California State University, Long Beach

Athletic Training Program

Student Handbook

Academic Year 2023-24

Department of Kinesiology

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Table of Contents

I. General Overview 6

AT Program Description 6

AT Program Mission, Vision, and Educational Goals and Objectives 6

1. Vision: 6
2. Mission: 6
3. Goals: 6

AT Program Faculty and Preceptor Directory 7

1. AT Program Faculty 7
2. Preceptor & Clinical Education Sites 7

II. Academic Information 9

Admission Information to AT Program 9

1. Program Pre-requisite Courses 9
2. Program Documents Required for Application 10
3. Admission Requirements 10
4. Steps to Completing your Application 10
5. Application Deadline to the MSAT 11
6. Admission Decisions 11
7. Post-Admission Program Requirements 12

Student Academic Information 13

1. Retention 13
2. Advancement to Candidacy 13

CSULB Graduate Academic Standards 14

1. General 14
2. Academic Probation and Disqualification 15
3. Administrative Academic Probation 16
4. Administrative Academic Disqualification 16
5. Academic Credit 17
6. Academic Load 18

Athletic Training Curriculum 19

1. Degree Requirements 19
2. Athletic Training Course Sequence 21

Clinical Education 22

1. Clinical Overview 22
2. Clinical Education 22

3. Athletic Training Clinical Experiences and Supplemental Clinical Experiences 22
4. Athletic Training Clinical Experiences Time Commitment 23
5. Athletic Training Knowledge, Skills, and Abilities (KSA) 24
6. Clinical Supervision 24
7. Clinical Placement 24
8. Clinical Expenses 25
9. Clinical Evaluation 25
10. Clinical Health and Safety 25
Costs Associated with Athletic Training Program 26
1. University and Department Fees 26
2. AT Program Fees 26
Financial Assistant Information 27
1. Financial Aid 27
2. Scholarship and Funding Opportunities 27
3. NATA and FWATA Scholarship 27
4. Campus Programs and Services 27
III. MSAT Policies 28
Nondiscrimination Policy 28
Background Check Policy 28
1. Purpose: 28
2. Conviction of a Crime 29
3. Initiation of Background Check 29
4. Fees 30
5. Verification 30
6. Access and Privacy 30
7. Positive Background Check 30
8. Applicants with a Felony or Misdemeanor 31
9. Clinical Agency 31
10. Background Check – Search Descriptions 32
Technical Standards Policy 34
Clinical Education in Athletic Training Supervision Policy 36
Preceptor Policy 37
1. Preceptor Criteria 37
2. Preceptor Selection Process 37
3. Maintenance Criteria 38

Professional Conduct Policy 39
1. Professional Behaviors 39
2. Social Media 39
Attendance Policy 41
1. Classroom 41
2. Clinical Education 41
Grade Policies 41
Artificial Intelligence (AI) Policy 41
Athletic Training Student Employment Policy 42
Dress and Grooming Policy 42
1. Dress Guidelines 42
2. Grooming Guidelines 43
Health Insurance Portability and Accountability Act (HIPAA) Policy 43
1. Authorization 44
2. Inspect and Copy Records 44
3. Amendments to Records 45
4. Accounting of Disclosures 45
5. Restrictions of Use of PHI 45
6. Confidential Communications 46
7. Notice of Privacy Practices 46
8. Disclosure of PHI (Protected Health Information) 46
9. Patient Identification 46
10. Release and disclosure of PHI without consent 46
11. De-identified Information 48
12. Expectations for Athletic Training Students 48
Family Educational Rights and Privacy Act (FERPA) Policy 49
Medical Documentation and Confidentiality Policy 50
1. Confidentiality 50
2. Medical Documentation 50
3. Documentation Formats 50
4. Documentation Standards 51
5. Communication and Protection of Health Information 51
6. Expectations for Athletic Training Students 51
Emergency Cardiac Care Policy 52

Clinical Education Probation Policy 53
Clinical Education Dismissal Policy 54
1. Dismissal Procedure 54
2. Student Appeal Procedure 55
3. Formal Appeal Procedure 55
Student Grievance Policy 57
1. Student Grievance Procedure 57
2. Formal Grievance Procedure 58
3. College Hearing Committee 58
4. University Hearing Committee 59
IV. Health and Safety 61
AT Lab Use Policy 61
Covid-19 61
Immunization Policy 62
Blood Borne Pathogen Policy 62
1. Educational Programming regarding Cal-OSHA blood-borne pathogen exposure control and management 62
2. Personal Protection 62
3. Disposal 63
4. General Disinfectant Guidelines 63
Communicable Disease Policy 65
Student Health Maintenance Policy 66
1. Athletic Training Student Illness Procedures 66
2. Prevention 66
3. Sanitation 66
Calibration and Maintenance Policy 67
Emergency Action Plan Policy 67
Radiation Exposure Safety Policy 68
V. Appendices 69
Appendix A 69
Appendix B 70

I. General Overview

AT Program Description

The Master of Science in Athletic Training (MSAT) program prepares individuals for a career as a certified athletic trainer. Athletic trainers (ATs) are health care professionals who collaborate with physicians to optimize activity and participation of patients and clients. The services provided are preventative services, emergency care, clinical diagnosis, therapeutic intervention and rehabilitation of injuries and medical conditions. Athletic Training is recognized by the American Medical Association as a healthcare profession. The Master of Science in Athletic Training (MSAT) is a full-time, cohort-model program.

The Athletic Training Program is accredited by the Commission on Accreditation of Athletic Training Education (CAATE), 6850 Austin Center Blvd., Suite 100 Austin, TX 78731-3184; P: 512-733-9700, TOLL FREE: 844-GO-CAATE (844-462-2283).

AT Program Mission, Vision, and Educational Goals and Objectives

1. **Vision:**

Educate, connect, advocate athletic training.

2. **Mission:**

Assure professional instruction and clinical experiences in the field of athletic training that will allow the students to become certified athletic trainers.

3. **Goals:**

   (a) Develop competent health care providers
   (b) Promote and participate in patient-centered care
   (c) Use evidence to guide practice
   (d) Collaborate with other healthcare professionals
   (e) Maintain professionalism

AT Program Faculty and Preceptor Directory

1. AT Program Faculty

AT Program Faculty	*Position*	*Email*
Mimi Nakajima, EdD, ATC	AT Program Director	Mimi.Nakajima@csulb.edu
Karen Roos, PhD, ATC	Core Faculty	Karen.Roos@csulb.edu
Portia Resnick, PhD, ATC	Coordinator of Clinical Education	Portia.Resnick@csulb.edu
Mary Aja, MS, ATC	Adjunct Faculty	maja@lbcc.edu
Quincy Wang, MD	Medical Director	Quincy.C.Wang@kp.org
Leilani Madrigal, PhD	Associate Professor	Leilani.Madrigal@csulb.edu

2. Preceptor & Clinical Education Sites

Preceptor	**Clinical Education Site**
Abby Sutcliffe	
Abigail Francisco	El Camino College
Adam Quigley	LA Galaxy
Alexandria Lacayo	Mt. San Antonio College
Alexis Colon	LBSU
Alvin Cabrera	Los Angeles Chargers
Ami Hirsh	Team to Win
Andrew Paulin	Mt. San Antonio College (retired)
Anthony Venute	UCLA
Arbhie Guce	
Brian Cable	Cerritos College
Cesar Roldan	LA Galaxy
Charlenne Medina	LBSU
Chaz Kekipi	Orange Coast College
Christian Knighten	LBSU
Christine Turnbull	LBSU
Christopher Chau	Golden West College
Crystal Elston	Long Beach Poly High School
Dennise Gallegos	AIM Sportsplex
Edgar Ortiz	El Camino College
Elva Salcido	Mt. San Antonio College
Emily Watt	UCLA Club Sports
Garth Verdegaal	LBSU
Gina Iniguez	UCLA Club Sports
Gissell Gutierrez	LBCC
Ian Baldwin	LBSU
Jacqueline (Jackie) Miller	LMU
Janice Lee	UCLA
Jarrod Spanjer	LBSU

Jayza DeGuzman	UCLA Club Sports
Jill Sleight	West Coast Sports Medicine Foundation
John Siegel	LBSU Dance
Jose Sanchez Uribe	Santa Ana College
Julie Beveridge	LA Galaxy
Julius Murphy	LA Galaxy
Karen Bloch	Bloch Wellness
Kevin Anderson	Mater Dei High School
Kevin Mark	Mt. San Antonio College
Kirsten Maroney	Golden West College
Lesley Brown	Mater Dei High School
Madeline Schweppe	LMU
Marc Reichling	UCLA
Mark Pocinich	UCLA
Mary Aja	Long Beach City College
Matthew Brandt	UCLA
Megan-Rose Beckman	Long Beach City College
Melody Mohebbi	St. John Bosco HS
Michael Landas	Mt. San Antonio College
Michael Nakahara	Orange Coast College
Michael Rivera	LBSU
Monica Dinius	Cerritos College
Nicole Briones	UCLA
Nicole Nootbaar	UCLA
Nicolette Marinello	Cypress College
Oscar Rinon	UCLA Recreation Sports
Pat Frohn	Golden West College
Patricia Bellali	Pasadena City College
Rachael Kirkpatrick	Cypress College
Randy Beckman	Long Beach City College
Randy Harris	El Camino College
Randy Nguyen	LBSU
Ross Nathan	Hand & Wrist Center
Rudy Aguilar	Pasadena City College
Scott Tucker	Cypress College (retired)
Sam O'Leary	LA Chargers
Sean Higgs	
Sean Shahmirzadi	LA Galaxy
Sydney Kantor	Saddleback Community College
Tiana Augustus	
Tyler Huesca	Los Alamitos High School
Tyler King	LMU
Vanessa Munoz	
Victoria Jackson	UCLA Club Sports
Wilda Jarrett	Retired
Winnie Voong	Santa Ana College

II. Academic Information

Admission Information to AT Program

Admission to the Master of Science in Athletic Training (MSAT) is a two-step process: 1) Applicants will complete and submit the online application to the program through ATCAS (Athletic Training Centralized Application Service) (http://atcas.liaisoncas.org/) and 2) Applicants that are offered informal admission after the interview will complete the Cal State Apply application.

Admission shall be granted on a competitive basis; meeting the admission requirements qualifies an individual for, but does not guarantee admission to the program. The MSAT degree program is a four-semester cohort model with instruction beginning in the Fall term

1. **Program Pre-requisite Courses**

a. Hold, or be eligible to hold, an acceptable baccalaureate degree from an institution accredited by a regional accrediting association or have completed equivalent academic preparation as determined by an appropriate campus authority, by the end of the spring semester prior to admission to the program.
b. Have attained a cumulative grade point average of at least 3.00 (A=4.00).
c. Have been in good academic, professional, and clinical standing at the last institution and if applicable in the last entry-level athletic training educational program attended
d. Have successfully completed the following courses with a minimum of "C" and a minimum cumulative grade point average of 3.00 by the end of the spring semester prior to the year of admission to the program. No course may be repeated more than once and no more than 3 prerequisite courses may be repeated. CR/NC grades, correspondence courses, or independent study courses cannot be used for prerequisite requirements. It is recommended that no more than two (2) classes may be in progress during the spring semester of application.

Required Courses:

- Human Anatomy (1 semester with lab)
- Human Physiology (1 semester with lab)
- General Psychology (1 semester)
- Physics (1 semester)
- Chemistry (1 semester)
- Biology (1 semester)
- Biomechanics (1 semester)
- Exercise Physiology (1 semester)
- Nutrition (1 semester)
- Prevention and Care of Athletic Injuries (1 semester)
- Statistics (1 semester)

2. Program Documents Required for Application

a. A minimum of two (2) letters of recommendation attesting to the potential for success as an athletic trainer and/or the scholarly potential of the applicant:
    - At least one letter must be from a BOC (Board of Certification for the Athletic Trainer) certified athletic trainer with whom the applicant had a professional association, and
    - At least one letter must be from a professor for a prerequisite course which the applicant completed.
b. Provide documentation of knowledge of athletic training through a minimum of 150 documented hours of volunteer experience under the direct supervision of a BOC certified athletic trainer.
c. Provide a written statement of purpose reflecting the applicant's commitment to athletic training.

3. Admission Requirements

Admission to the Master of Science in Athletic Training (MSAT) is a three-step process:

a. Submit a completed ATCAS application
b. Interview
c. Complete Cal State Apply

4. Steps to Completing your Application

a. Applicants will complete and submit the online application to the program through ATCAS (Athletic Training Centralized Application Service) (http://atcas.liaisoncas.org/)
    1. The ATCAS application requests the below information:
        - Official transcripts of all academic work attempted
        - A minimum of two letters of recommendation attesting to the potential for success as an athletic trainer and/or the scholarly potential of the applicant
            - One letter must be from a BOC (Board of Certification for the Athletic Trainer) certified athletic trainer with whom the applicant had a professional association
            - One from a professor for a prerequisite course which the applicant completed
        - Documentation of knowledge of athletic training through a minimum of 150 documented hours of volunteer experience under the direct supervision of a BOC certified athletic trainer

- Written statement of purpose reflecting the applicant's commitment to athletic training
- Prerequisite requirements. All courses (prerequisite and overall) must be taken from an accredited institution

b. Qualified applicants will be invited for an interview with the MSAT Program Admission Committee
c. Applicants that are offered informal admission after the interview will need to complete the Cal State Apply application (CSU requirement) by April 15th to accept the offer of admission
d. (International Students Only) - applicants who do not hold a bachelor's or master's degree from a U.S. regionally accredited institution are required to satisfy English language requirements. The following test results are accepted by CSULB: TOEFL, IELTS, Pearson, Eiken, or ALI information.

