THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL
UNDERGRADUATE ATHLETIC TRAINING EDUCATION PROGRAM
HANDBOOK
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Welcome to the University of North Carolina’s Undergraduate Athletic Training Education Program. We are pleased that you have expressed interest in the program, as we believe it has a tremendous amount to offer students who wish to begin a career in athletic training or other related medical fields. Under the direction of Kevin Guskiewicz and Meredith Peschauer the program received its initial accreditation by CAAHEP in October 1997. Since this time the program has grown to be recognized as one of the “outstanding programs” in the nation. As the current program director it is my goal to maintain the program’s level of excellence and continue to move forward and improve our program.

More than 80 students have since graduated from our program. Over 80% of those students passed the Board of Certification (BOC) Exam on their first attempt (national avg. of other accredited programs = 45%) and gone on to successful careers in athletic training or other related medical fields. More than 70% of our graduates accept positions in graduate programs related to athletic training / sports medicine or other related medical programs (physical therapy, medical school, physician assistant). While these numbers do not solely determine our program’s quality, they speak to our students’ level of education and the effort our faculty and clinical instructors put forth towards our students’ development.

In spring 2002, the program underwent successful re-accreditation. Following the on-site evaluation the CAAHEP review team indicated that our program was one of the top programs and serves as a model for others. This recognition can be directly attributed to our program’s students, faculty and staff, and the positive changes that have taken place since our initial accreditation. Our program offers seven core athletic training classes, in combination with the Department of Exercise and Sport Science curriculum. We provide clinical opportunities at a local college, a professional sports setting, several local high schools, as well as UNC athletics. The program also offers a general medicine and orthopaedic surgery observation to further enhance learning opportunities for the athletic training student. We also hold regular in-services for our observer students so that they may gain additional knowledge about various athletic training related topics.

Without question, we set very high standards for our athletic training students, clinical supervisors, and faculty. It is very important that athletic training students are aware of the program policies and procedures, and this can best be accomplished by familiarizing yourself with this handbook. The undergraduate athletic training student is a vital part of our sports medicine team. We hope you will take pride in your work, ownership in our program, and represent the University of North Carolina with utmost professionalism. Best of luck in your endeavors!

Sincerely,

Darin A. Padua, PhD, ATC, LAT
Program Director

Meredith Petschauer, PhD, ATC, LAT
Clinical Site Coordinator

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**Mission Statement**

The primary purpose of the Athletic Training Education Program at UNC is to develop a competent and contributing entry-level professional in the field of athletic training. This will be accomplished by providing an educational experience that includes an effective blend of classroom instruction and clinical experience in preparation for taking the National Athletic Trainers’ Association Board of Certification examination. This preparation, along with successfully passing the certification exam, will qualify certified athletic trainers for employment in high schools, colleges, professional sports programs, and other health care settings.

**Athletic Training Educational Objectives**

1. To promote acceptable standards of ethical conduct at every opportunity, and adhere to the NATA code of ethics.

2. To provide an opportunity for each student to develop optimal skills as specified in the Competencies in Athletic Training for the following areas:
   - Prevention of athletic injuries
   - Recognition, evaluation & assessment of Injury
   - Immediate care of injury
   - Treatment, rehabilitation & reconditioning of athletic injury
   - Health Care Administration
   - Professional Development & Responsibility

3. To continually determine the reliability and validity of athletic training course content and training room experience.

4. To continually seek the highest quality in (a) instructional technique, (b) equipment, (c) clinical experiences, and (d) student work.

5. To provide all students the opportunity to develop their skills in a variety of clinical settings and with a variety of athletes. This should include opportunities to work with both male and female sports, team and individual sports, contact and non-contact sports.

6. To place students into supervised situations which require the use of common sense, rational thinking and problem solving skills.

7. To offer situations in which the student may put the theory of the classroom into practice.

8. To expose the student athletic trainer to other professionals of the athletic health care team both in the classroom and in the clinical settings.
ACADEMIC AND CLINICAL POLICIES

Success is a journey, not a destination.

You’ll always miss 100% of the shots you don’t take.
Admission Policy

1. Students apply to enter the athletic training program during the fall semester of their sophomore year for entrance during the spring semester. Prerequisites for application include: a minimum of 50 hours of observation in the Fetzer Athletic Training Room, a minimum GPA of 2.75, and a minimum grade of a B in EXSS 175 (Human Anatomy) and EXSS 188 (Emergency Care of Injury and Illness). NOTE: In order to be assigned observational hours prior to applying students must have a minimum GPA of a 2.5. Once admitted to the program students are required to be certified in both CPR and First Aid.

2. Applications are accepted between October 1st and October 15th for students who wish to begin the program during the following academic semester. The application process is completed with a formal interview. Athletic training faculty, staff athletic trainers, and graduate students may be asked to serve on the interview committee. The program director and clinical site coordinator will make all final decisions.

3. Students are notified of their status just prior to registration so they can schedule the appropriate courses for the semester. Students who are granted a position in the program are notified of their clinical affiliation site for the spring semester around November 10th.

4. The number of students accepted into the program each year is based upon the availability of staff and clinical experience opportunities. On average, the number of students accepted per year will range between 12 and 15.

5. Once admitted to the program, students must commit themselves to a minimum of five semesters for the completion of coursework and clinical experience. The clinical experience of 1000 hours (minimum 200 hours per semester) must be completed in no less than five semesters.

6. Students must have been or plan to be vaccinated for Hepatitis B Virus or sign a waiver indicating they decline to receive a vaccine and assume the risks involved.

7. Students must sign and understand the technical standards document.

Transfer Students

Transfer students that have met the aforementioned admissions requirements are eligible to apply for admittance to the program. Courses (credits) are transferable however, students will be required to take the human anatomy course (EXSS 175) and the emergency care course (EXSS 188) from UNC-Chapel Hill as well as the core Athletic Training courses. Students must also complete the 50 hours of observation in the UNC FETZER athletic training room (i.e., hours obtained from another institution are not transferable).

Transfer from an accredited athletic training program:
A student may transfer into the UNC athletic training education program if the following conditions are met;
1. They must have applied and been admitted to that program.
2. They must have completed the prerequisite coursework (Equivalent to EXSS 188 and EXSS 175) with a grade of at least B.
3. They can only transfer in the equivalent to EXSS2 65 as per review of the course and competencies taught in that course by the program director and instructor of EXSS 265.
4. They must have one clinical rotation completed with a satisfactory rating.

If these requirements are met they will be admitted to the UNC Athletic Training Education program on a provisional basis for the first semester. They will begin by registering in
the fall for EXSS 366 and 271. At the mid semester of these classes the student’s performance will be evaluated and must be satisfactory to be formally admitted to the program. If these requirements are not met the student can still transfer, but will transfer in with the status of any other student.

**Student Athletes**

Student athletes are eligible to apply for admittance into the Undergraduate Athletic Training Education Program, however, it will be not be possible to complete the program requirements without full cooperation from the athlete’s coaching staff. No exceptions will be made to the course sequencing if admitted to the program, nor will exceptions be made for meeting the required 1000 clinical hours within the minimum of five semesters. Clinical hours during the athlete’s in-season may be deferred to a later semester. During the athlete’s off-season he/she will not be permitted to participate in his/her respective sport if it conflicts with the clinical site assigned.

**Progress Evaluation and Retention Requirements**

1. Normal progress towards completion of the program requirements will be monitored by the student’s faculty advisor, the program director, and the clinical site coordinator.

2. Students falling below 2.75 (cumulative) GPA will be placed on a one term probationary status and removed from their clinical setting. Students must attain a 2.75 GPA after one term to remain in the program and return to the clinical setting.

3. No grade lower than a C will be accepted in any athletic training course, including the clinical experience classes and all practical competencies must be passed with a minimum of 80% in order to advance to the next athletic training course.

4. There will be two personal performance evaluations each semester (see Student Athletic Trainer Evaluation Form). If more than 1/3 of the evaluation scores for sections I-III are less than or equal to fair, a mandatory conference will be scheduled with the program director and clinical site coordinator at which time the student may be placed on probation. Additionally for the remaining sections of the evaluation form, it is expected that senior level students will perform consistently at a rating of four, juniors at a rating of three, and sophomores at a rating of two.

5. Students must maintain CPR and First Aid certification, BBP training, and HIPPA training throughout the duration of the program.

6. Any leave from participation in the program will result in withdrawal from the program unless deemed appropriate by the program director (i.e. medical reasons will be considered).

