on the bottom left side of each page to advance.
2. View the slideshow.
3. Complete the quiz.
4. Provide your name in the box provided and click "Print Certificate."
5. Print/save your certificate (do not choose the email option, if necessary, take a screen shot of your certificate. A print out of your scores alone will not be accepted).

FERPA training is not required for undergraduate students.
TRAVEL GUIDELINES

Traveling with athletic teams is a valuable learning experience for ATSs. Athletic Training Students are reminded that while traveling they are representing the University of Miami, the athletic training profession, the AT Program and themselves.

The ATS’s supervising Athletic Trainer will discuss potential travel opportunities and budget ramifications with the Head Coach of the team they are working with. The Athletic Training Student will have the greatest opportunity to travel with teams that are busing to events. (During championship events, flights are possible as determined by the Athletic Administration). When it is determined that a student may travel, the cost of that travel (room and meals) may be paid by the sport.

The ATS must follow these guidelines while traveling:

- Dress should be equivalent to the team dress code
- Obey team rules, including curfew
- If going anywhere without the team, clearance must be obtained by the supervising preceptor
- Consumption of alcohol or tobacco products is strictly prohibited
- Do not hangout in athletes’ rooms.

The ATS that violates these guidelines is subject to disciplinary action as determined by the Program Director and the supervising Preceptor.

*ATS may NOT travel without a preceptor (this included on campus and off-campus). This is a violation of CAATE standards regarding direct supervision and may be a violation of the State Practice Act.*
DRESS CODE GUIDELINES

It is important that all members of the Athletic Training Students be readily identified and professionally dressed at all times. Various AT gear may be issued to Athletic Training Students at the beginning of each academic year. Slacks and an Athletic Training issued polo shirt are generally worn in the Athletic Training Facility during clinic/rehabilitation hours. During team practice hours, shorts of a professional length may be worn with an Athletic Training issued polo shirt or T-shirt. In addition to polo shirts and T-shirts, the Athletic Training Department also issues mesh shorts that are usually green, gray or black. Observational students may wear shorts of a professional length that contain pockets or slacks with an issued Orange T-shirt or polo shirt containing a University of Miami logo.

The apparel issued by the Athletic Training Department should be worn in the Athletic Training facility, at practices, and at games, if applicable. The Athletic Training uniform is to be clean, presentable, and worn in a professional manner at all times. If an ATS is not in uniform or looks unprofessional, he/she will be asked to leave the clinical site, clinical lab, or official AT meeting and he/she will subsequently miss those clinical hours, points, or related grades for the day. The following list outlines the dress code:

Not Permitted:
- Blue jeans material, tights, or cycling shorts are not permitted.
- Clothing is not permitted if it contains the following: an advertisement for alcohol or tobacco, fraternity or sorority letters, logos from other colleges/universities. The only exception is for student interns from other universities; they are permitted to wear their school logo.
- Open toe shoes/sandals or sandal-type shoes are not permitted
- Hats are not permitted inside buildings.
- Yoga pants, tights, and spandex pant are not permitted (except lab classes as applicable)
- Tank tops and halter tops are not permitted (Tanks may be worn for Lab classes as applicable)

Other Dress Code Rules:
- University of Miami nylon wind suits may be worn if it has been issued by the Athletic Training Department.
- University of Miami sweatshirts may be worn if it has been issued by the Athletic Training Department.
- Shoes that enclose the toes must be worn with socks
- Hats may be worn for outdoor events only.
- Jewelry should be tasteful, professional, and conservative; large or dangling jewelry is not permitted. Earrings are permitted; however, other exposed body piercing is not permitted.
- When traveling, students are required to adhere to the team dress code.
- Game day dress will be determined by the sport covered.
- Clothing issued by the Athletic Training Department is not permitted for social events and should not be worn outside of Athletic Training or Athletic Department events.
- Athletic Training Students must adhere to this dress code while completing their clinical education experience and when working any event sponsored by the University of Miami, the Athletic Training Program, or the Clinical Site.
- Professional dress is required for the clinic, professional activities, and in the classroom/
morning meetings for presentations and when there is a guest speaker. For professional dress clothes must be neat and wrinkle free. Dress pants or “Khaki” style pants & polo shirt (shirt MUST be tucked in) with walking shoes are considered appropriate professional dress. It is fine to wear the school department logo shirts and tennis shoes are okay as well if they are neat and clean.