5. Application Deadline to the MSAT

There are two deadlines for the MSAT program application. Regardless of the admission deadline, incomplete applications will not be reviewed until finalized. All applicants must complete the ATCAS application by:

a. Priority Review Deadline
    i. December 1st
    ii. These applicants will be given priority consideration and highly qualified applicants may be invited for interviews by the MSAT Admissions Committee in December or January.
b. Regular Admission Deadline
    i. February 15th
    ii. If there is room available in the incoming cohort, applicants who apply during this cycle may be offered an interview. We recommend that interested students apply as early as possible. The program reserves the right to extend the deadline to accept and review of ATCAS applications after the regular deadline if space in the cohort exists.

6. Admission Decisions

a. Process for Student Selection to the Program
    i. Upon receipt of completed applications, the MSAT Admissions Committee will conduct initial review of applications. Qualified applicants will be invited for an interview with the MSAT Admissions Committee.
    ii. Applicants will be evaluated based on:
        1. Undergraduate GPA (15%)
        2. Pre-requisite GPA (15%)
        3. Letter of Recommendation (20%)
        4. Essay (15%)

5. Pre-professional Hours (10%)
6. Interview (25%)

b. The CSULB MSAT program conducts a rolling admission. The process of application review will begin in December, and will be repeated until the April deadline or until the cohort is full. Applicants are recommended to apply early.
c. Only applicants deemed eligible to be admitted to the University for Graduate Programs will be officially admitted for admission into the MSAT program.

7. Post-Admission Program Requirements

After admission to the Master of Science in Athletic Training Program, the following documentation must be submitted to the AT Program prior to the beginning of program instruction.

a. Health insurance, titers and immunizations (HBV series, MMR, Tdap, chicken pox, and meningococcal, and any others required)
b. Negative TB Test (within past 2 months)
c. BOC (Board of Certification for the Athletic Trainer) identification number
d. Valid CPR card (as outlined by the BOC)
e. Federal Criminal Background Check
f. Signed Documentation: Ability to meet Technical Standards with or without accommodations, Statement of Confidentiality, and Communicable Disease Policy.
g. Adhering to the Athletic Training Programs Technical Standards and academic performance standards functions are required for clinical coursework.

Student Academic Information

1. Retention

a. Maintain a 3.00 or better grade point average in all graduate work completed at CSULB.
b. Make continuous satisfactory progress toward the degree objective.
c. Each major course must be completed with a grade of "C" or better.
    i. A course in which a grade lower than a "C" is received must be repeated and successfully completed prior to enrolling in any other course for which it is a prerequisite or progression in the program.
    ii. The program is cohort course sequenced, to repeat a course means the student will be placed on administrative-academic probation and must take an educational leave until the course is offered again in the program sequence. The student will rejoin the program sequence with the next cohort to retake the course.
    iii. A course can be repeated only once. Failing to meet the course grade standard on the second attempt will result in administrative-academic disqualification from the program.

2. Advancement to Candidacy

In order to advance to candidacy, each student must:

a. Attainment of classified status as a student in a graduate program at CSULB.
b. Meet the University requirements for advancement to candidacy.
c. Complete a minimum of one semester (fall session) of graduate level coursework in the program.
d. Be enrolled during the term in which advancement to candidacy takes place.
e. Obtain approval for one's individual program plan from the Graduate Advisor and then from the Associate Dean of the College of Health and Human Services.

CSULB Graduate Academic Standards

The following are University Regulations Governing the Master's Degree from the University Catalog (http://catalog.csulb.edu/)

1. General

The following regulations apply to all graduate degree programs. Specific academic and curricular requirements of individual degree programs are given in the departmental listings of the university catalog.

In addition to the additional requirements a particular degree program has, all candidates for a master's degree must complete the requirements listed below as outlined in the university catalog:

a. Maintain a cumulative, graduate, grade-point average of 3.0 calculated on all upper-division and graduate-level coursework attempted by the candidate at CSULB after completion of a baccalaureate degree. Exceptions to the 3.0 cumulative, graduate, grade-point average may be made only on the recommendation of both the departmental faculty offering the degree and the college dean or designee and approval by the Dean of Graduate Studies or designee.
b. Maintain at least a 3.0 average in all the courses listed on the program of study.
c. Obtain a minimum grade of C for a course to count in a program of study. Academic unit(s) granting the degree(s) may require higher minimum grades for specifically indicated courses. A student may retake a course once in order to achieve a minimum grade. A grade for a course taken the second time may satisfy a minimum grade requirement but shall not replace the grade previously earned in the course on the student's transcript.
d. Make progress towards timely completion of the degree as determined by any milestones that the academic unit granting the degree may have established in writing and communicated to its students. Students failing to make satisfactory progress may be placed on administrative academic probation. Department Chairs or Associate Deans must notify students in writing or via e-mail that they have been placed on administrative academic probation.
e. Complete all required courses on the program of study, which must contain a minimum of 30 units in upper-division and graduate courses. Some degree programs require additional units. Student teaching may not be included in any master's degree program.
f. Complete at least seventy percent (70%) of the required units in the degree program at CSULB in matriculated status or as approved graduate credit earned as a senior. At the option of the department offering a master's degree, a graduate student may use credit taken at CSULB in non-matriculated status or approved transfer credit toward up to thirty percent (30%) of the units of the program of study. Units applied towards a previous undergraduate degree cannot be transferred for credit towards a master's degree. The academic unit granting the degree may waive units and course

requirements provided the minimum thirty-unit requirement is met in accordance with Title V.

g. Complete at least seventy percent (70%) of the minimum units required for the program of study in courses at the 500 and 600 levels, including double numbered courses (400/500). At least fifty percent (50%) of the units required for the degree shall be in courses organized primarily for graduate students.
h. Complete a thesis or project subject to all requisite approvals or pass a final, comprehensive examination. Some programs require both a final comprehensive examination and either a thesis or project. Others allow students a choice between a thesis option and a non-thesis, comprehensive examination option. Failure of either the comprehensive examination or thesis/project requirement is failure of both options. In other words, a student failing the comprehensive examination may not proceed to the thesis or project option or vice versa. Once a student has completed a semester of enrollment toward fulfillment of either the comprehensive examination or thesis option, the student may not change from one option to the other without the approval of the graduate advisor, the department chair, and the appropriate dean or designee.
i. Complete all requirements of the degree program within seven (7) years of the date the student initiated the program (i.e., the date [semester] when the student first completed a course appearing on the student's program of study). The Dean of Graduate Studies or designee may grant an exception to this requirement if warranted by individual circumstances and if the student re-validates the outdated work by re-taking the course, passing a comprehensive examination in the relevant course or subject field work, or fulfilling such other demonstrations of competence as may be prescribed by the department in its approved policy on revalidation.
j. Maintain continuous enrollment every spring and fall semester by registering in a course or in GS 700 or having received an approved educational leave. Registration in GS 700 is restricted to graduate students who have completed all course work, have been advanced to candidacy, and have departmental approval. Registration in a course or in GS 700 also is required in winter or summer session if that is when a student plans to graduate. Registration in GS 700 is CR/NC only.

2. Academic Probation and Disqualification

For purposes of determining eligibility to remain at the University, both quality of performance and progress toward the student's objective will be considered. Eligibility will be determined by use of grade points and grade-point average (University Catalog Academic Probation and Disqualifications).

Students who are enrolled in a graduate degree program in conditionally classified or classified standing will be subject to academic probation if they fail to maintain a cumulative grade-point average of at least 3.0 (as defined earlier under General Regulations Governing the Master's Degree) in all units attempted subsequent to admission to the degree program.

Every graduate student who has been advanced to candidacy must maintain a cumulative grade-point average of 3.0 and a grade-point average of 3.0 in all courses applicable to the degree. Candidacy for an advanced degree may be revoked if a student's cumulative grade-point average falls below 3.0 at any time. Students who become subject to dismissal from an advanced degree program will be notified of the action taken by the College Associate Dean or the Dean of Graduate Studies or designee.

Graduate and post-baccalaureate students are subject to disqualification if while on probation they fail to earn grades of sufficient quality to remove themselves from probationary status. Disqualification will bar such students from any further enrollment at CSULB.

3. Administrative Academic Probation

A graduate student may be placed on administrative-academic probation by action of appropriate campus officials for any of the following reasons:

a. Withdrawal from all or a substantial portion of a program of studies in two successive semesters or in any three semesters, unless the withdrawals were directly associated with a chronic or recurring medical condition or its treatment;
b. Repeated failure to progress toward the stated degree objective or other program objective (when such failure appears to be due to circumstances within the control of the student);
c. Failure to comply, after due notice, with an academic requirement or regulation which is routine for all students or a defined group of students (e.g., failure to take placement tests, failure to complete a required practicum).

MSAT Examples of Administrative-Academic Probation

a. Failure to adhere to the NATA Code of Ethics
b. Violation of applicable state or federal law related to patient care (e.g., HIPAA, FERPA)
c. Failure to maintain Emergency Cardiac Care certification
d. Harassment of others including, but not limited to, patients, students, and preceptors during clinical experiences.

4. Administrative Academic Disqualification

A student who has been placed on administrative-academic probation may be disqualified from further attendance if:

a. The conditions for removal of administrative-academic probation are not met within the period specified.
b. The student becomes subject to academic probation while on administrative-academic probation.

c. The student becomes subject to administrative-academic probation for the same or similar reason for which they have been placed on administrative-academic probation previously, although not currently in such status.

In addition, an appropriate campus administrator may disqualify a student who at any time during enrollment has demonstrated behavior so contrary to the standards of the profession for which the student is preparing as to render her/him unfit for the profession. In such cases, disqualification will occur immediately upon notice to the student, which shall include an explanation of the basis for the action, and the campus may require the student to discontinue enrollment as of the date of the notification.

5. Academic Credit

Credit/No Credit Grading

A graduate student may take courses at the 100/200/300/400 levels under the Credit/No Credit grading policy; however, no course in which a grade of "CR" has been assigned may be used to fulfill the requirements for a master's degree, except that the grade of "CR" may be permitted for master's theses or projects to a maximum of six units when the individual department has specifically designated Credit/No Credit grading for the thesis/project course in the department and for field work, practicum, research, and/or internship courses (University Catalog Academic Credit).

For graduate students, courses at the 300/400/500/600/700 levels require "B" level proficiency to merit award of the "CR" grade; at the 100/200 levels "C" level proficiency or better is required for award of the "CR" grade.

The option of Credit/No Credit grading for graduate students on 100/200/300/400-level courses is subject to specific regulations of the individual departments regarding their graduate students and regarding the authorization for this option intrinsic to the approved course. Otherwise, no limitation exists as to the number of courses taken under this policy.

Waiver of Course Requirement and Credit by Examination

No waiver of course requirements or credit by examination may be used to satisfy master's degree requirements. However, the following rules govern course waivers or credit by examination in satisfying prerequisites for advancement to candidacy in any master's degree program.

Any candidate for a master's degree who believes that previous training has provided adequate preparation in a certain area may request a waiver from the department concerned.
A candidate may also apply for course credit by examination, but only for prerequisite courses and not to satisfy any of the requirements for the master's degree. Requests for such examinations must be made to the department concerned and approved by the department

chair. Credit by examination is restricted to courses published in the current CSULB Catalog. Please see Credit by Examination in the General Regulations section of this catalog.

All course credit by examination will be recorded as CR (Credit) and will not be included in calculation of grade-point averages; such credit may not be used to remove a grade of "D" or "F" in a course already attempted, nor may course credit by examination be granted for any course which is a prerequisite to one for which credit has already been received.

6. Academic Load

Eight units per semester is a normal academic load for a full-time graduate student engaged in study toward a master's degree. If a candidate wishes to exceed this limit, it should be discussed with the departmental graduate advisor. The maximum load for graduate students working toward a master's degree is 18 units per semester.

Graduate students who wish to register for more than one unit of credit per week of attendance during the summer session must secure advance approval from the College Associate Dean or Director of Graduate Studies. Petition forms and information may be obtained in the college offices.

Athletic Training Curriculum

1. Degree Requirements

The Master of Science in Athletic Training degree program is a 52-unit, two-year, cohort program that includes clinical education.