**Drug/Alcohol/Amorous Relationship Policy**

1. Undergraduate student athletic trainers shall always serve as a role model to athletes and other student athletic trainers with whom they have the privilege of working. In doing so, they will refrain from becoming involved in an amorous or sexual relationship with any current athlete for whom the student provides athletic training services or for any athlete whom they may have a future chance of providing athletic training services.

2. Undergraduate student athletic trainers shall always serve as a role model to athletes and other student athletic trainers with whom they have the privilege of working. In doing so, they will refrain from engaging in the consumption of alcoholic beverages or other substances deemed either illegal or not conducive to athletic performance with any current athlete for whom the
student provides athletic training services or for any athlete whom they may have a future chance of providing athletic training services.

3. An undergraduate student who fails to act as a quality role model by violating one of the aforementioned policies will be placed on a mandatory one-semester (or four consecutive months during the academic year) probation.

**Probationary Status and Dismissal Policies**

1. Probation is determined by the program director and clinical site coordinator upon consultation with any involved clinical instructors and/or faculty members.

2. Probation may include:
   A. Total removal from the clinical site. (length of removal to be determined)
   B. Reassignment of the clinical site to General Training Room. (length to be determined)

3. Any student who has previously been placed on probation, and receives subsequent probation, may be dismissed from the program. Any student who encounters a third infraction will be dismissed.
# UNC-CH Undergraduate Athletic Training Education Program

## Suggested Course Sequencing

### Freshman Year:

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Spring Semester</th>
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<tbody>
<tr>
<td>_____ Foundations Courses</td>
<td>_____ Foundations Courses</td>
</tr>
<tr>
<td>_____ Foundations Courses</td>
<td>_____ Approaches Courses</td>
</tr>
<tr>
<td>_____ Foundations Courses</td>
<td>_____ BIOL 101 - Biology</td>
</tr>
<tr>
<td>_____ Foundations Courses</td>
<td>_____ BIO 101L - Biology 11 Lab</td>
</tr>
<tr>
<td>_____ Approaches Courses</td>
<td>_____ Elective</td>
</tr>
<tr>
<td>(3) _____ EXSS 188 Emerg. Care Injury &amp; Illness</td>
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</table>

### Sophomore Year:

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Spring Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3) _____ EXSS 175 – Human Anatomy</td>
<td>(3) _____ EXSS 141 - Personal Health</td>
</tr>
<tr>
<td>_____ Elective</td>
<td>(3) _____ EXSS 265 – Fundamentals of AT</td>
</tr>
<tr>
<td>_____ Approaches Courses</td>
<td>_____ Connections Courses</td>
</tr>
<tr>
<td>_____ Connections Courses</td>
<td>_____ Approaches Courses</td>
</tr>
<tr>
<td>_____ Approaches Courses</td>
<td>_____ Elective</td>
</tr>
<tr>
<td>(3) _____ EXSS 265 – Fundamentals of AT</td>
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<tr>
<td>(1) _____ EXSS 271 – AT Clinical</td>
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</table>

### Junior Year:

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Spring Semester</th>
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</thead>
<tbody>
<tr>
<td>(3) _____ EXSS 366 – Evaluation of Athletic Injury Modalities</td>
<td>(3) _____ EXSS 367 – Therapeutic Exercise</td>
</tr>
<tr>
<td>(3) _____ EXSS 276 – Human Physiology</td>
<td>(1) _____ EXSS 271 – AT Clinical</td>
</tr>
<tr>
<td>(3) _____ *EXSS 273 or *EXSS 380</td>
<td>(3) _____ EXSS 385 - Biomechanics of Sport</td>
</tr>
<tr>
<td>(1) _____ EXSS 175 L – Anatomy Lab</td>
<td>(3) _____ EXSS 181 - Sport Psychology</td>
</tr>
<tr>
<td>(1) _____ EXSS 271 – AT Clinical</td>
<td>(2) _____ EXSS 370 – General Med in AT</td>
</tr>
<tr>
<td>_____ Connections Courses</td>
<td>_____ Connections Courses</td>
</tr>
<tr>
<td>_____ Elective</td>
<td>_____ Supplemental Education</td>
</tr>
<tr>
<td>(1) _____ EXSS 271 – AT Clinical</td>
<td></td>
</tr>
<tr>
<td>(2) _____ EXSS 370 – General Med in AT</td>
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</table>

### Senior Year:

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Spring Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3) _____ EXSS 368 – Therapeutic Exercise</td>
<td>(3) _____ EXSS 369 – AT Seminar</td>
</tr>
<tr>
<td>(3) _____ EXSS 376 – Physiological Basis of HP</td>
<td>(3) _____ EXSS 360 - Sports Nutrition</td>
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<tr>
<td>(1) _____ EXSS 271 – Athletic Training Clinical</td>
<td>_____ Supplemental Education</td>
</tr>
<tr>
<td>_____ Supplemental Education</td>
<td>_____ Elective</td>
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<tr>
<td>_____ Activities class</td>
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**NOTE:** *only one* of these courses is required for graduation with a degree in Exercise and Sport Science for students accepted into the Athletic Training Education Program.
UNC Athletic Training Student – Observer Program
Weekly Learning Tasks

Name: ___________________________
Date entering the Athletic Training Observer Program: _________________

♦ These are introductory skills – they need to be **practiced**, but not yet perfected!
♦ The theory behind the various skills is not yet essential. This will be covered upon entering the undergraduate athletic training education (i.e. cryotherapy, ultrasound, electrical stimulation, etc.).
♦ There are several learning tasks presented. Each task should take one week to complete. If you do not complete the specified learning task within the one week period then you may utilize the designated “catch-up” periods to get back on track.
♦ Tasks need to be initialed and dated by one of the following individuals: Junior / Senior Athletic Training Students, Graduate Students, Staff Athletic Trainers. The individual that teaches you the specific task should be the one that signs off on it’s completion.
  ➢ Senior Athletic Training Students, Graduate Students and Staff Athletic Trainers are able to sign off on all of the Weekly Learning Tasks.
  ➢ Junior Athletic Training Students may sign off on those Weekly Learning Tasks that they have been formally instructed on during their academic experience.
♦ Many of the Weekly Learning Tasks are designed for you to interact with individuals in the Athletic Training Room for help and guidance in completing these tasks. We encourage you to utilize this opportunity to introduce yourself and get to know the Athletic Training Students (undergraduate & graduate) and Staff Athletic Trainers.
♦ **Please turn in the packet at the end of each semester to Darin’s mailbox in Fetzer Gym 209 (“Padua”). These will be returned to you at the beginning of the next semester.**
UNC Athletic Training Student – Observer Program  
Weekly Learning Tasks  
Athletic Training Observer Student Competency Checklist

Name: ____________________________________________

♦ The following are skills and competencies that Athletic Training Observer Students must be educated and evaluated on. Observer Students must undergo formal education and evaluation from an Approved Clinical Instructor (ACI) of these skills and competencies prior to performing the skills in the athletic training room on student athletes and/or patients. After undergoing formal education & evaluation you will only be able to perform these skills and competencies under the direct supervision of a certified athletic trainer.

➢ Education will come in the form of in-services that will be held over the course of the semester. In-services will be held approximately every other week. Dates, times and topics for the in-services will be posted during the second week of each semester.

➢ Evaluation will be performed by one of the ACI’s at the University of North Carolina at Chapel Hill. ACI’s include all the staff and faculty in the Athletic Training Education Program, as well as first and second year graduate students.

♦ Observer Students are not required to undergo education and evaluation on these skills and competencies; however, you will not be able to perform these skills or competencies unless you’ve undergone formal education and evaluation on them.

♦ Once being evaluated and signed off on a specific skill or competency by an ACI you will need to give a copy of this sheet (signed) to Darin Padua.

Wound Care:
In-Service Attendance: __________________________
Date: ________

Evaluation: __________________________
Date: ________

Cryotherapy & Thermotherapy:
In-Service Attendance: __________________________
Date: ________

Evaluation: __________________________
Date: ________

Ultrasound:
In-Service Attendance: __________________________
Date: ________

Evaluation: __________________________
Date: ________
**Electrical Stimulation:**
In-Service Attendance: ACI Signature____________________________
Date:_________

Evaluation: ACI Signature____________________________
Date:_________

**Taping – Bandaging:**
In-Service Attendance: ACI Signature____________________________
Date:_________

Evaluation: ACI Signature____________________________
Date:_________

**LEARNING TASK 1**

**Get acclimated, get ready to learn!!**
Initial Date

_______ ______Introduce yourself to Sally Mays
_______ ______Sign out shirt for training room hours
_______ ______Learn front desk responsibilities (all of them)
_______ ______Location of supplies & what they are – named, used for…
_______ ______Cleaning entire ATR (whirlpools, hydrocollator…)

What are names of the four different types of taping supplies located in the taping cabinets?
1. _______________________
2. _______________________
3. _______________________
4. _______________________

What is Sally Mays' official title (not head athletic trainer of… sports, the other one)?