**PERSONAL HYGIENE GUIDELINES:**

- Personal hygiene is necessary while working as a health care professional, therefore; the athletic training student must practice good hygiene
- Long hair should be pulled back when providing patient care.
- Naturally occurring hair colors (not green, blue, etc.) are recommended
- Beards and mustaches may be worn if kept neatly trimmed. Facial hair will not be allowed if it interferes in patient care (i.e., masks not fitting properly)
- Nails should be kept clean and a short length so as not to interfere with work and patient care

You should always remember that you are now representing the AT department, AT profession, your class and the health professions. Your physical appearance should reflect pride in who you are what you do and all that you represent. For example, you should not show up at the clinic wearing jeans, shorts, or a T-shirt. Again, if you are not dressed appropriately you will be asked to leave.

**UNIVERSITY DRESS STANDARDS**

Failure to wear suitable attire on the campus and/or failure to comply with posted dress standards is prohibited. Students and/or guests may be required to leave University property or University sponsored events for failure to comply with this regulation.

Revised 9/2019
APPENDIX
AT Program Forms
ATHLETIC TRAINING STUDENTS INFORMATION SHEET

Name:_________________________________

Campus Address: ____________________________________________________________
____________________________________________________________________________
Campus Phone #: _______________________
Cell Phone #:________________

Home Address (summer mailing):
____________________________________________________________________________
____________________________________________________________________________

Home Phone #: _______________  DOB: _____________________
Email: ____________________________  C#:________________________
Student #:________________________

Driver’s License #: _______________  State: ______________________

Emergency Contact Name:_____________________________

Emergency Contact Phone#: ____________________________  Cell __________

Clothing sizes

T-shirt Size:  XS   S   M   L   XL
Pant Size:    XS   S   M   L   XL
Shoe Size:    Men   Women   Size______________
AT PROGRAM ADVISOR CHECKLIST

NAME: _____________________________________________________________

ID#: _____________________________________________________________

I understand that the role of an Academic Advisor is to advise me on such matters as course offerings and graduation requirements, but I am solely responsible for ensuring that I have taken all courses and complete all other requirements necessary to the completion of a University of Miami degree. I further understand that it is my responsibility to read the University Bulletin and the Athletic Training Program Guidelines Manual, which contain all rules and requirements pertaining to the completion of a University of Miami degree.

The Student has been advised of the following requirements and has initialed each item in acknowledgement as it is explained by the Advisor:

______ I am aware that I must meet the health requirements of the Athletic Training Program.

______ I am aware that I must meet the technical standards of the Athletic Training Program.

______ I am aware that I must meet the retention criteria to remain in the Athletic Training Program.

______ I am aware that I must create a Course Advising Plan with my advisor

______ I am aware that all Athletic Training Major courses must be completed at the University of Miami.

______ I am aware that all Athletic Training Major courses must be taken in the proper sequence.

______ I am aware that I must complete all clinical education requirements to be eligible for graduation.

______ I am aware that I must maintain a cumulative GPA of 3.0 in the Athletic Training Major courses to be eligible for graduation. I am aware that I must receive a grade of “C” or better in all Athletic Training classes (A grade of “B” or better required and for specific classes during the initial retention process, see retention policy).

______ I am aware that I must apply for Graduation during my last semester.

___________________________________________________  ______________________
Student’s Signature  Date

___________________________________________________  ______________________
Program Director’s Signature  Date
SANCTIONS IMPOSED FOR UNSAFE ATHLETIC TRAINING PRACTICE

If an Athletic Training Student or Staff Member demonstrates unsafe behavior in a course(s) or clinical assignment, or Staff assignment, the Athletic Training faculty and/or Athletic Training Staff or Athletic Administration may impose any of the following sanctions:

♦ Additional learning assignments designed by the faculty to contribute to the achievement of course objectives and change unsafe behavior.
♦ Immediate suspension from the setting.
♦ Immediate dismissal from the course.
♦ Immediate dismissal from the clinical assignment.
♦ Grade of “F” for course and dismissal from the Athletic Training Program.
♦ Immediate dismissal from the Athletic Training Staff, Physical Therapy Staff or Athletic Department.