Core:

*Take **all** of the following courses*:

- AT 500 Athletic Training Healthcare and Clinical Skills (2) Prerequisite: Admission to the MSAT program. Co-requisite: AT 502, 510, 520, 581, and KIN 696.
- AT 502 Emergency Management in Athletic Training (1) Prerequisite: Admission to the MSAT program. Co-requisite: AT 500, 510, 520, 581 and KIN 696.
- AT 504 Evidence-Based Practice and Testing in Athletic Training (1) Prerequisites: AT 500, AT 502, and KIN 696.
- AT 506 Public Health and Epidemiology in Athletic Training (2) Prerequisites: AT 504.
- AT 510 Athletic Training Clinical Evaluation I (3) Prerequisite: Admission to the MSAT program. Co-requisites: AT 500, AT 502.
- AT 511 Athletic Training Clinical Evaluation II (3) Prerequisites: AT 510.
- AT 515 Medical Conditions and Pharmacology in Athletic Training (3) Prerequisite: AT 581.
- AT 520 Athletic Training Therapeutic Interventions I (3) Prerequisite: Admission to the MSAT program. Co-requisite: AT 510.
- AT 521 Athletic Training Therapeutic Interventions II (3) Prerequisite: AT 520. Co-requisite: AT 511.
- AT 525 Athletic Training Therapeutic Interventions: Therapeutic Modalities (2) Prerequisites: AT 581.
- AT 526 Manual Therapeutic Interventions in Athletic Training (2) Prerequisite: AT 521, AT 525, AT 583.
- AT 530 Management and Professional Issues in Athletic Training (3) Prerequisite: AT 582.
- KIN 579 Psychological Aspects of Sports Injury (3) Prerequisite: Graduate Standing or Consent of Instructor.
- KIN 696 Research Methods and Statistical Analysis (3) Prerequisite: Undergraduate major in Kinesiology or related field, undergraduate Statistic course or equivalent.

Take **one of the following elective courses (3 units)*:

- KIN 540 Biomechanical Factors in Human Movement (3) Prerequisite: KIN 300 or equivalent.
- KIN 541 Applied Biomechanics: Lifting and Work Capacity (3) Prerequisite: KIN 300 or equivalent (trigonometry and PHYS 100A recommended).

- KIN 551 Advanced Exercise Physiology (3) Prerequisite: KIN 301 or equivalent and BIOL 207 or equivalent.
- KIN 552 Exercise Testing and Training in Health and Disease (3) Prerequisite: KIN 301 or equivalent and BIOL 207 or equivalent.
- KIN 561 Musculoskeletal Injuries in Sports (3) Prerequisite: ATEP 207 and KIN 300 or their equivalents and BIOL 208 or its equivalent.
- KIN 562 Advanced Strength and Conditioning (3) Prerequisite: KIN 300, KIN 301.
- KIN 565 Clinical Exercise Electrocardiography (3) Prerequisite: BIOL 207, KIN 301, and/or consent of instructor.
- KIN 566 Biochemical and Hormonal Adaptations to Physical Activity (3) Prerequisite: KIN 301 or equivalent; CHEM 111A, CHEM 112A, or its equivalent.
- KIN 568 Nutrition for Exercise and Performance (3) Prerequisite: NUTR 132, KIN 301.

*Take **all** of following courses*:

- AT 581 Athletic Training Clinical Education I (2) Prerequisite: Admission to the MSAT program. Co-requisite: AT 500, 502.
- AT 582 Athletic Training Clinical Education II (2) Prerequisite: AT 581.
- AT 583 Athletic Training Clinical Education III (2) Prerequisite: AT 582.
- AT 584 Athletic Training Clinical Education IV (2) Prerequisite: AT 583.
- AT 591 Seminar in Athletic Training (1) Prerequisite: AT 583. Co-requisite: AT 584.

*Take **all** of the following courses (6 units):*

- AT 699A Applied Research Project in Athletic Training (2) Prerequisite: KIN 696. Co-requisite: AT 504.
- AT 699B Applied Research Project in Athletic Training (2) Prerequisite: AT 699A.
- AT 699C Applied Research Project in Athletic Training (2) Prerequisite: AT 699B. Advancement to Candidacy.

2. Athletic Training Course Sequence

Term	Course	Course Name	Credit
Fall 1	AT 500	Athletic Training Healthcare and Clinical Skills	2
	AT 502	Emergency Management in Athletic Training	1
	AT 510	Athletic Training Clinical Evaluation I	3
	AT 520	Athletic Training Therapeutic Interventions I	3
	AT 581	Athletic Training Clinical Education I	2
	KIN 696	Research Methods and Statistical Analysis	3
	*KIN	KIN electives	3
		Semester Total	**17**
Spring 1	AT 504	Evidence-Based Practice and Testing in Athletic Training	1
	AT 511	Athletic Training Clinical Evaluation II	3
	AT 521	Athletic Training Therapeutic Interventions II	3
	AT 525	Athletic Training Therapeutic Interventions	2
	AT 582	Athletic Training Clinical Education II	2
	AT 699A	Applied Research Project in Athletic Training	2
		Semester Total	**13**
Fall 2	AT 506	Public Health and Epidemiology in Athletic Training	2
	AT 515	Medical Conditions and Pharmacology in Athletic Training	3
	AT 530	Management and Professional Issues in Athletic Training	3
	AT 699B	Applied Research Project in Athletic Training	2
	AT 583	Athletic Training Clinical Education III	2
	KIN 579	Psychological Aspects of Sports Injury	3
		Semester Total	**15**
Spring 2	AT 526	Manual Therapeutic Interventions in Athletic Training	2
	AT 591	Seminar in Athletic Training	1
	AT 699C	Applied Research Project in Athletic Training	2
	AT 584	Athletic Training Clinical Education IV	2
		Semester Total	**7**

**3-unit elective course needs to be taken during Fall 1, Spring 1 or Fall 2 semester (or summer).*

Clinical Education

1. Clinical Overview

Quality clinical experiences are essential in producing excellent health care professionals. Through interactions with preceptors at various clinical sites, athletic training students gain clinical experiences necessary to develop into competent athletic trainers.

2. Clinical Education

The clinical education component of the Athletic Training (AT) Program consists of four consecutive semesters of clinical experience in various clinical settings. It is the overall plan of the AT Program that the cohort clinical experiences of the athletic training student parallel their didactic coursework.

It is also important to the AT Program and preceptors that the athletic training student be placed in "real world" situations that challenges the Athletic Training Students (ATS) while not putting the patient or the ATS at risk. The overall student learning outcomes of the clinical education component accomplishes these goals with student progression through a three-step model: progression from skill acquisition to skill application and, finally, to skill integration.

The clinical education components include three types of learning opportunities for students to prepare themselves to independent clinical practice. These include athletic training clinical experiences, simulation, and supplemental clinical experiences.

- The athletic training clinical experiences involve direct client/patient care guided by a preceptor who is an athletic trainer or physician. This will compose the majority of the clinical education component.
- Simulation will be used to replace or amplify real experiences with guided experiences that evoke or replicate substantial aspects of the real world.
- Lastly, supplemental clinical experiences are learning opportunities supervised by health care providers other than athletic trainers or physicians.

Course credit is consistent with California State University, Long Beach curriculum policy and practice. The credit for all courses in the AT Program has been approved by the Department, College, and certified via the University Curriculum Festival.

3. Athletic Training Clinical Experiences and Supplemental Clinical Experiences

Over the course of four semesters, students will be assigned to both on-campus and off-campus clinical education experiences. The time commitment for clinical education experiences will increase over each semester, with the final semester involving full-time 40 hours per week immersion in athletic training. When assigned to an off-campus clinical education site, the

students should be prepared to fulfill any additional requirements (e.g., background checks, orientation) as well as transportation to and from that site.

Non-required Experiences:

It is recognized that opportunities for clinical experiences may arise for ATS that are not a part of their formal or required program of study. The California State University, Long Beach AT Program encourages students to take advantage of those opportunities whenever it is possible and appropriate for them to do so.

- ATS who find opportunities working with sports medicine clinic, professional sports teams, club teams, intramurals, or any other off-campus organization work under the policies and procedures of that organization. Unless specifically arranged as an internship with course credit, the arrangement is strictly between the organization and the student.

4. Athletic Training Clinical Experiences Time Commitment

The following are guidelines for clinical experience time commitment that is expected of the ATS. As the ATS progresses through the program, the clinical experience time commitment increases as well.

- AT 581: Average 15-20 hours per week of clinical experience hours at 3 to 4 clinical sites
- AT 582: Average 20-25 hours per week of clinical experience hours at 2 clinical sites
- AT 583: Average 30 hours per week of clinical experience hours
- AT 584: An immersive clinical experience (40+ hours per week for a minimum of 4 weeks) and an average of 30 hours per week of clinical experience hours for the remainder of the semester. The immersive clinical experience may or may not be at the same site as the remaining weeks of clinical experience. (see Appendix B for Immersive Clinical Experience Requirements and Contract)

The ATS are expected to have at least one day off from their clinical site each calendar week.

Keep the following in mind:

Students are expected to spend, on average, two hours of preparation and study for each hour of class time. Thus, a three-unit lecture or discussion course normally demands a commitment of nine hours per week averaged over the semester, with the class meeting for three hours a week. This may be considered sufficient time to enable a student to do satisfactory work.

A student's employment and college time combined should not exceed 60 hours weekly. Students who make no allowances for their employment and outside obligations in planning their college programs will bear full responsibility for the resulting level of scholarship.

5. Athletic Training Knowledge, Skills, and Abilities (KSA)

During the AT Program, athletic training knowledge, skills, and abilities (KSA) will be taught, practiced, learned, and assessed. Some KSAs are taught and evaluated during the regular academic/didactic coursework, and some may be evaluated by preceptors are part of the clinical experience courses.

6. Clinical Supervision

See Clinical Education in Athletic Training Supervision Policy.

7. Clinical Placement

The clinical education rotations and assignments provide opportunities for students to gain clinical experiences associated with a variety of different populations (CAATE Standards for Accreditation of Professional Athletic Training Education Standard 17, 2020), including throughout the lifespan, different sexes, different socioeconomic statuses, varying levels of athletic ability, and non-sport activities.

Clinical education is conducted in such a way as to allow the AT Program faculty/staff to regularly and frequently evaluate student progress and learning, as well as the effectiveness of that experience. It is the responsibility of the Coordinator of Clinical Education to establish the evaluation procedures and instruments and see to their use to assess the effectiveness of the program components.

The students' clinical education requirements are carefully monitored by the Coordinator of Clinical Education and his/her designee.

a. The length of clinical education is consistent with other comparable academic programs requiring a clinical or supervised practicum component. Such policies will be consistent with federal or state student work-study guidelines as applicable to the campus setting.
b. Athletic Training Students are not to serve in the capacity of an employed athletic trainer. ATS are not to act in the capacity of mangers or secretarial support staff. They are not to be expected to perform duties that compromise their educational experience.
c. Students are not paid for their participation in clinical education.
d. Outside Employment: Students are allowed to hold part-time jobs provided they do not interfere with the clinical education aspect of the ATP. Clinical education takes place primarily during the afternoons from approximately 1:00pm to 6:00pm. On occasion these experiences may occur in the morning before courses are offered, depending on the clinical site assignments. The ATP understands that many students must obtain employment to

fulfill financial responsibilities, but students must meet the requirements of the clinical practicum courses.

e. Clinical Rotation Hours: Hours are assigned by the clinical preceptors and may change or vary according to the responsibilities of the ATS. Hours will also vary depending on the clinical education course the student is enrolled in (e.g., ATEP 584 requires immersive experience).
f. Clock hours that are spent travelling will NOT be valid for reporting.

8. Clinical Expenses

The clinical education requirements may incur additional expenses including, but not limited to the following:

- Travel to and from the clinical sites
- Housing (related to immersive experience)
- Clinical attire

See also, Cost associated with MSAT Program.

9. Clinical Evaluation

Evaluations are an integral part of the academic process, both for the program and the ATS. Both ATS and preceptors are required to complete the following evaluations, which include, but are not limited to:

- ATS mid-semester evaluation by preceptor
- ATS end-of-semester evaluation by preceptor
- ATS evaluation of preceptor
- ATS evaluation of clinical site

10. Clinical Health and Safety

For the health and safety of each athletic training students, as well as other clinical staff and patients, each ATS must know, acknowledge, and abide by the Bloodborne Pathogen Guidelines, Communicable Disease Policy, Student Health Maintenance Policy, Technical Standards while completing clinical assignments. In addition, ATS must abide by safety standards at each clinical site.