For which sports does Sally Mays provide medical coverage?

There are 10 other faculty/staff certified athletic trainers that you need to know. Over the course of the next 3 weeks you will be expected to introduce yourself to each of them. It is good for you to know them and for them to know you (especially come application time)!

<table>
<thead>
<tr>
<th>Name</th>
<th>Initial</th>
<th>Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sally Mays (met today)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Terri Jo Rucisnski</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chris Hirth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kevin Guskiewicz</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cody Malley</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Darin Padua</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meredith Petschauer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bill Prentice*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dan Hooker*</td>
<td></td>
<td></td>
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<tr>
<td>Scott Oliaro*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Dean Crowell*  ________  Marc Davis*  ________
*If you can catch them, or you might have to wait until you visit the other training rooms.

**LEARNING TASK 2**

<table>
<thead>
<tr>
<th>Initial</th>
<th>Date</th>
<th>Learn/Review Shoulder Anatomy – muscles, bones, major ligaments, movements</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Visit National Athletic Trainers’ Association (NATA), North Carolina Athletic Trainers’ Association (NCATA), UNC Sports Medicine, and Student Athletic Trainers’ Association (SATA) websites</td>
</tr>
<tr>
<td></td>
<td></td>
<td>♦ Print out home page from each website; show them to the person signing off on it. Keep them with your weekly learning tasks packet.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Review the wound care protocol</td>
</tr>
</tbody>
</table>

What is the rule of Universal Precaution?

What is a biohazard bag used for?

Name three ways to stop bleeding?

**What are the 4 website addresses?**

♦ NATA –

♦ NCATA –

♦ UNC Sports Medicine –

♦ SATA –

What does the abbreviation “ATC” stand for?

**LEARNING TASK 3**

Continue learning/reviewing shoulder anatomy

<table>
<thead>
<tr>
<th>Initial</th>
<th>Date</th>
<th>Review Scenario 1 (see below)</th>
</tr>
</thead>
</table>
|         |      | Medical Terminology (abbreviations, directional terms…)

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Scenario 1
An individual enters Fetzer Athletic Training Room. You are stationed at the front desk and ask how you may help the individual. It is obvious that this individual is upset and looking for help. The individual indicates that while playing racquetball their partner passed out and seems to be unconscious.

What is your initial step in this type of situation?

You are instructed to call 911 and activate the emergency response system. What type of information do you need to provide to the operator?

What is the address to Fetzer Gymnasium?

What is the phone number to Fetzer Gym Athletic Training Room?

What are the names of the nearest cross streets to Fetzer Gymnasium?

What type of emergency equipment is kept in Fetzer Gym Athletic Training Room? Where is this equipment located in Fetzer Gym Athletic Training Room?

What are the three joints of the shoulder complex?

What are the four rotator cuff muscles?

How many muscles are involved with motion at the shoulder joint?

Name the major motions performed by each of the following shoulder muscles. Deltoid Pectoralis Major

©UNC-CH Undergraduate Athletic Training Education Program 2002
Supraspinatus, Infraspinatus, Teres Minor

Subscapularis

Trapezius (all 3 parts)

Word Bank (fill in the questions below with the appropriate term from the word bank)
-Anterior  -Posterior  -Superior
-Inferior  -Distal  -Proximal
-Medial  -Lateral  -Origin
-Insertion

The lumbar vertabrae are ____________ to the cervical vertebrae
The __________ of the short head of the biceps is the coracoid process
The wrist is __________ to the elbow
The semimembranosus and semitendinosus are ________ to the biceps femoris
The manubrium is _____________ to the xyphoid process
The rectus femoris is __________ to the VMO
The gastrocnemius is on the __________ surface of the tibia
The hip is ____________ to the toes
The anterior tibialis is on the __________ surface of the tibia
The ________ of the short head of the biceps is the radial tuberosity

LEARNING TASK 4

Initial Date
_______ ______Review/Learn Elbow Anatomy – Muscles, bones, major ligaments, and movements
_______ ______Crutch fitting & proper use
_______ ______Location & stocking of athletic training kits (how, why, what…)

Who are the four officers of SATA?
President –
Vice-President –
Secretary –
Treasurer –

What are the six specific practice areas of an ATC (information located on SATA website)?
When crutches are properly fitted what is the appropriate elbow flexion angle?

What is the proper way to go up and down stairs while using crutches?

How many fingers should fit between the axilla and the crutch when setting up an individual with crutches?

**You should have met all of the Staff/Faculty trainers by the end of this task.**

For which sports do each of the staff certified athletic trainers provide medical coverage? If they do not provide medical coverage for a specific sport what is their official title?

Cody Malley
Terri Jo Ruscinski
Chris Hirth
Bill Prentice
Dan Hooker
Scott Oliaro
Meredith Petschauer
Marc Davis
Dean Crowell

**TASK 5**

Continue learning/reviewing the anatomy of the elbow.

Initial __________ Date __________

Review scenario 2 (see below)

**Scenario 2**

An individual participating in intramural basketball receives an elbow (direct blow) above their left eyebrow. The individual reports to the training room with an open laceration above the eye. Upon
inspection there is no damage to the eye itself and vision is normal. However, there is a significant amount of bleeding due to the laceration.

What precautions must be taken in managing this type of injury?

How does one properly dispose of all materials that have been in contact with blood?

What are the two most significant bloodborne pathogens?

What is the proper terminology for guidelines that describe how to properly handle objects that may have been exposed to a bloodborne pathogen?

Name the major motions performed by each of the following elbow muscles.
- Biceps Brachii
- Triceps Brachii
- Brachialis
- Pronator Teres

What structure in the elbow is susceptible to injury if ice is left on too long? Why is it so susceptible?

What ligament in the elbow is injured most often in baseball players?

If this ligament were to rupture, what is the name of the surgery that would be done to repair it?

**TASK 6**

<table>
<thead>
<tr>
<th>Initial</th>
<th>Date</th>
<th>Review/Learn wrist/hand Anatomy – Muscles, bones, major ligaments, and movements</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Proper practice set-up (for at least 1 sport)</td>
</tr>
<tr>
<td></td>
<td>♦</td>
<td>Ask the trainers for a team if you can help them prepare for practice and if you can go to practice with them</td>
</tr>
<tr>
<td></td>
<td>☑</td>
<td><strong>Proper tape tearing</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Thermotherapy (hydrocollator packs, wwp)</td>
</tr>
</tbody>
</table>
What is the proper temperature for the warm whirlpools?

What are the three requirements to get into the undergraduate athletic training education program at UNC? (information located at SATA website)

What is the deadline for applying to the undergraduate athletic training education program?

How many semesters long is the undergraduate athletic training education program?

**TASK 7**

**Catch-up week** – finish any task that you have not finished
**Review the Anatomy and Motions of the Upper Extremity**

How many phalanges are in each hand? How many metacarpals? How many carpals?

Name the carpal bones of the wrist.

What is the carpal tunnel? How many structures run through it?

What structure is "injured" in carpal tunnel syndrome?

Name the major motions performed by each of the following wrist and hand muscles.
*Flexor Digitorum*
*Extensor Digitorum*
*Flexor Pollicis*
*Extensor Pollicis Longus*
*Flexor Carpi Ulnaris*
Flexor Carpi Radialis

**TASK 8**

<table>
<thead>
<tr>
<th>Initial</th>
<th>Date</th>
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<tr>
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</table>

- Review/Learn hip Anatomy – muscles, bones, ligaments, and movements
- Injury Evaluation Steps
- Wrist Taping

**What are the basic steps to an injury evaluation?**

**What is the purpose of each step in the evaluation?**

**TASK 9**

Continue learning/reviewing the anatomy of the hip.

<table>
<thead>
<tr>
<th>Initial</th>
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</table>

- Review Scenario 3 (see below)
- Filling out injury report forms (how, why, what…)

**Scenario 3**

An individual is injured during a soccer match. A certified athletic trainer and yourself respond to the injury. The certified athletic trainer suspects that the individual has fractured their tibia. Any suspected fracture should always be splinted before the athlete is moved.

**Why does a suspected fracture need to be splinted prior to transporting the injured individual?**
What types of splinting devices are available in Fetzer Athletic Training Room?

Where are these splinting devices kept in Fetzer Athletic Training Room?

Practice applying each of the different splinting devices with a junior/senior or graduate athletic training student.

What is the importance of the injury report form?

Name three types of medical forms that we use in the training room to document injuries/treatments/rehabs.