UNIVERISTY OF MIAMI
Department of Athletic Training

UNSAFE ATHLETIC TRAINING PRACTICE GUIDELINES ACKNOWLEDGEMENT

I, ____________________________________________, have read and understand the Department of Athletic Training/Athletic Training Program Unsafe Athletic Training Practice Guidelines. I agree to abide by all of the guidelines stated therein. If I fail to adhere to the Unsafe Athletic Training Practice Guidelines, I am aware that I may be disciplined as stated above.

____________________________________________  ________________
Signature                                      Date
Athletic Training education requires that the accumulation of scientific knowledge be accompanied by the simultaneous acquisition of skills and professional attitudes and behavior.

The University of Miami School of Education and Human Development, Department of Kinesiology & Sports Sciences, awards a Bachelor’s of Science Athletic Training degree to students who successfully complete the curriculum. Students are expected to acquire a broad base of knowledge and skills, and competencies of an entry-level Athletic Trainer as well as meet the expectations of the program’s accrediting agency, The Commission on Accreditation of Athletic Training Education (CAATE).

Bachelor’s of Science Athletic Training degree will be required to acquire the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care. In order to learn the variety of tasks needed to become proficient as an Athletic Trainer, the student must be able to perform the following tasks, which are all essential requirements of the program: observation, communication, motor, conceptual (integrative and quantitative), and behavioral/social.

**Observation**
The candidate must be able to observe demonstrations and experiments in basic and applied sciences, including, but not limited to human anatomy and physiology, neuroscience, as well as in didactic courses in Athletic Training theory and practice for normal and pathologic states. A candidate must be able to observe a patient accurately at a distance and close at hand. Observation requires the use of common sense, as well as the functional use of the senses of vision, audition, olfaction, and palpation.

**Communication**
A candidate must be able to elicit information from patients, describe the patient’s mood, activity and posture, and perceive and accurately report nonverbal communications. A candidate must be able to communicate effectively and sensitively with coaches, administrators, patients and their families. Communication includes not only oral, but also reading and writing. The candidate must be able to communicate effectively and efficiently with all members of the health care team in both immediate and recorded modes.

**Motor**
Candidates should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, manual positioning of body segments and other evaluative procedures. A candidate must be able to do basic screening and examinations (physiological measures such as BP, HR and respiration), diagnostic procedures (palpation, manual muscle testing, goniometry, ligament laxity testing, sensory evaluation, gait analysis, balance assessment), and review X-rays. A candidate must be able to lift an adequate amount of weight (approximately 50 pounds) in order to assess and lift a patient as necessary. A candidate must be able to execute motor movements reasonably required to provide general care and emergency treatment to patients. Examples of emergency treatment reasonably required of Athletic Training students are cardiopulmonary resuscitation, spine stabilization for head or neck injury and application of pressure to stop bleeding. Additionally, candidates must be able to perform debridement
of wounds and other physical assessment maneuvers, where such actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision.

**Conceptual-Integrative and Quantitative Analysis**
These abilities include measurement, calculation, reasoning, analysis, synthesis, and retention of complex information. Problem solving, the critical skill demanded of Athletic Training practitioners, requires all of these intellectual abilities. In addition, the candidate should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.

**Behavioral/Social Attitudes**
Candidates must possess the emotional health required for full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to an evaluation, diagnosis and care of patients, and be able to develop mature, sensitive and effective relationships with patients. Candidates must be able to tolerate physically-taxing workloads and to function effectively under stress. They must be able to adapt to changing environments both indoor and outdoor, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities that are assessed during the admissions and education process.

Completion of the program’s technical standards does not guarantee a student’s eligibility for the Board of Certification (BOC) exam.

Students requesting accommodation to meet the technical standards must contact the Office of Disability Services prior to the start of the program or immediately upon a change in health status.

I certify that I have read and understand the technical standards listed above that are required of students selected to participate in the Athletic Training Educational Program and understand that they are essential requirements of the program. I understand that if, for any reason, my health status changes, I am required to update my signature.