Costs Associated with Athletic Training Program

1. University and Department Fees

Graduate tuition is determined each year by the California State University system and is subject to change at any time. The most up-to-date and accurate information related to tuition is available through the university website at: https://www.csulb.edu/student-records/tuition-and-fees

2. AT Program Fees

In addition to university and department fees, ATS in CSULB AT Program may have other fees associated with being a student in the program. These expenses are described here with estimates to help with planning. These fees are subject to change from year-to-year.

a. Professional Organization Memberships– NATA Membership ($105 annually)
b. Professional Organization Symposium – The AT Program requires students to attend at least one professional development opportunity a year. This may include NATA Clinical Symposium, FWATA Annual Meeting, etc. ($250~)
c. Travel Expenses - AT students are responsible for transportation (e.g., car, gas, train, bus) to and from assigned clinical sites, which varies each semester.
d. Clothing (some optional) - Students should be prepared to purchase clothing based on the AT Program's Dress and Grooming Policy. Items include, but are not limited to, khaki pants/shorts, collared shirts, inclement weather gear, and a watch.
e. Immunization - Professional program students must provide evidence of the immunizations required for admittance into the university (2 doses of MMR – measles, mumps, rubella; meningococcal vaccine). Students must also receive 3 doses of vaccine (or initiation of the process) or signed waiver of declination of Hepatitis B. An annual influenza vaccination is also recommended and may be required at some sites. Additional vaccines, such as Covid-19, may be required and this policy will be updated accordingly as needed.
f. Clinical site background checks - Some clinical sites may require background checks for MSAT students to be placed at the site in addition to the background check conducted when entering the program. It is common for California high schools to require FBI/DOJ Live Scan background checks. These costs vary each year and any associated costs with obtaining a background check is the responsibility of the student. ($50)
g. Emergency Cardiac Care Certification – Students are required to be CPR and first-aid certified throughout their time in the AT Program. Certification must be completed every other year. ($100)
h. BOC Examination ($330 – subject to change)
i. Sports Medicine Club Dues ($70 – subject to change)

Financial Assistant Information

1. Financial Aid

There are a variety of financial aid programs to assist students and families with meeting expenses. The information concerning student financial assistance may be obtained from Financial Aid, Brotman Hall 101, (562) 985-8403 or by visiting the website at http://www.csulb.edu/financial-aid:

2. Scholarship and Funding Opportunities

There are funding opportunities for student scholarships and travel grants for students to attend academic conferences:

http://www.csulb.edu/graduate-studies-resource-center/campus-funding

3. NATA and FWATA Scholarship

The NATA Foundation Scholarship Program offers scholarship to Undergraduate, Master's and Doctoral students. The number of scholarships varies annually (from 50 to 75), with the amount of the award currently at $2,300 per scholarship. For more information, please see the NATA Foundation website (https://www.natafoundation.org/education/scholarships/).

There are also scholarships available through the Far West Athletic Trainers' Association, which currently sponsors ten scholarship to support student members in District 8. Each scholarship recipient receives a $1,500 monetary award and a plaque. For more information, please see FWATA Scholarship website (https://www.fwatad8.org/committees/scholarships-committee/).

4. Campus Programs and Services

a. ASI Beach Pantry (https://asicsulb.org/corporate/discover/beach-pantry)
b. Basic Needs Program (http://web.csulb.edu/divisions/students/basic_needs_program/)
c. Cal Fresh Outreach Program (http://web.csulb.edu/divisions/students/calfresh/)

Other services and program can be located below:
http://web.csulb.edu/divisions/students/programs.html

III. MSAT Policies

Nondiscrimination Policy

The CSULB AT Program abides by the following nondiscrimination policies:

- CSU EO 1096 and subsequent updates (https://www.csulb.edu/equity-diversity/policies)
- BOC Standards of Professional Practice
- NATA Code of Ethics

Background Check Policy

Background Checks will be conducted on all students who have accepted admission to the MSAT Program prior to the start of their first academic year.

Students who are pursuing a degree in Athletic Training need to be aware of certain elements that potentially can impact clinical education placement, certification, licensure, and future employment. Federal and various state laws are in place that precludes persons with criminal backgrounds from being in contact with children and patients. Where these laws apply, students will be required to undergo a criminal background check which may include live scan fingerprinting and a search of federal and state criminal data bases. Drug testing may also be required. A crime or serious crime conviction may affect a graduate's ability to sit for the BOC certification examination and/or attain state licensure.

1. **Purpose:**

The purpose of conducting the background check prior to beginning the MSAT program are as follows:

a. To help satisfy the AT Program obligation to assure the health, welfare and safety of student athletes, patients, and others at the clinical facilities where the AT Program athletic training students participate in clinical education experiences.
b. To identify, athletic training students whose background checks may interfere with their ability to participate in clinical education experiences.
c. To identify, athletic training students whose background checks may interfere with their ability to obtain professional certification and/or professional licensure.
d. Accredited healthcare facilities [e.g. Joint Commission on Accreditation of Healthcare Organizations (JCAHO)] and some non-healthcare organizations require verification of competency of all individuals who have direct contact with patients or employees. Competency extends beyond technical skill to an individual's criminal history.

2. Conviction of a Crime

Applicants with Prior Criminal Conviction: A BOC applicant who has a prior conviction of any crime (with the exception of misdemeanor traffic offenses or traffic ordinance violations that do not involve the use of alcohol or drugs), or who has been subject to any professional discipline, shall select "Yes" to question one (1) and/or two (2) of the Affidavit section of the BOC Exam Application.

a. Predetermination of the Applicant Eligibility: Individuals with a conviction and/or professional discipline may request a predetermination of eligibility at any time by submitting documentation, prior to submitting an application. Upon review, the BOC will provide the individual written notification of exam eligibility. In the event that additional information is discovered regarding the conviction and/or professional discipline the notification is null and void. The notification does not guarantee exam eligibility.
b. Applicants with a Felony or Misdemeanor: The affidavit portion of the BOC exam application requires candidates to report any felony or misdemeanor conviction. During the application process, candidates must submit an explanation of the events that led to the conviction(s), copy of court documents(s), including, but not limited to, an arrest report, sentence recommendation, compliance of all court requirements and proof of payment of all related fines.
c. Candidates may request a predetermination of eligibility at any time by submitting their documentation prior to their application. The Professional Practice and Discipline Committee of the NATA reviews all convictions. Candidates are notified in writing of the committee's decision. Please review the *Professional Practice and Disciplinary Guidelines and Procedures* for details (www.bocatc.org)

Serious Crime Defined: The term serious crime as used in these rules shall include: 1) any felony; 2) a misdemeanor related to public health, patient care, athletics or education. This includes, but is not limited to: rape; sexual or physical abuse of a child or patient; actual or threatened use of a weapon of violence; the prohibited sale or distribution of controlled substance, or its possession with the intent to distribute; or the use of the position of an athletic trainer to improperly influence the outcome or score of an athletic contest or event or in connection with any gambling activity; and/or an attempt, conspiracy, aiding and abetting, or solicitation of another to commit such an offense. (*BOC Professional Practice and Discipline Guidelines and Procedures, Update January 2019)*

3. Initiation of Background Check

a. Background checks for all MSAT students will be done no sooner than 60 days prior to the first semester of their program.
b. This process shall be conducted through an outside agency as determined by the department.

4. Fees

Cost of the background check shall be the responsibility of the student.

5. Verification

Once the student has completed the background check through the chosen agency of the department, he/she shall submit a certificate of verification to the appropriate program director or designee. This verification shall include appropriate access information as determined by the procedure of the background check agency.

Background checks will be honored for the duration of the student's enrollment in clinical education and the program, if the participating student has not broken attendance at the college/school. The term "attendance' means, literally, attendance in a course for at least one semester unit credit in at least one semester in a calendar year. Culminating in a record of enrollment on the student's official transcript.

6. Access and Privacy

a. Access to the certificate, password, and actual background check shall be limited to following individuals as appropriate:
    i. Department Chair
    ii. Athletic Training Program Director
    iii. Athletic Training Coordinator of Clinical Education
    iv. Department designee (i.e. administrative assistant)
b. The on-line background check information shall be treated as strictly confidential.
c. Under certain circumstances, the Department Chair or Program Director may disclose information to appropriate faculty if it pertains to the clinical education of the student, patient safety, or hospital policy.

7. Positive Background Check

a. A positive criminal record may not automatically disqualify a student from admission.
b. The Athletic Training Program Director and the Coordinator of Clinical Education will identify criteria that would prohibit an individual from clinical education placement based upon *Professional Practice and Disciplinary Guidelines and Procedures* criteria for certification examination eligibility.
c. If a record of criminal activity is revealed through the background check, the student shall be counseled by the Program Director regarding their continuation in the program and implications for licensure.
d. It shall be the responsibility of the student to take remedial action to clear their criminal record according to guidelines for licensure.
e. Each case will be considered individually, and no information will automatically result in the revocation of the student's admission to the program. A decision regarding final

admission will be made only after a careful review of factors including, but not limited to, the nature and seriousness of the offense, the circumstances under which the offense occurred, the relationship between the offense and the student's participation in the athletic training curriculum, including its clinical components, the age of the person when the offense was committed, whether the offense was isolated or part of a pattern of behavior; the length of time since the offense was committed; past employment and volunteer experience; past history of misconduct at prior institutions; evidence of successful rehabilitation; and forthrightness of the information about the incident in the opportunities for self-reporting.

f. After fully considering each referred applicant, the Athletic Training Program Director, the Athletic Training Coordinator of Clinical Education and one additional faculty member from the athletic training faculty shall vote either to finalize or withdraw the offer of admission extended to the applicant.

8. Applicants with a Felony or Misdemeanor

The affidavit portion of the BOC exam application requires candidates to report any felony or misdemeanor conviction. During the application process, candidates must submit a written explanation, in their own words, of the events that led to the conviction(s), copy of court documents(s), including, but not limited to, an arrest report, sentence recommendation, compliance of all court requirements and proof of payment of all related fines. If the case(s) were alcohol or drug related, the candidate may also be required to provide a current professional alcohol/substance abuse evaluation that is no older than three months. If an evaluation was not required by the court, the candidate must obtain an evaluation from a licensed alcohol/chemical dependency counselor at their expense. Documentation may be emailed, faxed or mailed.

Candidates may request a predetermination of eligibility at any time by submitting their documentation to the BOC via email, fax or mail prior to submitting their application. The Professional Practice and Discipline Committee reviews all convictions. Candidates are notified in writing of the committee's decision. Please review the *Professional Practice and Disciplinary Guidelines and Procedures* for details. Candidates who are granted eligibility to sit for the BOC exam should review their state's practice act prior to sitting for the BOC exam. Their conviction(s) could affect their ability to obtain licensure in that state.

9. Clinical Agency

Clinical faculty shall have the responsibility of communicating to the clinical agencies when the student has received department clearance by completing their background check.

10. Background Check – Search Descriptions

a. Residency History

Applicants will sometimes omit previous addresses to conceal criminal records. A Residency History Search compiles information from various sources, including voting and property records, to arrive at a list of names and addresses associated with a specific Social Security Number. The locations of any unreported addresses can be searched for criminal records, providing a more thorough investigation.

b. Nationwide Sexual Offender Index

By law, any individual who has been convicted of sexual offense must register with his/her state of residence as a sex offender. A Nationwide Sexual Offender Index Search reveals if an individual has been convicted of a sexual offense anywhere within the United States. This search, on the national and state level is included the Nationwide Database Criminal History Search.

c. Social Security Verifications

A Social Security Verification reveals if a Social Security Number is valid and associated with an applicant's name. This information is based on searches of public and private databases.

In addition, "AKA" (Also Known As) will be verified by the Social Security Number up to two names up to three counties.

d. Nationwide Healthcare Fraud & Abuse Scan

A Nationwide Healthcare Fraud & Abuse Scan searches databases maintained by the Office of Inspector General (OIG), The General Services Administration (GSA), and other federal agencies for sanction information. This search meets the government's minimum requirements for sanction screening as set forth in the OIG's Compliance Program Guidance. This search also reveals disciplinary actions taken by federal agencies as well as those taken by licensing and certification agencies in all 50 states.

Searches in the Nationwide Healthcare Fraud & Abuse Scan include: Medicare & Medicaid Sanctioned, Excluded Individuals; Office Research Integrity (ORI); Office of Regulatory Affairs (ORA); FDA Debarment Check; State Exclusion List; Office of Inspector General (OIG)-List of Excluded Individuals/Entities; Office of Foreign Asset Control (OFAC); List of Specially Designated Nations (SDN); General Services Administration (GSA)-Excluded Parties List.

e. Nationwide Database Search

A Nationwide Database Search scans a collection of criminal records purchased from courts, corrections departments, and state agencies. This search is essential supplemental searches as it captures criminal records for applicants in states or counties in which they may have never lived, but have criminal records. The Nationwide Criminal Database Search is comprised of more than 150 million records, including 43 state databases and the District of Columbia. Each state provides information from at least one of the following: county courts, state corrections, or the state sexual offender list. The database also includes a Foreign Nationals search, providing information on individuals and entities that have been sanctioned by the U.S. Government. The Nationwide Criminal Database Search also includes the Nationwide Sexual Offender Search from all 50 states.

A County Criminal Records Search reports felony, misdemeanor, and pending charges in specific counties. The standard background check scope is 7 years due to FCRA regulations; however, convictions older than seven years provided by the county will be indicated on the background screening report.

A Statewide Criminal Records Search includes information from all of the counties within a particular state. Investigating criminal records outside the county of residence is very important as these records may go undetected when a Statewide Criminal Records search is omitted.

Technical Standards Policy

The Athletic Training Program (AT Program) at California State University, Long Beach is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The technical standards set forth by the CSULB AT Program establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program's accrediting agency (Commission on Accreditation of Athletic Training Education [CAATE]). The following abilities and expectations must be met by all students admitted to the CSULB Athletic Training Program. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not successfully advance through the CSULB AT Program.

Each candidate must demonstrate the following ATP Technical Standards:

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

Students will be required to verify they understand and meet these technical standards or that they believe that, with certain accommodations, they can meet the standards. If a student states he/she can meet the Technical Standards with accommodation, then the University will

determine whether it agrees that the student can meet the Technical Standards with reasonable accommodation. This includes a review a whether the accommodations requested are reasonable, taking into account whether accommodation would jeopardize clinician/patient safety, or the educational process of the student or the institution, including all coursework, clinical experiences and internships deemed essential to graduation

ACKNOWLEDGEMENT OF TECHNICAL STANDARDS

Please read the Technical Standards and mark ONE of the following statements:

_____ STATEMENT A: for students NOT requesting accommodations. I certify that I have read and understand the CSULB ATP Technical Standards listed above, and I believe to the best of my knowledge that I meet each Standard without accommodation. I understand that if I am unable to meet these Standards I will not be successfully advanced through the CSULB ATP.