Name the major motions performed by each of the following hip muscles.

Iliopsoas

Adductors

Gluteus Maximus

Gluteus Medius

Gluteus Minimus

Hamstrings (at the hip)

How many muscles in the hip perform external rotation? Which one is injured the most often?

What is the name of the largest nerve in the human body that runs through the hip region?

Name the three different adductor muscles.

**TASK 10**

Initial:  
Date:  
Review/Learn Knee Anatomy – muscles, bones, ligaments, and movements

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Attend another practice: wr, tr, gym, vb, wbb, fh, lax, sc, bb, sb, cheer

Ace wrap usage (Compression wrap, muscle assist, etc.)

Thumb Taping

Purchased UNC Student Athletic Trainer Handbook from Student Stores

List the multiple uses of an ace wrap.

What is the purpose of using an ace wrap for compression?

Where should the compression from the ace wrap be the greatest? The least?

When using an ace wrap for compression it needs to be tight, but not cut off the blood supply. How can you make sure that the blood is still reaching the fingers/toes?

Why would you use an ace wrap to assist a muscle?

Would the ace wrap assist the muscle by placing it in a shortened or lengthened position?

TASK 11

Continue reviewing/learning that anatomy of the knee.

Initial: _____  Date: _____

Review scenario 4 (see below)

RICE

Scenario 4
An individual injures her right ankle during a pick-up basketball game. In questioning the individual you discover that the injury occurred when the individual stepped on another person’s foot while landing from jump, forcing the ankle into excessive plantar-flexion and inversion.

At the time of injury, the individual complained of pain on the lateral aspect of the ankle before falling to the ground. After the injury, the athlete complained of moderate pain on the lateral aspect of the right ankle. During palpation the individual is point tender over the soft tissue lying directly anterior and distal to the lateral malleolus of the right ankle. Walking on the right foot is very difficult. Swelling is occurring around the lateral
malleolus. It is determined that the individual has suffered a grade 2 inversion ankle sprain.

Based on the above information, what ankle ligament was likely injured?

What immediate steps should be taken in caring for this injury?

What type of home instructions should be given to this individual to properly care for this injury?

Name the major motions performed by each of the following knee muscles.

Quadriceps

Hamstrings (at the knee)

Sartorius

Gastrocnemius (at the knee)

What are the four muscles that make up the quadriceps?

What are the three muscles that make up the hamstrings?

What does RICE stand for?

What does each component of RICE seek to accomplish in helping the athlete's injury?
TASK 12

Initial Date

Initial Task

Review/Learn Ankle/Foot Anatomy – muscles, bones, ligaments, and movements
Visit satellite ATR facilities – kenan, PT, smith center, woollen
Finger Taping
Ankle Taping
Stretching (static, dynamic, PNF)

What are the names of the tarsal bones?

What is the name of the joint formed by the tibia/fibula and the talus? What motions occur here?

What is the name of the joint formed by the talus and the calcaneus? What motions occur here?

What is the plantar fascia? What is its function in the foot?

Name the major motions performed by each of the following ankle and foot muscles.

Soleus
Anterior Tibialis
Flexor Hallicus
Extensor digitorum
Peroneal Longus, Brevis, and Tertius

TASK 13

Catch-Up week – finish any task that you have fallen behind
Review the Anatomy and Motions of the Lower Extremity

TASK 14

<table>
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<tbody>
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</table>

Review the injury management protocol from the Student Handbook

Review the athletic training classes that you would take once admitted into the program

List the title for each of the athletic training courses? Briefly describe the content for each of the athletic training courses.

TASK 15

<table>
<thead>
<tr>
<th>Initial</th>
<th>Date</th>
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<tbody>
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</table>

Review/Learn Trunk (Abdomen/Low Back) – muscles, bones, ligaments, and movements

SOAP note documentation

What does SOAP stand for?

What is the difference between the first two sections of a SOAP note?

What kind of things should be included in each section?
TASK 16

Anatomy Review (Hip/Thigh/Knee/Ankle/Foot/Abdomen/Low Back)

TASK 17

Initial Date
______ _____ Cyrotherapy (ice cups, ice massage, cwp – why, how, what happens, etc.)
♦ Learn the proper way to make an ice bag

What is the proper temperature for the cold whirlpools?

How many minutes should a person ice an injury at one time?

What are the dangers of allowing an individual to ice for too long?

TASK 18

Initial Date
______ _____ Electrical Stimulation

What are three purposes of using electrical stimulation on an injury?

Name five types of electrical stimulation.
What is the difference between a monopolar, bipolar, and quadpolar set up.

**TASK 19**

Initial Date

**Review/Learn the biarticular muscles of the body**

What is meant by “biarticular” muscles?

Name 5 biarticular muscles from the lower extremity and what joints they cross.

Name 5 biarticular muscles from the upper extremity and what joints they cross.

**TASK 20**

Catch-up & start trying to perfect the skills (some are very easy & some are very difficult – each must be treated with the same goal in mind – LEARN AS MUCH AS YOU CAN!)

**TASK 21**

Finish-up for the semester

♦ Next semester – start mastering the skills and teaching other new student athletic trainer observers the same skills!
SHADOW FORM

Name: ____________________________ Date: ________________________

Supervising ATC: ____________________ ATC Signature: ____________________

What did you do today while shadowing?

What did you learn today while shadowing?

How do you think you can apply what you learned today?
APPLICATION FOR UNC UNDERGRADUATE ATHLETIC TRAINING EDUCATION PROGRAM

Name: ___________________________ Date ___________ PID# ____________________________

Permanent Address: ___________________________ Year ______________

Phone Number: ____________________________

School Address: ___________________________ email: ____________________________

Phone Number: ____________________________

Overall GPA: _________________ EXSS GPA: _________________

In the table below, list previous and current courses taken in the department of EXSS. List the presently attained grade in those courses currently being taken.

<table>
<thead>
<tr>
<th>Course/Number</th>
<th>Grade</th>
<th>Course/Number</th>
<th>Grade</th>
<th>Course/Number</th>
<th>Grade</th>
</tr>
</thead>
</table>

Athletic Training Room Experience: ___________ Hours ___________ Semesters

List two references (staff athletic trainers, graduate students, and faculty) who could be contacted to discuss your work ethic and/or ability to succeed as a student athletic trainer.

Name_______________________________ Phone_____________________

Name_______________________________ Phone_____________________

On the reverse side of this application or on an attached sheet, briefly (less than 300 words) discuss your professional goals. Please include how you might be an asset to the athletic training program and how your short and long term goals might be met by participation in the program.

The information provided above represents an accurate representation of course work completed or currently in progress according to existing transcripts.

Signature_________________________ Date_______________
Guidelines for Clinical Experience

Purpose and Design of Clinical Experience

The athletic training clinical and field experience is designed to provide students with the various “real life” situations that athletic trainers face on a daily basis. The student will attend both practices and competition. During these sessions, he/she will be responsible for injury prevention, recognition, management, and rehabilitation for athletes affiliated with their particular sport(s). The experience is provided to allow students to develop specific technical skills and knowledge through direct application of services to the athletes.

The general outline of this experience is defined to some extent by the requirements set by the NATA, yet is designed according to the unique opportunities available at the University of North Carolina and the surrounding area. The variety of settings available to students should provide for a diversified experience over the duration of their education, and prepare students for jobs in settings they will most likely be seeking following graduation.

Clinical Coordinators

Darin Padua, PhD, ATC, LAT
Meredith Petschauer, PhD, ATC, LAT

Description of Clinical Settings

The University of North Carolina at Chapel Hill currently fields 28 varsity sports teams which operate out of three training rooms. The training rooms are staffed by nine full-time certified athletic trainers, two of whom also have some responsibilities in the Student Health Service’s Physical Therapy Clinic. Each of these athletic trainers is responsible for approximately two teams. Additionally, several faculty and graduate students from the Department of Exercise and Sport Science, work as certified athletic trainers. All UNC certified athletic trainers serve as approved clinical instructors. In addition to the staff athletic trainers, 1 or 2 graduate assistant athletic trainers enrolled in the NATA accredited Graduate Program in Athletic Training are assigned to each team. These graduate assistants also play an active role in the education and supervision of the undergraduate athletic training students.

The program’s remaining clinical sites are at various settings throughout the Triangle area. The clinical supervisors at these sites are all certified athletic trainers and approved clinical instructors.