Print Name: ____________________________  C Number: ________________

_________________________________________  Date: _____________
Signature of Student

_________________________________________  Date: _____________
Signature of Program Director
### MEDICAL HISTORY

**Have you ever had:**  (if yes, please comment)

<table>
<thead>
<tr>
<th>Condition</th>
<th>Yes</th>
<th>No</th>
<th>Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiovascular Disorders/Disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allergies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Speech Impairments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visual Impairments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing Impairments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High Blood Pressure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asthma or other Respiratory Problems</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis/Liver Disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fainting Spells, Epilepsy or Convulsions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kidney of Bladder Disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any Previous Surgeries</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communicable Diseases</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health disorder</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are you currently on any medications?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have a disability that would prevent you from meeting the Technical standards for the Athletic Training Program?</td>
<td>Yes</td>
<td>No</td>
<td>Comments:</td>
</tr>
</tbody>
</table>
## Orthopedic History (if yes, please indicate left or right and list the approximate date)

<table>
<thead>
<tr>
<th>Neck</th>
<th>No</th>
<th>Yes</th>
<th>Right</th>
<th>Left</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pinched nerves</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burners/ stingers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fractures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sprains</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pains</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Hand/Wrist/Fingers</th>
<th>No</th>
<th>Yes</th>
<th>Right</th>
<th>Left</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dislocations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tendon injuries</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fractures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sprains</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Spine/Back</th>
<th>No</th>
<th>Yes</th>
<th>Right</th>
<th>Left</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ruptured disc</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Muscle spasm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stiffness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pain w/ lifting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Numbness in legs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pelvis/ Hips</th>
<th>No</th>
<th>Yes</th>
<th>Right</th>
<th>Left</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Groin pulls</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hip pointers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fractures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Shoulder/Clavicle</strong></td>
<td>No</td>
<td>Yes</td>
<td>Right</td>
<td>Left</td>
<td>Date</td>
</tr>
<tr>
<td>-----------------------</td>
<td>----</td>
<td>-----</td>
<td>-------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>Separations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dislocations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fractures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Slipping in joint</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pain with throwing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Arm</strong></th>
<th>No</th>
<th>Yes</th>
<th>Right</th>
<th>Left</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calcium deposits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burners/stingers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fractures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Elbow</strong></th>
<th>No</th>
<th>Yes</th>
<th>Right</th>
<th>Left</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dislocations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tennis elbow</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fractures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Thigh</strong></th>
<th>No</th>
<th>Yes</th>
<th>Right</th>
<th>Left</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quad strain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hamstring strain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fractures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Torn muscles</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calcium deposits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lower Leg</td>
<td>No</td>
<td>Yes</td>
<td>Right</td>
<td>Left</td>
<td>Date</td>
</tr>
<tr>
<td>------------</td>
<td>----</td>
<td>-----</td>
<td>-------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>Shin splints</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Achilles pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Torn Achilles</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fracture</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calf pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Knee</th>
<th>No</th>
<th>Yes</th>
<th>Right</th>
<th>Left</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Torn cartilage</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knee cap pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fractures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ligament injury</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Swelling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Locking</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Giving way</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dislocations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wear braces</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Casted</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arthroscopy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Feet/Toes</th>
<th>No</th>
<th>Yes</th>
<th>Right</th>
<th>Left</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dislocation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Turf toe</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fractures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sprains</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wear orthotics</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ankle</td>
<td>No</td>
<td>Yes</td>
<td>Right</td>
<td>Left</td>
<td>Date</td>
</tr>
<tr>
<td>--------------</td>
<td>----</td>
<td>-----</td>
<td>-------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>Dislocations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Casted</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fractures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sprains</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Braces</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please use this space provided below to explain in detail the questions you have answered with a Yes response.

I do hereby state that, to the best of my knowledge and belief, the orthopedic history that I have provided is correct and accurate.

___________________________  ________________________
Athletic Training Student Signature  Date

___________________________  ________________________
Parent’s signature (if student is under 18 years old)  Date
# PHYSICAL EXAMINATION FORM

<table>
<thead>
<tr>
<th>Athletic Training Student Name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____________________________</td>
<td><em><strong><strong>/</strong></strong></em>/_____</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Social Security Number</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>________________________</td>
<td><em><strong><strong>/</strong></strong></em>/_____</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sex</th>
<th>Race</th>
<th>Height (Ft)</th>
<th>Weight (Current)</th>
<th>Weight (1 year ago)</th>
<th>B.P.</th>
<th>Pulse</th>
<th>Allergies</th>
<th>Tetanus Toxoid</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Normal</th>
<th>Abnormal</th>
<th>(Check each item in appropriate column; enter “NE” if not evaluated)</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>Head, face, neck, scalp</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>Nose</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>Mouth, throat</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>Ears, tympanic membranes</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>Eyes (general)</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>Lungs, chest</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td>Heart (PMI, rate, rhythm, sounds)</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>Skin, lymphatics</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>Identifying body marks</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>Neuromuscular Exam</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td>Vaccination/Immunization Review</td>
<td></td>
</tr>
</tbody>
</table>