_____ STATEMENT B: for students requesting accommodations. I certify that I have read and understand the CSULB ATP Technical Standards listed above and I believe to the best of my knowledge that I can meet each of these Standards with certain accommodations. I will contact CSULB Bob Murphy Access Center (BMAC: http://web.csulb.edu/divisions/students/dss/) to determine what accommodations may be available. I understand that if I am unable to meet these Standards with or without accommodations, I will not be successfully advanced through the CSULB ATEP.

Clinical Education in Athletic Training Supervision Policy

Athletic training students (ATS) complete required clinical education requirements under the direct supervision of a preceptor in all clinical settings. Per CAATE Standards for Accreditation of Professional Athletic Training Education Standard 31 (2020), a preceptor is either an athletic trainer or a physician.

Direct supervision describes the supervision required of ATS during clinical education. The preceptor must have the ability to intervene on behalf of the patient and the ATS. This requirement, however, is not synonymous with preventing students from making independent clinical decisions.

At no time will an ATS substitute or take place of an athletic trainer or other qualified healthcare professionals. This ensures patient safety, and protects MSAT students from potential liability. In a rare case in which a student is briefly unsupervised (e.g., preceptor uses the restroom), the ATS must not perform any patient care services unless those services fall under the California Good Samaritan Law (i.e., CPR).

The AT Program incorporates CAATE's recommendation for utilizing the graded supervision method which initially involves close monitoring (Key words: hip pocket), but once a student demonstrates proficiency and has some experience with a particular skill, that student should be granted supervised autonomy (i.e. permitted to initiate actions, perform initial evaluations, and develop and implement rehabilitation plans with the clinical instructor in the same room/field where he/she can see and hear the student, but not necessarily looking over the student's shoulder). This level of supervision positions students to learn maximally at all times while still allowing for timely feedback and prompt correction of improper behaviors/techniques. Direct Supervision still encourages independent actions, positioning students to develop "real world" critical thinking abilities, and does not infer that all student actions should be prompted or directed.

- The preceptor will have the ability to intervene on behalf of the ATS to provide on-going and consistent clinical education.
- The preceptor will consistently interact with the ATS at the site of the clinical education.
- There will be regular planned communication between the AT Program and the preceptor.
- The number of students assigned to a preceptor in the clinical education component will be maintained at a ratio that will ensure effective education.

Preceptor Policy

A preceptor supervises and engages students in clinical education and are integral part of the athletic training program. All preceptors must be licensed health care professionals and be credentialed by the state in which they practice. Preceptors who are athletic trainers are state credentialed (in states with regulation), certified, and in good standing with the Board of Certification. The following outlines the criteria and process of becoming a preceptor.

1. **Preceptor Criteria**

a. Function (refer to 2020 Standards)
    1. Supervise ATS
    2. Instruct ATS
    3. Mentor ATS
b. Qualification
    1. BOC certification in good standing
        i. Minimum of one year of clinical care experience post BOC certification
    2. Licensure as a health care provider (if applicable)
    3. Possess a contemporary expertise

2. **Preceptor Selection Process**

a. Potential preceptor expresses interest
b. Meet with the program faculty
c. The following information is requested:
    1. Preceptor information
        i. BOC certification in good standing
        ii. NPI number
        iii. Licensure as a health care provider (if applicable)
        iv. Employment site
        v. Documentation of contemporary expertise
    2. Additional certification and specialties
    3. Current resume with references
d. Participate in preceptor training (either online or in-person)
e. Sign a "Preceptor Responsibilities and Duties" contract (see Appendix A)
    1. Responsibilities
        i. Supervision of ATS
        ii. Development of clinical skills and clinical reasoning of the ATS
        iii. Confirm completion of KSA packet at 70%
        iv. Mid- and end-of-semester evaluations
    2. Follow maintenance criteria
    3. Comply with all AT program policies and procedures

3. Maintenance Criteria

a. Continued status as BOC certified athletic trainer in good standing
b. Annual timely submission of contemporary expertise table (August 1st)
    1. Examples of contemporary expertise activities include:
        i. CEUs
        ii. Workshops
        iii. Advanced education
        iv. Clinical practice experiences
        v. Clinical research
        vi. Other forms of scholarship
c. Submission of status updates
    1. Should changes occur that affect any of the previously submitted documentation (e.g., change in employment site), a status update email should be sent to the Coordinator of Clinical Education
    2. Updates should be submitted within 30 days of change
d. Preceptor Evaluation
    1. Maintain satisfactory evaluation by athletic training students through the end-of-semester "Preceptor Evaluation" survey
e. Participation in CSULB AT Program events
    1. Preceptors must participate in at least two of the following events:
        i. Annual preceptor workshop
        ii. Board of Review (twice annually)
        iii. Standardized Patient KSAs
        iv. End of the year banquet
        v. Bailey-Arnheim Games

Professional Conduct Policy

ATS are preparing for a profession, which expects high standards of behavior. ATS must maintain and respect professional boundaries. The process of becoming a professional begins as soon as the student enters the professional education program. Consequently, students enrolled in the AT Program are expected to develop and demonstrate behaviors and attitudes consistent with those of the profession. The statements of this policy apply to classroom, lab, and clinical settings.

All athletic training students must abide by the following:

- NATA Code of Ethics
- BOC Professional Standards
- CSULB MSAT Student Handbook
- Demonstrate integrity in all things, which includes honesty, respect for others and their property
- Do not use language that could be construed as harassment, offensive, or intimidation

1. Professional Behaviors

The following behaviors are actively discouraged:

- Fraternizing with student athletes or patients
- Engaging in personal relationship with student athletes or patients

Your personal life is private until it becomes an issue in the AT Program, athletic training facilities, clinic, and/or in the athletic department. There is no prohibition against athletic training students dating and/or becoming otherwise romantically involved with student athletes or other athletic training students. However, it will necessitate reassignment or removal of those involved. If such relationships occur, it should be brought to the attention of the Program Director or a member of the athletic training faculty.

2. Social Media

Social Media impacts all aspects of our lives. This policy serves as a standard for using social media sites, such as, but not limited to, Facebook, Twitter, YouTube, Instagram, LinkedIn, Snapchat, TikTok, blogs, etc.

Students should realize they represent the CSULB AT Program in all of their posts. Profiles and related content should represent the image you want present to patients/athletes, faculty, preceptors, and potential employers. Social media often blurs traditional boundaries between our personal and professional lives, thus extra effort is required to ensure that lines are not crossed.

Regardless of the privacy settings you have chosen, the information published becomes public information and can be seen by many unintended recipients and can be traced back to you as an individual. Once the information is published, you have no control how it will be disseminated by others. You should ensure that content associated with you is consistent with your professional goals.

It is expected that students will abide by these principles:

a. Do not post any information that could be in violation with HIPAA or FERPA laws. If you are unsure, do not post it.
b. Do not post anything that could be construed as harassment, inflammatory, prejudicial, inappropriate, obscene, or pornographic.
c. Do not post anything that would misrepresent your knowledge, skills, or level of expertise.
d. Do not post information about clinical sites that is private, controversial, or negative.
e. Do not post anything that may question your professionalism (i.e., inappropriate attire or behaviors)
f. Follow all copyright laws and fair use policies.
g. While CSULB AT Program cannot infringe on a student's right of freedom of speech, students should be respectful of others.
h. If you are of legal drinking age and decide to consume alcohol, do not wear any CSULB apparel in photographs that would reflect poorly on the athletic training program or the university if the photos were posted to an online profile.
i. Electronic devices (phones, tablets, etc) should not be used in the vicinity of patients/athletes. If you need to make a call or send a text, you should remove yourself from the patient area.
j. Electronic devices (phones, tablets, laptops, etc) should be used only for taking notes or other classroom activities. Other usage is distracting to you and fellow students.

We trust that you will abide by these principles. It is not the policy of the CSULB faculty or preceptors to routinely monitor students' profiles. It is your responsibility to notify program administrators if you are aware of any violations. If inappropriate postings are brought to their attention, the faculty will investigate the report.

Violations of the above statements will be reported to the Athletic Training Program Director and could be grounds for permanent removal from the site and/or CSULB Athletic Training Program depending on the severity of the violation.

This policy may need to be modified as new technologies emerge, but the spirit of the policy will remain intact.

Attendance Policy

1. Classroom

Each CSULB athletic training student is expected to perform to the best of his/her ability in the classroom. The theoretical concepts and clinical skills learned in class provide the foundation for growth and development as an athletic trainer. All athletic training students are expected to attend class regularly, turn in assignments and take exams on schedule. If you know you might miss a class due to your athletic training clinical experience, discuss with your instructor in advance.

2. Clinical Education

The hours you spend in the CSULB athletic training clinic and/or affiliated sites are just as important as those spent in the classroom. While completing clinical education requirements in the CSULB AT Program facilities, students are expected to follow the policies and procedures established by that particular clinical facility (i.e., dress, assignment schedule, etc.).

ATS are expected to arrive on time wearing the designated clinical uniform and behave in a professional manner as described by the NATA Code of Ethics, BOC Standards of Practice and other applicable regulations. Remember, your clinical education requirement gives you the opportunity to apply what you have learned in the classroom toward the actual care of patients and athletes while also developing clinical decision-making skill. If you know you will miss clinical education hours, notify your preceptors and coordinator of clinical education in advance.

Grade Policies

The CSULB AT Program abides by the CSULB catalog for "Final course grades, grading procedures, and final assessments." See university catalog for additional information.

Artificial Intelligence (AI) Policy

You may use AI programs e.g. ChatGPT to help generate ideas, brainstorm, find appropriate references, correct for grammar or even to help refine a statement of your own. However, you should note that the material generated by these programs may be inaccurate, incomplete, or otherwise problematic. For example, they may provide outdated or wrong information and may provide references that do not exist.

The use of AI is intended to augment your own intellectual work, not replace it. At no point may you submit work generated by an AI program as your own. If AI generated content is allowed, provide appropriate references/citations so as not to misrepresent as your own.

The assignments in your course are designed to stimulate your analytical, critical thinking, and writing skills—key competencies that will give you an edge in a competitive workplace. In addition, your faculty truly want to hear what it is you have to say. Finding your own writing voice is more helpful than copying AI generated ideas that present only facts, lacking depth and understanding.

Athletic Training Student Employment Policy

The Athletic Training Program acknowledges that it may be necessary for athletic training students to hold part-time employment. However, it is important to remember that the educational goals/priorities are education/athletic training. If students chose to have outside employment, it should not interfere with the studies and availability to complete the clinical education/experience. Students who make no allowances for their employment and outside obligations in planning their college programs will bear full responsibility for the resulting level of scholarship and performance.

Dress and Grooming Policy

Athletic Training Students (ATS) are expected to display the type of personal appearance and attire reflective of professionalism. The attire must reflect consideration of image, safety, infection control and appropriateness for the activities to be performed in the clinical experience, in athletic training, or health care discipline.

1. **Dress Guidelines**

ATS work in different clinical settings throughout the country and dress codes may vary among these locations depending on the nature of the clinic and their established standards. Such variations require the preceptors and athletic training students to exercise sensitivity and good judgment in choosing appropriate attire to demonstrate respect for local customs and maintain cooperative working relations with those environments. Athletic training students are expected to comply with the facility dress code.

ATS are expected to consider their day's activities and dress accordingly.

a. Clothing should fit appropriately, be clean, pressed or wrinkle free and without holes or frayed areas.
b. Footwear in athlete/patient care areas should be closed toe and appropriate professional attire.

The following clothing is considered not suitable to wear at clinical sites

a. Leggings
b. Jeans
c. Clothing without sleeves
d. Clothing that are too short that exposes the stomach or other areas of the body inappropriately

e. Clothing with logos other than CSULB or your clinical site

2. <u>Grooming Guidelines</u>

a. Personal cleanliness/hygiene
b. Hair is to be clean, neatly arranged and does not interfere with clinical duties
c. Face is shaved or mustache/beards/sideburns, etc., if worn, are to be neatly trimmed, clean.
d. Selection of jewelry for the clinical practicum should reflect a concern for professionalism, safety and infection control precautions.
e. Fingernails should be short and clean. Please note in hospital settings that OSHA policies, for the purpose of infection control, do not allow acrylic nails and nails should be kept short.

If your clinical site has a dress-code policy, the Athletic Training Student should follow the stricter code. Athletic Training Students failing to meet the dress and grooming guidelines will be placed on clinical probation.

Health Insurance Portability and Accountability Act (HIPAA) Policy

HIPAA is the first federal privacy standards to protect patients' medical records and other health information provided to health insurers, doctors, hospitals and other health care providers. These standards, developed by the Department of Health and Human Services (HHS), provides patients with access to their medical records, and more control over how their personal health information is used and disclosed. They represent a uniform, federal law of privacy protection for consumers across the country.