Statement

All student athletic trainers must complete a minimum of 1000 clock hours of clinical experience under the direct supervision of approved clinical instructors located in the various clinical sites. These 1000 hours must be accrued over the student’s five semesters in the program. Students will likely complete 1000+ hours over five semesters.
The clinical experience will include both athletic practices and competitive events. Some of the practical experience (no more than 275 hours towards the 1000) may extend beyond the traditional setting, into a sports medicine/physical therapy clinic or research laboratory setting that is supervised by a certified athletic trainer.

Each student will rotate through several types of clinical settings including equipment intensive sports, upper and lower extremity sports, male and female teams and general medicine exposure.

**Contractual Agreement**

Once students begin their clinical rotations, they are required to sign a contractual agreement (see form), for each clinical assignment, outlining specific responsibilities which will have been agreed upon by both student and supervisor. This contract emphasizes the student’s commitment to the clinical experience.

**Enrollment and Grading**

Students who have been accepted into the program will be assigned to a clinical site. During the last four semesters students will register for the Clinical Experience course (EXSS 271). The grade for this class is dedicated to their performance in the clinical setting. Part of the student’s grade will reflect his/her performance during the clinical experience as assessed through a standard Clinical Evaluation Form (see form). A formal evaluation will be conducted at mid semester and at semester’s end. The evaluation will be completed by the approved clinical instructor and discussed in depth with the student so that the student may be aware of his/her strengths and weaknesses. Any breach of the contractual agreement will be documented on the evaluation form. The remaining portion of the grade will be determined based on performance during the signature assignments.

**Clinical Assignments and Rotations**

Assignments for the students are ultimately made by the clinical site coordinator following consultation with the other approved clinical instructors. Every effort is made to offer students a variety of experiences (university, high school, clinic, research settings) during their five semesters.

At approximately mid-semester of every spring, students in the program are asked to rank their preference for clinical sites for the next school year. Prior to semester’s end (approximately April 20th), letters of assignment are delivered and students are instructed to meet with their approved clinical supervisor before leaving for summer break. At this time, students are assigned a reporting date by their clinical instructor. **In most cases students are required to begin their clinical experience several days prior to the start of school (be prepared to begin as early as August 10th). Note: vacations, summer jobs, sorority/fraternity functions, etc. are not acceptable excuses.** Students will remain at their clinical site for one semester, with all responsibilities terminating on the day prior to Reading Day. These students will then be responsible for meeting with their clinical instructor for the spring semester before leaving for break. **Again, students may**
be asked to return to their new sites prior to the start of school (January 3rd). This rotation will also last one semester, with responsibilities terminating on the day prior to Reading Day. Additional supervised hours may be accrued following completion of final examinations if both student and clinical instructor agree.

Those students assigned to winter sports (basketball, wrestling, gymnastics, and swimming) will be assigned to one of the athletic training rooms during the first one-third of the fall semester and the last one-third of the spring semester (or whenever their team is not in season).

Clinical Progressions

The program director and the clinical site coordinator will make assignments based on the need of each student enrolled in the program. Needs are based on the following criteria (prioritized):

1. Adequate balance of upper extremity, lower extremity and equipment intensive sports, as well as a rotation through general medicine.
2. Adequate balance of types of settings, whereby the student will spend at least one semester in each of the three types of settings: UNC in season sport, UNC out of season sport, and off campus setting (high school or clinic).
3. Adequate balance of men’s and women’s sports.
4. Variety of clinical instructors, whereby the student will have at least 3 different clinical instructors during his/her last 4 semesters.
5. Future direction of the student, whereby the student will be assigned (if possible) to a clinical site that best represents the setting for which they may seek employment following graduation.

Student Summary of Clinical Experience

Students will be asked to submit a summary (see form) of their clinical experience at the conclusion of every semester. This summary will help the program director and clinical site coordinator critique the various clinical settings to ensure that students receive what they believe to be a quality experience. Furthermore, the summary will help to validate the program’s goals and mission statement.

Students will also submit and evaluation of their approved clinical instructor. This evaluation will serve to enhance the experience of future students by giving the program director and clinical site coordinator an idea of the performance of the approved clinical instructors.
University of North Carolina  
Student Athletic Trainer  
Contractual Agreement

I accept the position of student athletic trainer on the __________________________ athletic training staff for the ________________ semester 20______. I have discussed my roles and responsibilities with my clinical supervisor: _________________________.

My direct responsibilities include:

I have read the UNC-CH Undergraduate Athletic Training Program’s mission statement & athletic training educational objectives. I agree to complete a minimum of 200 supervised hours in this clinical setting during the semester listed above. In so doing, I will fulfill my duties to the best of my ability.

I accept this contract with the understanding that I am representing the University of North Carolina’s Undergraduate Athletic Training Program at all times. In accepting the terms of this contractual agreement, I understand that being a student athletic trainer is a commitment which is preparing me to be a certified athletic trainer. I understand that I will be closely supervised and my progress will be evaluated according to the criteria in the Academic and Clinical Policies section of the Athletic Training Handbook. I furthermore understand that my evaluation will become part of my personal records and my performance will partially determine my continuance in the program.

In addition to my duties described above, I have reviewed the emergency action plan with my supervisor and feel comfortable with my duties in an emergency situation.

Student’s Name: _________________________________  
(Print)

Student’s Signature: _______________________________ Date: __________

Clinical Supervisor’s Signature: ___________________________ Date: ________

Clinical Site Coordinator’s Signature: __________________________ Date: ________

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UNIVERSITY OF NORTH CAROLINA
ATHLETIC TRAINING STUDENT
EVALUATION FORM

Student Name ___________________________________ Date __________________

Clinical Supervisor ____________________________ Site __________________

Evaluation Scale: Strongly Agree -5; Agree -4; Undecided -3; Disagree -2; Strongly Disagree -1

I. Administration/Professionalism

_______ Is punctual and dependable
_______ Is appropriately dressed
_______ Demonstrates professionalism with athletes
_______ Demonstrates professionalism with coaches and other athletic trainers
_______ Adheres to training room procedures
_______ Maintains confidentiality
_______ Maintains a balance between personal and professional relationships
_______ Assists in preparation for games and practices
_______ Works Cooperatively with other student athletic trainers
_______ Demonstrates emotional maturity effective coping skills
_______ Demonstrates overall awareness during games and practices
_______ Understands and demonstrates knowledge of event management

II. Methods for improving skills

_______ Is willing to receive and respond to constructive criticism
_______ Is eager to learn and ask questions
_______ Is willing to supervise and instruct other athletic training students
_______ Takes an active role in learning
_______ Accepts responsibility
_______ Conveys respect for clinical instructor’s opinion
_______ Conveys respect for other student athletic trainer’s opinion

III. Communication skills

_______ Speaks with tact and diplomacy
_______ Communicates in an organized logical manner
_______ Recognizes the effects of non-verbal communication
_______ Exhibits confidence with skills and knowledge
_______ Communicates daily with the supervising clinical instructor

Rating Scale Definitions

4 - Student confers with the clinical instructor when appropriate for validating decision making. The student is able to perform this skill safely and independently.

3 - Student needs advice from the clinical instructor, but the presence of the clinical instructor in the immediate vicinity is not necessary. Student needs guidance from the clinical instructor.
2 - Student requires supervision from the clinical instructor. Student needs verbal cueing or physical assistance from the clinical instructor.

1 - Student requires constant supervision from the clinical instructor and cannot accomplish the task without the instructor.

N/A - Not applicable

N/O - Not observed

IV. Administration Skills

_______ Demonstrates accurate and up to date record keeping
_______ Maintains accurate and up to date SOAP notes
_______ Maintains an appropriately stocked kit
_______ Appropriately keep the training room stocked and clean
_______ Uses the appropriate medical terminology
_______ Writes legibly and uses the correct format
_______ Applies knowledge from the classroom to the clinical setting

V. Evaluation Skills

_______ Obtains a pertinent history
_______ Clearly observes the area and identifies problems
_______ Correctly palpates the area recognizes specific areas of tenderness
_______ Correctly evaluates active range of motion
_______ Correctly evaluates passive range of motion
_______ Performs special tests with confidence and understanding
_______ Correctly evaluates and grades strength
_______ Properly evaluates functional ability when appropriate
_______ Accurately determines the results of the evaluation
_______ Recognizes the difference between on field evaluations and clinical evaluations
_______ Complies with the emergency action plan when necessary

VI. Treatment

_______ Demonstrates appropriate emergency first aid skills
_______ Complies with OSHA guidelines
_______ Applies taping and bracing effectively
_______ Properly fits crutches
_______ Demonstrates the ability for proper wound management
_______ Demonstrates the use of prevention measures such as stretching and hydration
_______ Sets goals for the athlete and recognizes the goals of the athlete
_______ Provides safe and effective initial injury management
_______ Implements an effective well thought out rehabilitation program
_______ Incorporates the proper use of modalities
_______ Reassess the athlete’s needs
_______ Continues to adapt to the needs of the athlete
_______ Educates the athlete
_______ Provides a high quality of care

VII. Please list strengths of this student.
VIII. Please list weaknesses of this student.

IX. Please indicate ways that this student can improve.

This is to acknowledge that I have seen and discussed its contents with the evaluator.