Notes: ____________________________________________________________________________  
_________________________________________________________________________________
_________________________________________________________________________________

I certify to the best of my knowledge that all information given to the physician during this physical exam is true.

_________________________________________________________________________________
_________________________________________________________________________________

____________________________________________   _____/_____/_____  
Athletic Training Student’s Signature  Date

I certify that the above student meets the Technical Standards of the Athletic Training Program.

_________________________________________________________________________________
_________________________________________________________________________________

____________________________________________   _____/_____/_____  
Physician’s Signature  Date

Pass    Fail  
(Circle One)
SEXUAL HARASSMENT POLICY SIGNATURE FORM

Sexual harassment includes, but is not limited to, physical or verbal abuse of a sexual nature including graphic commentaries about an individual's body, sexually degrading remarks used to describe an individual, or unwelcome propositions and physical advances of a sexual nature. Sexual harassment also includes the threat or insinuation that sexual submission or the lack thereof will be used as a basis for employment or education decisions affecting or interfering with an individual's salary, academic standing or other conditions of employment, academic, or career development. Sexual harassment of or by any administrator, faculty member, employee, or student is absolutely prohibited. A violation of the student sexual harassment Guidelines shall constitute grounds for disciplinary action up to and including dismissal/expulsion from the University. The University reaffirms its commitment to the concept of nondiscrimination and to providing an educational forum and work environment free of sexual harassment.

The University student sexual harassment policy provides for an informal and formal grievance procedure. Students who feel they have been sexually harassed or need information about the University of Miami Sexual Harassment Guidelines should contact the Office of Equality Administration at 305-284-3064. (Refer to the Student Rights and Responsibilities document).

The Athletic Training Program has adopted the University of Miami Sexual Harassment Guidelines. The following list contains explanations of inappropriate behavior that may be construed as sexual harassment:

♦ Engaging in conduct with an athlete or patient that is sexual, or may reasonably be interpreted as sexual, is inappropriate behavior and is grounds for immediate dismissal from the AT Program.
♦ Verbal remarks or comments that are seductive or sexually demeaning to an athlete or patient is inappropriate behavior and is grounds for immediate dismissal from the AT Program.
♦ Engaging in sexual exploitation of an athlete or patient is inappropriate behavior and is grounds for immediate dismissal from the AT Program.

Athletic Training Students that feel they are a victim of sexual harassment must report this issue to the preceptor immediately. The Program Director and the Head Athletic Trainer must be notified of this issue as well.

I, ____________________________, have read and understand the Athletic Training Program/ University of Miami Sexual Harassment Policy. I agree to abide by all of the guidelines stated therein during my matriculation through the Athletic Training Program. If I fail to adhere to this policy, I am aware that I may be disciplined in accordance with the School of Education & Human Development and University of Miami policies.

________________________________________   ______________________
Student Signature                        Date
CONFIDENTIALITY GUIDELINES SIGNATURE FORM

Disclosing any information about an athlete’s condition is considered unethical by the NATA. Information regarding an athlete’s condition is highly confidential. Any Athletic Training Student that discusses this information outside of the University of Miami health care system may be dismissed from the Athletic Training Program. Athletic Training Students are not permitted to speak to the media, their classmates, their friends, their family, or anyone outside the Athletic Training Staff regarding an athlete’s injury/illness. Information regarding the injury/illness of an athlete is released to the media through the Sports Information Office only.

I, ____________________________________________, have read and understand the Athletic Training Programs Confidentiality Guidelines. I agree to abide by all of the guidelines stated therein during my matriculation through the Athletic Training Program. If I fail to adhere to this policy, I am aware that I may be disciplined in accordance with the School of Education and Human Development and University of Miami policies.