HIPAA originated in 1996 and implemented on April 14, 2003. It was designed to help protect a patient's privacy or PHI (Protected Health Information). Regulations cover information that is communicated or transmitted electronically, written or verbal. HIPAA is a federal law designed to apply consistent patient confidentiality practices nationwide. Violations will result in fines and penalties. Simple negligence could result in a fine up to $50,000 and/or 1 year in prison. Disclosure under false pretenses could result in a fine up to $100,000 and/or 5 years in prison. Intent to sell or use information could result in a fine up to $250,000 and/or 10 years in prison. When a federal law (HIPAA) and state law conflicts, HIPAA prevails, except when the state law is more stringent. HIPAA makes everyone's practice consistent.
HIPAA is divided into three sets of regulations: 1) Electronic Transactions and Code Sets, 2) Patients Privacy, and 3) Electronic Security. Regulations were written by the Department of Health and Human Services, and were approved by Congress and the President. Care was taken in carefully wording the regulations.

HIPAA provides patients certain rights regarding the PHI:

- Right to Inspect and Copy their Medical Record.

- Right to Amend information in their Medical Record.
- Right to an Accounting of Disclosures.
- Right to Request Restrictions on the Release of their Health Information.
- Right to Request Confidential/Alternate Communications.
- Right to a paper copy of the Notice of Privacy Practices.

1. Authorization

Authorization (Release of Information) forms must be in writing, specifying exactly what information is being released. Psychotherapy Notes require a separate authorization for release, even when that release is for treatment purposes. A verbal statement that an authorization exists is not acceptable. An official personal representative can sign an authorization form for a specific patient (personal representatives include durable power of attorney).

Required elements of an authorization:

- A specific and meaningful description of the information to be released.
- Name or other specific identification of the person(s) or class of persons authorized to make the disclosure.
- Name or other specific identification of the person(s) to whom the facility may make the disclosure.
- An expiration date or event that relates to the individual or the purpose of the use or disclosure.
- A statement of the individual's right to revoke the authorization in writing.
- A statement that information used or disclosed pursuant to the authorization may be subject to re-disclosure by the recipient of the PHI and will no longer be protected by the privacy rule.
- The signature of the individual authorized to initiate the authorization.
- The date the authorization is signed.
- The relationship of the individual signing the authorization, if not the patient.

The patient may revoke a written authorization at any time. The revocation request must be in writing. The facility may refuse the request under the following circumstances:

- The facility has already taken action based upon the previously signed authorization.
- If the authorization was obtained as a condition of obtaining insurance coverage, other laws provide the insurer with a right to contest the claim under this policy.

2. Inspect and Copy Records

Patients or their personal representative can request to view or receive a copy of their medical records. This may not be allowed if the information is harmful to the patient's health (e.g. psychiatric records). Hospitals, clinics, nursing homes and other covered entities generally should provide access to these records within 30 days and may charge patients for the costs of copying and mailing the records.

3. Amendments to Records

Requests to amend records must be in writing. The hospital or physician may accept or deny (in whole or in part) the request to amend. If an amendment is accepted, it must be made to all copies of the medical record. (This includes records sent to other physicians, insurance companies, workers compensation, etc.). The patient will be provided notice that these actions have occurred and who was notified of the change. If the amendment is denied, the patient will be notified of the reason. The patient may appeal a denial. The facility will assign an associate or medical staff member not involved in the care of the patient to review the amendment.

4. Accounting of Disclosures

Patients can request a list of parties whom their PHI was disclosed with the past 6 years (going back to April 1, 2003). The request must be in writing. The facility must keep documentation of the accounting of PHI for a period of at least 6 years.

The facility is not required to provide an accounting for:

- Copies to patient's attending physician, insurance carriers.
- Copies to the individual patient, parent of un-emancipated minor child.
- Listing of patient's religious affiliation, disseminated to clergy, per patient's prior agreement.
- Copies to new physician or clinic, as a result of authorization form signed by patient.
- National security or intelligence purpose.
- Correctional institutions or law enforcement as provided in 45 C.F.R. 164.512(k)(5).
- As part of a limited data set in accordance with 45 C.F.R. 164.514(e).

The information the patient will receive for each disclosure is:

- Date of the disclosure.
- Name of the entity or person who received the PHI.
- If known, the address of the entity or person.
- A brief description of the PHI disclosed.
- A brief statement of the purpose of the disclosure, in lieu of such a statement, a copy of the individual's written authorization.

5. Restrictions of Use of PHI

Patients may request restrictions on how their PHI is used in treatment, payment, healthcare operations, and disclosures to family and friends. The facility may accept or deny the request. It may be denied if the restriction could get in the way or providing emergency care.

6. Confidential Communications

Patients can request that their doctors, health plans and other covered entities take reasonable steps to ensure that their communications with the patient are confidential.
Patients may request alternate means of communications, such as:

- Alternate address
- Alternate phone number
- E-mail address

The facility may not require the patient to explain why they are requesting an alternate method of confidential communication of their PHI. If there are costs to accommodate a request the individual will be notified of the cost.

7. Notice of Privacy Practices

On the date of the first delivery of treatment after April 14, 2003, even if treatment is delivered electronically or via the telephone, a patient shall be presented with a Notice of Privacy Practices. The Notice of Privacy Practices describes how the patient's personal medical information may be used, and gives their rights under the new HIPAA privacy regulations. The notice will be mailed to the patient if the initial contact was not in person. A copy will also be offered to the patient at the time if they request one. A good faith effort will be made to obtain a written acknowledgment of receipt of the Notice of Privacy Practices. Documentation that a Notice of Privacy Practices has been offered to a patient for review must be placed in the patient's records.

8. Disclosure of PHI (Protected Health Information)

Confidential uses and disclosures of protected health information are allowed under HIPAA.

- When it cannot be reasonably prevented.
- Disclosure occurs as a result of an otherwise permitted use or disclosure
- Safeguards must be in place to protect the confidentiality of patient health information.
- Examples: A physician is at a nursing station talking quietly with a nurse about a patient's condition and the conversation is overhead by visitor. In a semi-private room, the physician is discussing the patient's condition with them and is overhead by the patient's roommate.

9. Patient Identification

Name, location, condition (general terms), religious preference can be released if:

- The patient is identified by their correct first and last name.
- The patient has not "opted out" (a patient may request in writing that no patient identification information can be released).

10. Release and disclosure of PHI without consent

Health care providers can release patient information without a sighed authorization for the following reasons:

- When required by law.
- Required for public health activities (such as mandated disease reporting, reporting to the FDA regarding an FDA regulated product or activity, the reporting of vital event, birth, deaths, etc.).
- Reporting of abuse or neglect as required by law.
- Law enforcement purposes.
- Medical examiners and funeral directors.
- Organ and tissue donation purposes.
- Relating to approved research.
- To comply with workers compensation laws.
- Emergency care.
- Disaster relief.
- Hospital directory (unless the patient opts-out).
- Inform clergy of patient status (unless patient opts-out).
- Fundraising (unless patient opts-outs).
- Appointment reminders (minimum necessary information only will used).

11. De-identified Information

Identifying elements of a patient information are considered to be so specific as to serve as "identifiers" to others. If the health information does not identify the individual, and there is no reasonable basis to believe that the information can be used to identify the individual, then it is not individually identifiable health information. Removal of the following specified identifiers creates a presumption of de-identification, indicating that the information is no longer covered by the regulatory rules granting it the protection of protected health information (PHI).

Information may be considered "de-identified" if the following identifiers of the individual, their relatives, employers, or household members of the individual are not included:

- Names
- Selected geographic information including street address, city, county or zip code.
- All elements of dates such as birth date, admission date, discharge date, date of death, all ages over 89, and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older.
- Telephone/FAX numbers.
- Electronic mail addresses.
- Social Security Numbers.
- Medical Records Numbers.
- Health Plan beneficiary numbers.
- Account Numbers.
- Certificate/license numbers.
- Vehicle identifiers and serial number, including license plate numbers.
- Device identifiers and serial numbers.
- Web Universal Resource Locators (URLs).
- Internet Protocol (IP) address numbers.
- Biometric identifiers, including finger and voice prints.
- Full face photographic images and any comparable images.
- Any other unique identifying number, characteristic or code.

12. Expectations for Athletic Training Students

- Athletic training students must complete medical documentation, confidentiality and HIPAA education session annually. Students will be informed of the requirements of HIPAA regulations through required training when admitted to the CSULB AT Program and throughout their clinical education courses.
- Athletic training students are expected to follow guidelines when accessing information and providing care to patients.
- Athletic training students are held to the same standard as the certified athletic trainer on staff.
- There will be ZERO TOLERENCE to violations to this policy: consequences may result in immediate dismissal from the CSULB AT program.

Family Educational Rights and Privacy Act (FERPA) Policy

The CSULB AT program complies with the Family Educational Rights and Privacy Act of 1974 (FERPA), which is a federal law that protects the privacy of student education records.

Primary rights of students under FERPA include:

- The right to inspect and review educational records.
- The right to seek to amend educational records.
- The right to have some control over the disclosure of information from educational records.

The CSULB AT program follows the guidelines set forth by the university (FERPA for Students).

Expectations for Athletic Training Students

- Athletic training students must complete FERPA education session annually. Students will be informed of the requirements of FERPA regulations through required training when admitted to the CSULB AT Program and throughout their clinical education courses.
- During the clinical experience, athletic training students are expected to follow guidelines when accessing information and providing care to patients.
- During the clinical experience, athletic training students are held to the same standard as the certified athletic trainer on staff.
- There will be ZERO TOLERENCE to violations to this policy: consequences may result in immediate dismissal from the CSULB AT program.

Medical Documentation and Confidentiality Policy

1. Confidentiality

Throughout the CSULB AT program as part of the athletic training clinical experience and supplemental clinical experience, there will be times when the athletic training students are exposed to confidential and privileged information.

Athletic training students SHOULD NOT discuss information obtained as part of the clinical experiences. This includes information about patients' medical condition, treatment of the medical condition, or any information the athletic training students acquire in the locker rooms, athletic training facility, physician's office, or other non-public information. Athletic training students SHOULD NOT disclose any information to anyone, including, but not limited to, medical personnel, professional scouts, administrators, coaching staff members, teammates, and parents. Information may be shared with the head coach or other team personnel, only when directed to do so by the staff athletic trainer.

If this confidentiality is violated, the professional rapport that was established with athletes, coaches, and physicians will be jeopardized by this lack of discretion and violation of this code of ethics. The opportunity for athletic training students to observe and participate in athletic training clinical experience and supplemental clinical experience will be terminated. Furthermore, this may result in an immediate dismissal from the CSULB AT Program.

2. Medical Documentation

Documentation within healthcare is crucial in providing high quality, safe care for the patients. Best practice guidelines are available through the National Athletic Trainer's Association (NATA) website.

3. Documentation Formats

There are many documentation systems available within the medical field, and athletic training students should familiarize themselves with the system used by the setting of their clinical experiences. Regardless of the documentation format, based upon the "Appropriate Documentation in Athletic Training" article from the BOC, the following is critical for proper documentation:

- Appropriate medical terminology use
- Timeliness in documentation
- Accurate documentation of evaluation, plan, and/or treatment provided
- Safe storage of the information

4. Documentation Standards

Documentation of the patients should be clear, concise, and accurate. While commonly accepted documentation format includes sections of subjective, objective evaluation, assessment, and plan, the athletic training students should follow the guidelines of the setting of their clinical experiences. The athletic training students should limit the use of medical abbreviations and should be kept to commonly accepted abbreviations.

Ideally, documentation should occur during or immediately after the patient is seen by the healthcare provider. This will make sure accurate information is recorded, and allow timely communication with other healthcare professionals involved with the patient care.

5. Communication and Protection of Health Information

Please refer to the Health Insurance Portability and Accountability Act (HIPAA) policy in regards to the communication and protection of health information.

Athletic training student should remember that text messaging and unencrypted emailing of patient health information are inappropriate forms of communication. These are not secure methods.

6. Expectations for Athletic Training Students

- Athletic training students must complete the medical documentation and confidentiality education session annually. Students will be informed of the requirements of medical documentation, confidentiality regulations through required training when admitted to the CSULB AT Program and throughout their clinical education courses.
- Athletic training students are expected to follow guidelines when accessing information and providing care to patients.
- Athletic training students are held to the same standard as the certified athletic trainer on staff.
- There will be ZERO TOLERENCE to violations to this policy: consequences may result in immediate dismissal from the CSULB AT program.

Emergency Cardiac Care Policy

Athletic Training Students (ATS) in the CSULB Athletic Training Program (ATP) must have emergency cardiac care (ECC) training prior to engaging in any athletic training and supplemental clinical experiences. Regardless of the whether the ATS has had formal certification in first aid or ECC, the ATS will be taught and evaluated first aid and ECC skills in the orientation session or in AT 500.

The Boar of Certification (BOC) outlines specific skills that need to be included in the ECC (BOC Maintenance of Certification ECC).

ECC training must include the following:

- Adult CPR
- Pediatric CPR
- Second rescuer CPR
- AED
- Airway obstruction
- Barrier devices (e.g., pocket mask, bag valve mask)

Clinical Education Probation Policy

Athletic training students' clinical performance will be assessed at mid-semester or mid-rotation and at the conclusion of each academic semester or rotation by the preceptor at the clinical site through a performance evaluation form. The student must be demonstrating satisfactory progress (ratings of average, above average, or excellent) on the performance evaluation to be advanced to the next clinical level.