Student’s
Signature _____________________________ Date ________________

Clinical Instructor’s
Signature _____________________________ Date ________________
University of North Carolina
Undergraduate Athletic Training Education Program
Clinical Experience Summary

Name: __________________________________________  Semester:____________________

Clinical Site: ____________________________  Supervisor: ____________________________

Brief description of your duties/responsibilities as outlined in your contractual agreement:
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

Using a 5-point scale, please indicate your perception of having received an adequate clinical
experience in the following areas:

1 = Strongly Disagree (SD)  4 = Agree (A)
2 = Disagree (D)   5 = Strongly Agree (SA)
3 = Undecided (U)

SD D U A SA

1. Prevention of athletic injuries/illnesses
   1 2 3 4 5

2. Evaluation of athletic injuries/illnesses
   1 2 3 4 5

3. First aid and emergency care
   1 2 3 4 5

4. Rehabilitation/reconditioning
   1 2 3 4 5

5. Therapeutic modalities
   1 2 3 4 5

6. Organization/administration of athletic training
   1 2 3 4 5

7. Counseling and guidance of athletes
   1 2 3 4 5

8. Received quality interaction/feedback from clinical
   supervisor at regular intervals
   1 2 3 4 5

9. Adequate responsibilities were given to you
   1 2 3 4 5

10. Time commitment was about what you expected
    1 2 3 4 5

Overall, what part of your clinical experience was most rewarding to you as an athletic training
student?
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

©UNC-CH Undergraduate Athletic Training Education Program 2002
What suggestions for improving, revising, or refining the clinical experience could you offer?
University of North Carolina  
Athletic Training Student Evaluation  
of their Approved Clinical Instructor

Please evaluate your clinical instructor by answering the questions below. Please be honest and truthful. All information will remain confidential. Please use the space provided to explain any responses below a “2”.

Using a 5-point scale, please indicate your perception of having received an adequate clinical experience in the following areas:

1 = Strongly Disagree (SD)  
2 = Disagree (D)  
3 = Undecided (U)  
4 = Agree (A)  
5 = Strongly Agree (SA)

<table>
<thead>
<tr>
<th>Teaching:</th>
<th>SD</th>
<th>D</th>
<th>U</th>
<th>A</th>
<th>SA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Discussed site policies and procedures with me</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. Involved me in the evaluation of injured athletes</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. Discussed proper rehabilitation techniques</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>4. Explained the rationale for treatment and rehab</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. Discussed the use of therapeutic modalities</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. Provided prompt and appropriate feedback</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>7. Provided a stimulating &amp; challenging work environment</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>8. Willing to share knowledge and resources</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>9. Is a role model</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>10. Open to new ideas and concepts</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<thead>
<tr>
<th>Professionalism:</th>
<th>SD</th>
<th>D</th>
<th>U</th>
<th>A</th>
<th>SA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Demonstrates patience and tactfulness</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. Show self-confidence</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. Demonstrates punctuality and reliability</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4. Can delegate responsibility, when necessary</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. Maintain a professional appearance</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. Respects SAT’s and athletes</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>7. Promotes high professional standards</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>8. Maintains proper ethics</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
9. Overall rating of professionalism  

<table>
<thead>
<tr>
<th>Communication:</th>
<th>SD</th>
<th>D</th>
<th>U</th>
<th>A</th>
<th>SA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Demonstrates rapport with medical staff</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. Demonstrates rapport with coaches</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. Is accessible for discussion</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4. Is in verbal or physical contact with me at all times</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. Provides constructive feedback at appropriate times</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Comments:

Please discuss the strengths of your clinical instructor.

Please discuss the weaknesses of your clinical instructor.

Name of Clinical Site __________________________________________

Name of Clinical Instructor ____________________________________
RETURN TO MEREDITH PETSCHAUER’S MAIL BOX
Undergraduate Athletic Training Clinical Assignment

Name: ____________________________ School Phone: _______________________
Class Year: ________________ School Phone: _______________________
Email: __________________________
School Address (Fall if known):

Summer Address (This form will not be accepted without a summer address and phone number):

Total number of hours (team and/or clinic) completed: ___________________
Number of hours earned with a team at UNC: ________________ Other site: ________________

Team / # Hours:
________________________________  _________________
________________________________  _________________
________________________________  _________________
________________________________  _________________

Rank order your choices:

Fall:
on campus sites:
1. ____________________________
2. ____________________________
3. ____________________________
off campus sites:
1. ____________________________
2. ____________________________
3. ____________________________

Spring:
on campus sites:
1. ____________________________
2. ____________________________
3. ____________________________
off campus sites:
1. ____________________________
2. ____________________________
3. ____________________________
UNC - Athletic Training Student Guidelines

1. The athletic training student will report promptly when scheduled. This includes treatments, practices, games, meetings, inservices, and any other activity deemed essential by the administrative athletic training staff.

2. The athletic training student will dress in the appropriate attire when representing the athletic training program (see dress code). Professional appearance is expected at all times.

3. The athletic training student is responsible for assisting in the maintenance of the athletic training facility whether on or off duty. It is extremely important the athletic training facilities are maintained to provide a professional atmosphere and to decrease the risk of infection and spread of disease.

4. The athletic training student will be held accountable and responsible for their actions whether on or off duty. As a representative of the athletic training education program and the University of North Carolina, it is imperative that a positive and professional attitude be maintained at all times.

5. The athletic training student is expected to maintain the academic standards required of student athletes. Additional standards are required of students pursuing the athletic training specialization (see the requirements of the athletic training program).

6. The athletic training student is expected to arrange their academic schedules as to allow reasonable scheduling in the athletic training facility.

7. The athletic training student will place professional responsibility and their educational pursuit as an athletic trainer as a priority.

8. The athletic training student will schedule any part time jobs or extra curricular activities secondary to their athletic training responsibilities.

9. The athletic training student is expected to be attentive to the safety of all athletes with whom they come in contact. The athletic training student must be aware of any treatments, rehabilitation, or other activities occurring in or out of the athletic training facility and must know the proper emergency protocols.

10. The athletic training student must recognize their personal and professional limitations. It is the responsibility of the student to improve upon and strive to gain the necessary knowledge to become the best athletic trainer they can be.

11. The athletic training student should accept personal praise and criticism with a professional attitude. Discuss any disagreements with the proper administrator immediately.

12. The athletic training student will be exposed to a variety of athletic injury experiences. This is done to provide the student with a comprehensive background in athletic injuries and facilities. The student must accept these assignments as a necessary entity in their development as an athletic trainer.

13. The athletic training student will not discuss any injury or other information that is deemed confidential, with anyone not associated with the athletic training staff. It is the professional and
ethical duty of the student athletic trainer to uphold the confidentiality of the athletic training department and those who seek its services.

14. The athletic training student will maintain up to date CPR and First Aid certification. It is the student’s responsibility to update these or any other certifications that are deemed essential by the administrative athletic training staff.

15. The reputation of the athletic training student is based on respect, responsibility, and maturity. Student athletic trainers should be professional in their work habits and in their relationships with those involved in the intercollegiate athletic programs. It is expected that friendships developed will never interfere with the objectivity needed in this profession.

**Athletic Training Room Rules**

- This is a medical facility and should be treated as such
- Sign in for treatment **ALWAYS**
- No shirt, no shoes, no service
- No cleats or spikes
- No food or drink
- No shoes on the treatment tables
- No towels are to be taken from the athletic training room
- This is not a lounge
- Phone use by permission only
- Athletes are not allowed to treat themselves; an athletic trainer or student athletic trainer must set up the modality equipment and then supervise the treatments.
- Athletic training room is to be kept neat and clean at all times
Athletic Training Room Daily Duties

It is the duty of everyone working in the training room to keep the athletic training room clean. Please remember that it is a medical facility and that open wounds are being treated; therefore all surfaces that an athlete’s skin may contact should be clean. Everyone will help the training room work. **The most valuable student is one who can see work without being told.** The following is a list of duties that the undergraduate student athletic trainer should be performed daily:

**Treatment area:**
1. Clear off the tape counter, wipe down with cleaner and then alcohol, and replace items.
2. Restock tape and supplies on and underneath the counter.
3. Wash all tables with alcohol after each use.
4. Refill ultrasound gel and water containers for the ES/US units.
5. Empty ice bags that are in the sink and dispose of them.
6. Clean ES/US units and untangle the wires and pads. Place them neatly near their respective units.
7. Check the water level in the hydrocollator machine. Make sure that if you are going to fill it that all of the pads are in place as to avoid overflow.
8. Hang hydrocollator covers to dry and those that are dry can be returned to the table. Do not throw them in the laundry unless instructed to do so by a staff athletic trainer.
9. Throw dirty and or wet towels in the laundry bin. Restock clean towels on the table outside the whirlpool room.
10. When the dirty towel bin becomes full remove the bag and place it in the front exam room. Replace the bag with a new one.
11. Roll clean elastic wraps and place them in the drawer.
12. Prepare heel and lace pads.
13. Wipe down the hydrocollator, whirlpools, and ice machine.