____________________________________________  ________________
Student Signature                               Date
RELEASE OF INFORMATION FOR THE SITE VISIT

I, ________________________________, grant permission to the site visitors for the viewing of my student portfolio, the term "portfolio" includes but is not limited to files that contain, medical records, academic reports, advisement sheets, exam scores, Clinical Proficiency Evaluations etc., for the sole purpose of evaluating the Athletic Training Program’s record keeping process. My signature on this form indicates this understanding. I also understand that except as provided above and as provided for by law or University policy, no information from my student portfolio will be shared outside of the University of Miami’s Athletic Training Program.

________________________________________________________________________
Athletic Training Student’s Signature

________________________________________________________________________
Date
I have read and understand the following (please initial):

_______ You are NOT allowed to perform skills in which you have not been instructed.

_______ Clinical education hours must be recorded on the Athletic Training Hours form as verification for meeting class requirements (including the documentation of the day, month, year, and the type of athletic training experience). You must obtain the signature of your preceptor at the end of each day/week (monthly log due at each monthly meeting).

_______ You are NOT allowed to travel with a team without direct supervision from preceptor (this policy is effective for all clinical education sites and even includes local travel).

_______ Only the athletic training clinical education hours obtained under **DIRECT SUPERVISION** of a preceptor may be counted towards the required 1000 hours for class requirements.

_______ Clinical education hours may be counted for the following:
- Preparation of athletes for practices/competitions
- Treatments before and after practices/competitions
- AT duties during practices/competition
- Injury evaluation/Clinic with a team physician
- Rehabilitation
- Observation of surgery
- In-services
- Escorting a patient to an appointment with a physician or to the emergency room
- Administrative duties such as inventory and supply management of the training facility (including kits, taping tables, storage rooms)

_______ Clinical education hours may NOT be counted for the following:
- Traveling time with a team (on a plane, bus, etc.)
- Team meetings
- Team meals
- Social Time

I, ____________________________________________, have read and understand the Athletic Training Program Clinical Education Guidelines.

__________________________  ______________________
AT Student Signature                    Date
ORTHO OBSERVATION & INTERACTIONS FORM  
ORTHOPECIC PHYSICIAN

ATS Name:__________________________________________  Course: KIN 251 or KIN 261

<table>
<thead>
<tr>
<th>Date</th>
<th>Injury/Condition</th>
<th>Physician</th>
<th>Signature*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Preceptor Signature**: _________________________________

* By signing this form you are acknowledging that you have interacted with this ATS /Physician regarding this injury/condition.
## NON-ORTHOPEDIC INTERACTION FORM

ATS Name: __________________________________________

Course: KIN 443      KIN 444      KIN 455      KIN 456

### General Medicine: Non-Orthopedic Interaction

<table>
<thead>
<tr>
<th>Date</th>
<th>Injury/Condition</th>
<th>Provider</th>
<th>Signature*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Preceptor Signature**: _________________________________

### General Medicine: Non-Orthopedic Interaction

<table>
<thead>
<tr>
<th>Date</th>
<th>Injury/Condition</th>
<th>Provider</th>
<th>Signature*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Preceptor Signature**: _________________________________

* By signing this form you are acknowledging that you have interacted with this ATS /Physician/Provider regarding this injury/condition.
**ORTHOPEDIC EVALUATION/CONDITION PRESENTATION**

*(Student must obtain and verbally present the medical history to the physician)*

<table>
<thead>
<tr>
<th>History</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Observation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Assessment</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Plan</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ATS Name: __________________________________________          Date: ____________

Orthopedist’s Name: ________________________________

Injury/Condition: __________________________________________________________

ATS Signature*:__________________________________________________________

* By signing this form you are acknowledging that you have interacted with this ATS /Physician regarding this injury/condition.

Physician’s Signature*:

* By signing this form you are acknowledging that you have interacted with this ATS /Physician regarding this injury/condition.
NON-ORTHO EVALUATION/CONDITION PRESENTATION
(Student must obtain and verbally present the medical history to the physician or other licensed healthcare provider)

ATS Name: ________________________________ Date: _____________

General Medicine Physician’s Name: ________________________________

Injury/Condition: ________________________________________________

<table>
<thead>
<tr>
<th>History</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Observation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

ATS Signature*: ________________________________________________

Healthcare Provider’s Signature*:

* By signing this form you are acknowledging that you have interacted with this ATS/ regarding this injury/condition.