If the student's performance evaluation fails to show satisfactory performance or progression in clinical skills and/or clinical level performance, the student will be placed on "clinical probation" up to one semester to remedy the deficiencies. [Interpretation: The student will receive a grade of "NC" (No Credit) for the level of clinical performance and must complete a grade "Repeat/Delete" of this performance level.] At the end of the "clinical probation" the student's performance will be evaluated for program retention or dismissal.

Clinical Education Dismissal Policy

Athletic training students are expected to abide by university, department, and program policies and procedures at all times. Failure to do so will lead to disciplinary action and possibly lead to student dismissal from the AT Program.

1. **Dismissal Procedure**

It is the preceptor's responsibility to inform the Coordinator of Clinical Education of any instances in which the student violates the guidelines on appropriate behavior and/or is asked to leave a clinical rotation for inappropriate behavior.

Examples of infractions include, but are not limited to: (a) breech of patient confidentiality; (b) harassment or discrimination in any form; (c) dress code violation; (d) absenteeism and/or tardiness; (e) unsafe clinical practice, including omission, commission, negligence, and malpractice; (f) neglect of clinical responsibilities; (g) inappropriate interaction with patients, coaches, administrators, and medical staff and faculty members (includes staff athletic trainers, educational faculty members, physicians and other medical professionals); (h) or any other action that the preceptor deems unsafe or inappropriate.

If a violation of guideline occurs, the preceptor is to contact the Coordinator of Clinical Education as soon as possible after the occurrence. Also, the preceptor is to complete and submit a *Report of Violation of Clinical Guidelines and Rules* form to the Coordinator of Clinical Education. The Coordinator of Clinical Education will inform the Program Director regarding any pending disciplinary actions.

The following courses of action will be taken as part of the disciplinary action:

First Offense:

a. Written and verbal warning (Report of Violation will be included in student's file)
b. Meeting with Coordinator of Clinical Education and preceptor
c. Probation period for improvement (As determined by preceptor and Coordinator of Clinical Education)
d. Contract for improvement

Second Offense:

a. Written and verbal warning (Report of Violation will be included in student's file)
b. Meeting with Program Director, Coordinator of Clinical Education, and preceptor
c. Probation for one semester
d. Contract for improvement

Third Offense:

a. Dismissal from the program

2. Student Appeal Procedure

The student appeal procedure for the AT Program is intended to provide a formal, standardized means for students to seek redress concerning the actions of the preceptor and the Coordinator of Clinical Education that are unauthorized or unjustified and that adversely affect the status, rights, or privileges of the students in the clinical education of the AT Program. Further, the purpose is to establish due process and safeguards that will be followed by the AT Program Director in the adjudication of the appeal.

An appeal filed under this policy must be initiated within 30 days of the third offense. An appeal may not be filed on the basis of a student's judgment of a preceptor's or Coordinator of Clinical Education's competence; such judgments are solely the province of the AT Program Director.

The appeal procedure is not designed to replace open communication and understanding, which are vital to the academic process. The student may withdraw the appeal at any stage, at which point the process will immediately terminate. During all stages of the appeal, the burden of proof will be on the student.

The person or entity against whom the complaint is made is referred to in this document as the respondent. The initiator of the appeal is referred to as the grievant.

If after ten instructional days beyond the initial informal meeting a satisfactory resolution is not reached, the AT Program Director will meet with the student grievant and the respondent. Within fifteen instructional days of the meeting, the Coordinator of Clinical Education will complete an investigation of the allegations and will reach conclusion. The Coordinator of Clinical Education shall promptly communicate the decision to the student and the respondent. If the grievant is not satisfied with the results of the informal process, he or she may initiate a formal appeal procedure by contacting the Program Director within fifteen instructional days of the decision.

3. Formal Appeal Procedure

To initiate the appeal, the student is required to submit a written "statement of appeal" – a clear, concise, signed, and dated statement of events from the student's perspective. The statement should provide enough information to present a complete understanding of the situation of the remedy sought by the student.

A student initiates the formal procedures by submitting the statement of appeal to the AT Program Director. The Program Director will then submit a copy of the statement of appeal to the Coordinator of Clinical Education and the preceptor. The respondent is required to submit a written response to the Program Director with ten instructional days. The Program Director will then provide a copy of the respondent's reply to the grievant.

The Program Director has a period of ten instructional days to review the case, during which he or she may opt to seek additional information from the involved parties or witnesses. By the end of that ten-day period, the Program Director will either (1) render a decision or (2) convene a college hearing committee to investigate further. The Program Director renders the final decision.

Student Grievance Policy

Athletic Training Students are to follow the following steps in order to file a grievance. The CSULB AT Program abides by the CSULB catalog for "Student Grievance Policy." See university catalog for additional information.

The CSULB grievance policy and procedure are designed to provide the campus community with a protocol to accommodate circumstances for which no other policy or procedure exists. This policy does not cover grade appeals, prohibited discrimination, or any other issues that are covered by existing policies. Students are advised to consult appropriate additional campus resources (e.g., the Undergraduate and Graduate Catalog, the Schedule of Classes, "The Regs". The Office of the Dean of Students has staff to help students understand the details of the grievance procedure and may be called upon for assistance.

1. **Student Grievance Procedure**

The student grievance procedure at CSULB is intended to provide a formal, standardized means for students to seek redress concerning the actions of faculty members, administrators, or staff members of the university-actions that are unauthorized or unjustified and that adversely affect the status, rights, or privileges of the students. Further, the purpose is to establish due process and safeguards that will be followed by the university in the adjudication of grievances.

A grievance filed under this policy must be initiated within one year of the alleged violation. A grievance may not be filed on the basis of a student's judgment of an instructor's or administrator's competence; such judgments are solely the province of the academic department involved or of the administrator's supervisor.

The grievance procedure is not designed to replace open communication and understanding, which are vital to the academic process. The student may withdraw the grievance at any stage, at which point the process will immediately terminate. During all stages of the grievance, the burden of proof will be on the student.

The person or entity against whom the complaint is made is referred to in this document as the respondent. The initiator of the grievance is referred to as the grievant. For nonacademic matters, the term dean is also construed to refer to the responsible individual of comparable level-typically an associate vice president or vice president.

In the event that the respondent is at the level of dean or higher, the complaint should be directed to the responsible person at the next higher administrative level. If the chair or program director was directly involved in the original decision or denied the student an opportunity for due-process review at the local level, the student should seek informal resolution through the dean of the college (or designee).

If after ten instructional days beyond the initial informal meeting a satisfactory resolution is not reached, the department chair or program director will meet with the student grievant and the respondent. Within fifteen instructional days of that meeting, the chair or program director will complete an investigation of the allegations and will reach conclusion. The chair or program director shall promptly communicate the decision to the student and the respondent. If the grievant is not satisfied with the results of the informal process, he or she may initiate a formal grievance procedure by contacting the appropriate college dean (or designee) or the responsible person at the next nonacademic level within fifteen instructional days of the decision.

2. Formal Grievance Procedure

To initiate the formal grievance procedure, the student is required to submit a written "statement of grievance" – a clear, concise, signed, and dated statement of events from the student's perspective. The statement should provide enough information to present a complete understanding of the situation and of the remedy sought by the student.

A student initiates the formal procedures by submitting the statement of grievance to the appropriate department chair or program director. The chair or director will then submit a copy of the statement of grievance to the appropriate college dean or next appropriate higher administrative level and to the respondent. The respondent is required to submit a written response to the chair or program director with ten instructional days. The chair or program director will then provide a copy of the respondent's reply to the grievant and to the college dean or next appropriate higher administrative level.

The dean or appropriate administrator has a period of ten instructional days to review the case, during which he or she may opt to seek additional information from the parties involved or from witnesses. By the end of that ten-day period, the dean or administrator will either (1) render a decision or (2) convene a college hearing committee to investigate further. The student shall have the right to request that a college hearing committee be convened.

3. College Hearing Committee

If required, a college hearing committee will consist of an administrator representing the dean, two faculty members elected from the Faculty Council of the appropriate College, a student representative elected from the Student Council of the appropriate College, a designee of the vice president for student services, and faculty adviser elected by the Academic Advising Council appropriate to the grievance. All meetings of the college hearing committee will be closed to the public, and no transcripts will be prepared. If the college hearing committee seeks evidence by means of personal testimony, the meeting at which such evidence is presented shall be conducted in the manner of any other academic committee meeting and is not considered a formal hearing. Both the grievant and respondent shall be given opportunities to present their views. There shall be no cross-examination.

The charge of a college hearing committee is to investigate and then to recommend to the dean a proposed resolution. The college hearing committee will review the grievance and, if necessary, forward supplemental queries to the respondent and to the department chair and program director involved – along with direction to submit written responses with twenty instructional days. Once the college hearing committee has received the written responses, it will review all available evidence, conduct deliberations, and then choose one of the three courses of action:

- Remand the grievance to the dean with a recommendation of immediate corrective action in favor of the grievant-based on sufficient evidence of a violation of (1) university regulation or policy or (2) principle of due process or (3) both.

- Defer a decision to allow for further investigation and gathering of evidence. In the case of such a continuation, both the grievant and the respondent will be notified in writing of the additional evidence required and whether that evidence should be provided in writing or in personal testimony.

- Dismiss the grievance based on a (1) lack of sufficient evidence of a violation of the university regulation or policy and (2) confirmation of adherence to principles of due process.

The college hearing committee will forward the recommendation to the dean. The dean will then make a decision and forward that decision to the respondent and grievant. If neither the respondent nor the grievant requests further review, then the grievance process ends.

If either party wishes to appeal the decision of the Dean, the appeal, in writing, may be made to the Provost (academic) or appropriate Vice President (non-academic). The appeal must be made within 10 instructional days of the dean's decision. The Provost or Vice President will notify both parties of the appeal and convene a university hearing committee to investigate further.

4. University Hearing Committee

If required, a university hearing committee will consist of an administrator representing the Provost, three faculty members selected from the Panel on Professional Responsibility according to the procedures of that policy, and a student elected from the Associated Students, Inc. All meetings of the university hearing committee will be closed to the public, and no transcripts will be prepared. If the university hearing committee seeks evidence by means of personal testimony, the meeting at which such evidence is presented shall be conducted in the manner of any other academic committee meeting and is not considered a formal hearing. Both the grievant and respondent shall be given opportunities to present their views. There shall be no cross-examination.

The charge of a university hearing committee is to investigate and then to recommend to the Provost a proposed resolution. The university hearing committee will review the grievance and, if necessary, forward supplemental queries to the respondent and to the Provost – along with direction to submit written responses within twenty instructional days. Once the university hearing committee has received the written responses, it will review all available evidence, conduct deliberations, and then choose one of the three courses of action:

- Remand the grievance to the Provost with a recommendation of immediate corrective action in favor of the grievant-based on sufficient evidence of a violation of (1) university regulation or policy or (2) principle of due process or (3) both.

- Defer a decision to allow for further investigation and gathering of evidence. In the case of such a continuation, both the grievant and the respondent will be notified in writing of the additional evidence required and whether that evidence should be provided in writing or in personal testimony.

- Dismiss the grievance based on a (1) lack of sufficient evidence of a violation of the university regulation or policy and (2) confirmation of adherence to principles of due process.

The university hearing committee will forward the recommendation to the Provost. The Provost will then make a decision and forward that decision to the respondent and grievant. The University Hearing Committee shall function as the final level of this grievance process.

IV. Health and Safety

AT Lab Use Policy

ATS will have access to the AT Lab (KIN 83) via key pad entrance. ATS must remember that this is a privilege and not a right and the access will be revoked if necessary.

All athletic training students must abide by the following when using the AT lab unsupervised:

- Only matriculated graduate students in the CSULB MSAT Program are permitted to use KIN 83 (AT Lab). Do not open the door for other students, or prop the entrances open.
- ATS may not share the key code with anyone.
- The lab can be used for group study, lab practices, or individual study space.
- The lab needs to be a quiet study environment and ATS need to be respectful of what others are doing.
- ATS may bring beverages and food into the lab but any food waste/garbage needs to be thrown away outside of the lab.
- Students must comply with the Alcohol and Drug Policy (https://www.csulb.edu/university-police/alcohol-drugs-and-weapons-policies) of the CSULB campus at all times. This means that consumption of alcoholic beverages in the lab is strictly prohibited.
- The lab must be kept clean and tidy at all times.
- Do not leave personal belongings unattended in this space. The MSAT program is not responsible for the loss of personal items left unattended or behind in the lab.

Anyone observed violating these rules can no longer use the AT Lab. Furthermore, if multiple incidents occur where students are violating these rules, the access to the lab will be removed for all students.

Covid-19

The WHO declared COVID-19 a pandemic in March. The disease, "coronavirus disease 2019" (abbreviated "COVID-19"), poses a serious public health risk that can cause mild to severe illness. Although most severe illness occurs in adults 65 years and older, people of all ages have been infected. Initially thought to be mainly a respiratory disease, new signs and symptoms are developing.

- Additional guidelines addressing COVID-19 in the athletic training facility will be added to this handbook when protocols are established.
- Resources for students can be found at the following CSULB website: http://www.csulb.edu/covid-19
- The NATA also has a COVID-19 Resource Center for athletic trainers: https://www.nata.org/practice-patient-care/health-issues/covid-19-coronavirus

Immunization Policy

All incoming graduate and post-baccalaureate students must show proof of the following vaccines by August 1 of the admission year.