**Rehabilitation Area:**
1. Wipe all tables and equipment with alcohol.
2. Take weights off the machines and stack on the appropriate racks.
3. Wipe exercise bikes with alcohol after each use.
4. Vaccum the carpet.

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**Dress Code for Athletic Training Students**

You are expected to dress professionally when you are in the training room. All clothing should be neat and clean.

**Observers:**
- Khaki Pants/Shorts (Colors: Blue or Khaki)
- Wind Pants – Blue Only
- Carolina Blue Observer Shirt ** Must be tucked in**
- Name Tags
- No Hats
- Proper Shoe Wear (Tennis shoes; no open toe shoes/sandals)

**Students in the program:**
- Khaki Pants/Shorts (Colors: Blue or Khaki)
- Wind Pants – Blue Only
- Sports Medicine Shirt (Collar or T-shirt) ** Must be tucked in**
- No Hats
- Proper Shoe Wear (Tennis shoes; no open toe shoes/sandals)

**Recording Hours**

As part of the athletic training education program you are required to record the number of hours and type of clinical experience. Hours sheets are in a notebook located in Fetzer Training Room. Your hours should be recorded in the following manner:

1. Please complete the sheet daily and have it signed by the staff or graduate athletic trainer supervising you that day. Please keep the sheet in alphabetical order in the notebook.

2. If you are at a clinical site other than the Fetzer Training Room, please use the same form. You may record your hours on a daily or weekly basis, whichever is most convenient for you and the clinical instructor.

3. At the end of the semester you will be asked to turn in the hour forms. These forms will be copied and kept in a file and then the originals will be returned to you.

4. If you need additional forms you can obtain them through Kevin or Meredith or make a copy of the form found in this manual.
Name: ____________________________________

<table>
<thead>
<tr>
<th>DATE</th>
<th>ACTIVITY</th>
<th>SITE</th>
<th>HOURS</th>
<th>INITIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

Signature of Certified Member _____________________________  TOTAL: ______
Certification Number _____________________________  Date _________________________

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## University of North Carolina
### Undergraduate Athletic Training

#### Hours Tally Sheet

<table>
<thead>
<tr>
<th>Type</th>
<th># Hours</th>
<th>% Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>current sem. / cumulative</td>
<td>current sem. / cumulative</td>
</tr>
<tr>
<td>Upper Ext.</td>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>Lower Ext.</td>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>General Med.</td>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>Equipment Int.</td>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>Other</td>
<td>__________</td>
<td>__________</td>
</tr>
</tbody>
</table>

**TOTAL HRS:** __________ __________

<table>
<thead>
<tr>
<th>Type</th>
<th># Hours</th>
<th>% Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>current sem. / cumulative</td>
<td>current sem. / cumulative</td>
</tr>
<tr>
<td>High School</td>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>UNC (in season)</td>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>UNC (off season)</td>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>Clinic</td>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>Other</td>
<td>__________</td>
<td>__________</td>
</tr>
</tbody>
</table>

**TOTAL HRS:** __________ __________

<table>
<thead>
<tr>
<th>Type</th>
<th># Hours</th>
<th>% Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>current sem. / cumulative</td>
<td>current sem. / cumulative</td>
</tr>
<tr>
<td>Mens</td>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>Womens</td>
<td>__________</td>
<td>__________</td>
</tr>
</tbody>
</table>

**TOTAL HRS:** __________ __________
Record Keeping

It is very important that the proper documentation is maintained on everyone who enters the training room. It is part of your responsibility to help with that documentation.

1. Everyone is to sign in at the front desk before any treatment begins.

2. If a non-athlete comes into the training room it is your responsibility to have them complete the personal data on the Athletic Injury Report Form. Once you have started a form on someone they are your responsibility until they leave the training room. Do not disappear once another athletic trainer begins to evaluate the individual. It is in your best interest to watch and learn from the supervising athletic trainer. (see injury protocol Non-athlete)

3. If an athlete comes in they will either be in for treatment or a new evaluation. If this is a new injury then the top of the Student Health Service form needs to be completed. An athlete’s injury will be recorded in the SOAP note format (see SOAP notes).

4. If they are just in for treatment make sure you check with the athlete’s graduate athletic trainer or staff athletic trainer before setting them up with treatment and/or rehabilitation unless you have been working with this athlete and know what they are supposed to receive (see injury protocol Athlete). Additionally, they should have a card in the file describing the treatment they are to receive. Athletes will not be treated without a card on file.

SOAP NOTES

Record keeping is an extremely important aspect of athletic injury management. A common method of record keeping is the SOAP note. SOAP is an acronym for the following:

**S** Subjective: Statements made by the athlete such as the current/chief complaint, history of the injury including previous injury to that body part, description of the injury, the mechanism of injury, functional impairment caused by the injury, pain, discomfort, neurological symptoms, and anything that was performed previous to your examination.

**O** Objective: The athletic trainer’s visual observations, including deformity, ecchymosis, skin color and texture, gait, and posture. This also includes that athletic trainer’s hands on evaluation including; palpation, sensory and nervous system testing, range of motion testing, special joint stability tests, strength testing, and functional testing.

**A** Assessment: This includes the athletic trainer’s impression of the injury. It should include the severity of the injury, the type of injury, and the body part involved.

**P** Plan: This is the formulation of a plan for immediate treatment and future plans and an indication of a referral if necessary. Also included should be any short and long term goals set for the athlete.
INJURY MANAGEMENT PROTOCOL FOR NON-ATHLETES

Injured Non-Athlete Enters Athletic Training Room

Administer Appropriate First Aid

Fill Out Injury Report Form

Loan Crutches and Ace Wraps
(Fill Out Loan Agreement and File)

Refer To Student Health Services or Central Nurses Station for Physician Evaluation
(See Referral Protocol)

Non-Athlete Is Referred To Physical Therapy/Athletic Training Clinic For Rehabilitation

Write An Initial SOAP Note

Apply Ankle Wraps, Braces, Knee Supports, etc.
(Charges Are Automatically Billed to Student’s Account)

Update Progress Notes On Subsequent Visits
INJURY MANAGEMENT PROTOCOL FOR ATHLETES

Injured Athlete Enters Athletic Training Room

Administer Appropriate First Aid

Enter Information Into Injury Manager 2000

Refer To Sports Medicine Physician For Evaluation, X-ray, etc. If Necessary (See Referral Protocol)

Treat in Athletic Training Room

Apply Tape, Splints, Pads, Ace Wraps, Knee Supports, etc.

Loan Crutches, TENS units, etc.

Fill Out Loan Agreement Slip

Athlete Returns For Rehabilitation

Write An Initial SOAP Note

Update Progress Notes On Subsequent Visits

Update Injury Manager On A Daily Basis
Emergency Situations

If an emergency situation arises determine if it is life threatening or not.

1. If the emergency is life threatening such as heat stroke, cardiac arrest, extensive bleeding, etc. the athlete should be routed directly to UNC hospitals emergency room via the South Orange Rescue Squad (dial 911) on campus or when using the cellular phone call 929-2121.

2. If the emergency is not life threatening and you are without a graduate athletic trainer or staff athletic trainer you need to call one of them and they will instruct you as to what to do. The phone numbers are listed below.

3. There are different emergency procedures at each clinical site and it is your responsibility to find out from your approved clinical instructor what the emergency plan is for the facility in which you are currently working.

Staff Athletic Trainer Pager/Cell Phone Numbers

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marc Davis</td>
<td>428-3671</td>
</tr>
<tr>
<td>Lindsay Distefano</td>
<td>824-4641</td>
</tr>
<tr>
<td>Nicole Fava</td>
<td>428-3574</td>
</tr>
<tr>
<td>Kevin Guskiewicz</td>
<td>306-5843</td>
</tr>
<tr>
<td>Doug Halverson</td>
<td>428-3670</td>
</tr>
<tr>
<td>Chris Hirth</td>
<td>619-3802</td>
</tr>
<tr>
<td>Dan Hooker</td>
<td>216-1922</td>
</tr>
<tr>
<td>Kevin King</td>
<td>428-3668</td>
</tr>
<tr>
<td>Sally Mays</td>
<td>291-5264</td>
</tr>
<tr>
<td>Scott Oliaro</td>
<td>428-3582</td>
</tr>
<tr>
<td>Darin Padua</td>
<td>451-7236</td>
</tr>
<tr>
<td>Meredith Petschauer</td>
<td>602-5635</td>
</tr>
<tr>
<td>Terri Jo Rucinski</td>
<td>428-3667</td>
</tr>
<tr>
<td>Scott Trulock</td>
<td>428-0597</td>
</tr>
<tr>
<td>Nina Walker</td>
<td>428-3584</td>
</tr>
</tbody>
</table>
NATIONAL ATHLETIC TRAINERS’ ASSOCIATION

We, the willing
led by the unknowing
are doing the impossible
for the ungrateful.

We have now done so much
for so long
with so little

We are now qualified
to do everything
with nothing.
History of the National Athletic Trainers’ Association

The National Athletic Trainers’ Association was organized in Kansas City, Missouri in 1950. The initial meeting was attended by 101 athletic trainers whose concerns were the physical welfare of athletes at colleges, universities, and other institutions.

At the June 1969 meeting of the NATA in Cincinnati, Ohio the subcommittee on certification by examination presented to the Board of Directors a procedure for certification. The first NATA certification examination was held on December 31, 1969. Ten years later in June 1979, approximately 1,560 candidates had successfully completed the examination.

Currently, over 22,000 individuals are certified athletic trainers, and membership in the NATA exceeds 30,000 people, including 5,000 students involved in accredited athletic training education programs. NATA members include certified athletic trainers, students pursuing an athletic training career, sports medicine physicians, and others whose business or profession is related to sports medicine and athletic training.
National Athletic Trainers’ Association
Ethical Principles

NATA Code of Ethics

Preamble

The Code of Ethics of the National Athletic Trainers' Association has been written to make the membership aware of the principles of ethical behavior that should be followed in the practice of athletic training. The primary goal of the Code is the assurance of high quality health care. The Code presents aspirational standards of behavior that all members should strive to achieve.

The principles cannot be expected to cover all specific situations that may be encountered by the practicing athletic trainer, but should be considered representative of the spirit with which athletic trainers should make decisions. The principles are written generally and the circumstances of a situation will determine the interpretation and application of a given principle and of the Code as a whole. Whenever there is a conflict between the Code and legality, the laws prevail. The guidelines set forth in this Code are subject to continual review and revision as the athletic training profession develops and changes.

PRINCIPLE 1:

Members shall respect the rights, welfare and dignity of all individuals.

1.1 Members shall not discriminate against any legally protected class.

1.2 Members shall be committed to providing competent care consistent with both the requirements and the limitations of their profession.

1.3 Members shall preserve the confidentiality of privileged information and shall not release such information to a third party not involved in the patient's care unless the person consents to such release or release is permitted or required by law.

PRINCIPLE 2:

Members shall comply with the laws and regulations governing the practice of athletic training.

2.1 Members shall comply with applicable local, state, and federal laws and institutional guidelines.

2.2 Members shall be familiar with and adhere to all National Athletic Trainers' Association guidelines and ethical standards.

2.3 Members are encouraged to report illegal or unethical practice pertaining to athletic training to the appropriate person or authority.
2.4 Members shall avoid substance abuse and, when necessary, seek rehabilitation for chemical dependency.

**PRINCIPLE 3:**

Members shall accept responsibility for the exercise of sound judgment.

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

3.2 Members shall provide only those services for which they are qualified via education and/or experience and by pertinent legal regulatory process.

3.3 Members shall provide services, make referrals, and seek compensation only for those services that are necessary.

**PRINCIPLE 4:**

Members shall maintain and promote high standards in the provision of services.

4.1 Members shall recognize the need for continuing education and participate in various types of educational activities that enhance their skills and knowledge.

4.2 Members who have the responsibility for employing and evaluating the performance of other staff members shall fulfill such responsibility in a fair, considerate, and equitable manner, on the basis of clearly enunciated criteria.

4.3 Members who have the responsibility for evaluating the performance of employees, supervisees, or students, are encouraged to share evaluations with them and allow them the opportunity to respond to those evaluations.

4.4 Members shall educate those whom they supervise in the practice of athletic training with regard to the Code of Ethics and encourage their adherence to it.

4.5 Whenever possible, members are encouraged to participate and support others in the conduct and communication of research and educational activities that may contribute knowledge for improved patient care, patient or student education, and the growth of athletic training as a profession.

4.6 When members are researchers or educators, they are responsible for maintaining and promoting ethical conduct in research and educational activities.

**PRINCIPLE 5:**

Members shall not engage in any form of conduct that constitutes a conflict of interest or that adversely reflects on the profession.
5.1 The private conduct of the member is a personal matter to the same degree as is any other person's except when such conduct compromises the fulfillment of professional responsibilities.

5.2 Members of the National Athletic Trainers' Association and others serving on the Association's committees or acting as consultants shall not use, directly or by implication, the Association's name or logo or their affiliation with the Association in the endorsement of products or services.

5.3 Members shall not place financial gain above the welfare of the patient being treated and shall not participate in any arrangement that exploits the patient.

5.4 Members may seek remuneration for their services that is commensurate with their services and in compliance with applicable law.

**How do I become a Member of the NATA?**

**Membership Policies**

For information about the National Athletic Trainers’ Association and the process for becoming a member please visit the NATA web site [www.nata.org](http://www.nata.org). This site also contains information about accredited programs and the athletic training profession.
Student Athletic Trainers’ Association

The Student Athletic Trainers’ Association (SATA) is an organization comprised of and managed by student athletic trainers and observers. The purpose of SATA is to improve and enhance the learning of the student athletic trainers and aid them in attaining their goals academically, clinically, and professionally. The SATA began in 1995 and is continuing to grow in members and in its role in the undergraduate athletic training program. All of the members of SATA are students interested in or participating in UNC's Athletic Training Program. To become a member, students fill out an application and pay a $10 due for the school year. SATA meetings are held monthly and they contain both educational material and club business. Speakers at the meetings are usually grad students (Masters and Ph.D.), department professors, staff athletic trainers, or coaches. They speak on subjects such as choosing graduate schools, preparing for the NATA exam, and coach-athletic trainer relationships. We also participate in the education of high school students by holding an athletic training seminar each year. This is one of many fundraisers that the club participates in to help raise money. The money goes toward paying for gas for students who work at high schools, and registration and travel money for students who attend the national, regional, or state athletic trainers conventions. For more information on the SATA, visit our web site at http://www.unc.edu/student/orgs/sata/first.html.
Student Athletic Trainers’ Association
Membership Application

Name _________________________________

Email address _____________________________

Local Address ____________________________    Permanent Address __________________________

__________________________    __________________________

__________________________    __________________________

__________________________    __________________________

Phone: ____________________   Phone: ____________________

Academic Year: Fresh Soph Jr Sr

Major: ____________________   cGPA: ____________________

Professional Goals: ____________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

What do you expect from SATA: _________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Dues : Fall ($5.00) ________    Spring ($5.00) _________

I understand and verify that I meet the requirements for membership in the Student Athletic Trainers’ Association (SATA). It is my intention to advance the interests and ideas of the SATA to the best of my ability. I agree to abide by the Constitution of the SATA.

Signature _____________________________ Date _________________

Everyone is welcome to join the SATA, however, a 2.5 cGPA is required to be a voting member.
BLOOD BORNE PATHOGENS: EXPOSURE CONTROL PLAN

Every year each student must visit the UNC-CH health and Safety Web site to update his/her bloodborne pathogens training. Follow these procedures to update the training:

- Go to the web site http://ehs.unc.edu
- Click on Training
- Click on Self Study Units
- Click on Bloodborne Pathogens
- When you are finished reading the material you need to take the post test.
- When you have finished the post test print it out and turn it into Meredith Petschauer. (DO NOT SUBMIT IT TO HEALTH AND SAFETY)

Students are encouraged to obtain the Hepatitis B Vaccine. If you have been vaccinated you must submit your immunization record to Meredith Petschauer. If you choose not to be vaccinated you must fill out a declination form and submit it instead of the immunization record.

If you have any questions or have an incidence of exposure it must be reported to your approved clinical instructor and Meredith Petschauer immediately.

The exposure control plan for the university can be found at http://ehs.unc.edu.