- Measles, Mumps, and Rubella (MMR): 2 doses on or after the first birthday or laboratory test to show proof of immunity (titer).
- Varicella (Chickenpox): 2 doses on or after the first birthday or laboratory tests to show proof of immunity (titers).
- Tetanus, Diphtheria, and Pertussis (Tdap): One dose on or after the age of 7 years.
- Hepatitis B (students 18 and younger on first day of classes)
- Meningitis ACY-W (Menactra or Menveo) – Required for students 21 and younger on first day of classes: One dose on or after the age of 16.
- Meningitis B (Trumemba or Bexsero) – Required for Housing students only: Students who will be living in housing must complete all doses prior to moving into housing.
- Skin or blood testing for TB infection.
- COVID-19 vaccine: Required for students participating in clinical experience
- Additional annual vaccination may be required depending on the clinical site (e.g., influenza)

For additional information regarding immunization, please see following website: http://web.csulb.edu/divisions/students/shs/immunizations.html

Blood Borne Pathogen Policy

The CSULB Athletic Training Program (ATP) complies with California Occupational Safety and Health Administration (Cal-OSHA) blood-borne pathogen requirements. The ATP is in close communication with the Lab Coordinator and Chemical Hygiene Officer for the College of Health and Human Services.

1. **Educational Programming regarding Cal-OSHA blood-borne pathogen exposure control and management**

The CSULB ATP, in conjunction with the Environmental Health and Safety department, provides an annual workshop dealing with Cal-OSHA blood-borne pathogen exposure and management requirements. This workshop is mandatory for all athletic training students and a log sheet is kept to document attendance.

2. **Personal Protection**

All persons will wear appropriate barriers to prevent skin and mucus-membrane exposure when contact with blood or other bodily fluids of any patient is anticipated. All patients' blood,

body fluids or tissue, should be considered potentially infectious, and Universal Precautions will be used on all patients regardless of status.

Gloves are to be worn when touching blood and body fluids, mucus membranes, or non-intact skin of all patients. Gloves should also be worn when handling items or surfaces that have been soiled by blood or body fluids. Gloves are to be carried and/or accessible at all practices and games and readily available at all clinical sites. Masks and goggles or face shields are to be worn to prevent possible exposure of the mucus membranes of the mouth, nose, and eyes. Gowns or other protective aprons are to be worn during procedures when splashes of blood or other body fluids is a possibility.

In addition, when performing mouth-to-mouth resuscitation/CPR, a mouth-to-mouth barrier protection is to be used. A pocket mask or micro-shield will be accessible.

3. Disposal

a. Soft Goods. Blood contaminated soft goods (e.g. band aids, gauze, cotton-tipped applicators, towels) are to be placed in a leak-proof container that is double-lined with red biohazard bags. These containers are red and marked with a biohazard label. All used gloves will be placed in these containers.
b. Sharps. A sharps box is located in the athletic training lab and each clinical site for disposal of blades, needles, and glass products used for injections. Following use, all needles are to be placed in a sharps container without recapping or removing from the syringe. Scalpel blades are to be removed with tweezers and discarded in the sharps box. The tweezers and scalpel handle will then be disinfected. Following injections by physicians, glass ampules are to be discarded in a sharps box. When sharps boxes or biohazard bags are 75% full, it is the responsibility of the staff athletic trainer to coordinate the removal and disposal.

4. General Disinfectant Guidelines

a. Tables and Work Areas. Tables and work areas are to be disinfected at the end of each treatment session and at the end of each day. For specific spills, a disinfectant is to be placed on the area and allowed to sit for 10 minutes. The fluid will then be absorbed using paper towels. The person performing the duty will wear gloves and the towel(s) will then be placed in the Biohazard container.
b. Instruments. Instruments are to be disinfected by placing them in the designated disinfecting tray after treatments have been performed. After the instrument has been thoroughly cleaned, sanitized, and rinsed, it is to be placed back in the original treatment tray.

Also refer to the CSULB-CHHS Biohazard Control Program.

Communicable Disease Policy

The Center for Disease Control (CDC) outlines specific policies for minimizing exposure of communicable diseases within health care facilities and between health care providers and patients (CDC Personnel Health Guideline, 1998, updated 2019). Based upon these guidelines, in an effort to promote health and wellness and to prevent the transmission of disease, the following CSULB AT Program Communicable Disease Policy is in place.

a. If the athletic training student acquired a communicable disease, the student must notify their preceptor as soon as possible. The student will also notify the Program Faculty of the condition including the amount of time the student will be absent from the clinical experience. The Program Director or Coordinator of Clinical Education will notify the Medical Director to determine the appropriate actions needed in order to protect the patients and practitioners.

b. Any student who acquires any of the listed communicable disease will be excused from the clinical experience at the CSULB or other affiliated sites until a medical practitioner has deemed the student non-contagious.

c. Communicable Diseases sited by the CDC include, but not limited to:

Blood Borne Pathogens
Conjunctivitis
COVID-19
Cytomegalovirus
Diphtheria
Gastrointestinal infections, acute
Hepatitis A
Herpes Simplex
Influenza (flu)
Measles
Meningococcal disease
Mumps
Parvovirus
Pertussis
Poliomyelitis
Rabies
Rubella
Scabies and Pediculosis
Staphylococcus aureus infection and carriage
Streptococcus infection
Tuberculosis

a. Prevention of the acquisition and spread of infectious disease require a program wide emphasis on good health practices. These include adherence to the practice of good hygiene (regular hand washing using antibacterial soap or an appropriate hand sanitizer), adherence to Universal Precautions (protective devices, covering open cuts or wounds before treating a patient), and maintenance of appropriate immunizations.

Student Health Maintenance Policy

In an effort to promote health and wellness, and to prevent the transmission of disease, the following CSULB AT Program Policy on Health Maintenance is in place.

1. Athletic Training Student Illness Procedures

a. If an athletic training student becomes ill, feels that he/she may have a medical condition, which could affect the safety of the student or patient, he/she must report to the Student Health Services on campus or to another medical practitioner for evaluation. Upon evaluation, the medical practitioner will determine the appropriate intervention necessary and the amount of time the student shall remain out of contact with others to prevent transmission.
b. The student should notify their preceptor and Program Faculty if they are unable to participate in clinical activities.

2. Prevention

Athletic training students should use the following guidelines to prevent transmission of potentially infectious agents, and protect themselves from potentially infectious agents:

a. Use appropriate barriers when in contact with or when there is a potential to be in contact with the patient's blood or bodily fluid per the Bloodborne Pathogen Policy.
b. Those who have exudative and/or open lesions or weeping dermatitis will report this to their preceptor. They may be required to cover the open wounds or cuts before treating a patient. They may be required to refrain from direct patient care and from handling patient care equipment until the condition is resolved.
c. Cover his or her mouth when sneezing or coughing.
d. Practice regular hand washing and other preventative hygiene measures to eliminate the spread of disease.
e. Those with a contagious disease (or the possibility of transmission) should avoid direct contact with patients. If students are sick, they should go to the student health center on campus for treatment. Athletic training students need to report their health status to their preceptor and Program Faculty. The student may be required to refrain from direct patient care and from handling patient care equipment until the condition is resolved. The student may be required to obtain a note from the physician to provide to the preceptor and program faculty. (See the Communicable Disease Policy)

3. Sanitation

a. All equipment must be cleaned every day and following possible contamination.
b. Environmental Protection Agency (EPA) approved disinfectants that are effective against COVID-19 will be used.

c. All tables, equipment, countertops, stools, etc, should be cleaned and sanitized following the disinfectant manufacturers recommendations.
d. Follow manufacture recommendations in the use of PPE and ventilation to reduce the risk of adverse health effects.

Calibration and Maintenance Policy

The CSULB Athletic Training Program (ATP) requires all clinical sites affiliated with the program to calibrate and maintain the equipment according to manufacturer guidelines.

The following must be followed:

- All electrical modalities used for patient care and educational instruction are calibrated annually by a certified calibration technician.
- Annual calibration reports of electrical modalities are submitted to the ATP by August 1 of each year, prior to the return of athletic training students' fall semester clinical rotations.
- Prior to any athletic training student assigned to a preceptor at the specific affiliated clinical site, the Coordinator of Clinical Education will make sure the electrical modalities are calibrated and meets safety standards during the clinical site visit.
- Any problems identified with any therapeutic equipment by the staff or athletic training students at the clinical sites should be removed from use until the problem is corrected.

Emergency Action Plan Policy

The CSULB Athletic Training Program (ATP) requires all clinical sites affiliated with the program to have venue specific emergency action plans (EAP) and share the documents with the program.

The following must be followed:

- Venue specific emergency action plans are submitted to the ATP by August 1 of each year, prior to the return of athletic training students fall semester clinical rotations.
- Emergency action plan need to be located in a place where it is easily accessible for the ATS assigned to the clinical site.
- Prior to any athletic training student assigned to a preceptor at the specific affiliated clinical site, the EAP will need to be submitted to the program.
- During the clinical site visit, the Coordinator of Clinical Education will confirm the location of the EAP for ease of accessibility.

Radiation Exposure Safety Policy

Although radiation exposure is currently not a concern for the university or majority of the affiliated clinical sites for CSULB Athletic Training Program, there are several medical facilities with X-ray machines.

If athletic training students were to be assigned to a clinical site that includes potential exposure to X-ray machines, the following training session would be needed.

- X-Ray Radiation Safety Training from College of Natural Sciences and Mathematics
- X-Ray Radiation Safety Exam

V. Appendices

Appendix A

Preceptor Duties and Responsibilities Contract

As a preceptor for the CSULB Athletic Training Program, I confirm that I am willing and able to continue with the education of the athletic training students enrolled in the program.

I confirm the following:

1. Current status as BOC certified athletic trainer in good standing.
2. NPI number.
3. Contemporary expertise as outlined on the table.
4. Have maintained satisfactory evaluation by athletic training students over the past two years.
5. Continued participation in at least two of the CSULB AT Program events:
    a. Annual preceptor workshop
    b. Board of Review (twice annually)
    c. Standardized Patient Competencies
    d. End of the year banquet
    e. Bailey-Arnheim Games
6. Adhere to all the policies and procedures as outlined in the current preceptor handbook.
7. Notify the program immediately if BOC status changes.

Name of Preceptor: _____

Signature: _____

Date: _____

Affiliated Clinical Site: _____

Appendix B

Immersive Clinical Experience Requirements

This Immersive Clinical Experience Requirements information sheet is meant to help inform you of the expectations of the immersive clinical experience by athletic training students and to ensure that the students can fulfill the requirements at your clinical site.

The CAATE defines immersive clinical experience as "a practice-intensive experience that allows the student to experience the totality of care provided by athletic trainers (CAATE 2020 Standards)." The expectation is that the students participate in the day-to-day and week-to-week role of an athletic trainer for a minimum of 4-weeks.

One of our athletic training students has expressed interest in completing their immersive clinical experience at your site. In order for us to proceed with the assignment, please confirm the following:

- I (and the other staff) am/are willing to be the preceptor for the athletic training student completing the immersive clinical experience.
- The athletic training students will have full autonomy in patient care with supervision.
- The athletic Training students will participate in a full-time, day-to-day, and week-to-week role of the athletic trainer.
    - This may include any of the following based on the clinical site:
        - Travel and meetings with the team
        - Doctor, specialist or imagining visits
        - Teaching class or presenting to teams, coaches, patients, parents, or others
        - Administrative duties such as pertaining to insurance and scheduling of doctor's visits
        - Speaking with coaches and/or parents about injuries and/or patient status
        - Revising clinic policies and procedures
        - "Running" the clinic
- The clinical site will have administrative support to have the athletic training student complete the immersive experience.

If you are able to fulfill the above checklist, we would like to proceed with the Immersive Clinical Experience Contract.

Thank you for providing the athletic training students with this opportunity.

Immersive Clinical Experience Contract

This Immersive Clinical Experience Contract outlines the expectations of the clinical site/preceptors, expectations of the student, as well as the start/end date of the immersive clinical experience.

ATS Name: _____
Clinical Site: _____
Preceptor (can be multiple): _____
Anticipated Start Date of Immersive Clinical Experience: _____
Anticipated End Date of Immersive Clinical Experience: _____
Approximate Length of Immersive Clinical Experience: _____

Clinical Site/Preceptor Expectations:

- The athletic Training students will participate in a full-time, day-to-day and week-to-week role of the athletic trainer.
    - This includes, but not limited to, duties as outlined in the Immersive Clinical Experience Requirements.
- The athletic training students will have full autonomy in patient care with supervision.
- The clinical site will have administrative support to have the athletic training student complete the immersive experience.

Expectations for Athletic Training Student (as set forth by the preceptor and AT program):

Expectations for the Clinical Site (as set forth by the ATS and the AT program):

Will the student be able to complete any additional non-immersive experiences at this site during their AT 584 semester:
Yes or No

By signing below, I agree to the above terms:

_____
ATS Name

_____
ATS Signature Date

_____
Preceptor Name

_____
Preceptor Signature Date

_____
Program Representative

_____
Program Representative signature Date