



**As Gamecocks, our success has No Limits.**

# Advanced Athletic Training Program

## Contact Information

**Dr. Toni Torres-McGehee, PhD, SCAT, ATC**

**Program Director and Associate Professor**

**E-Mail: [ATGRAD@mailbox.sc.edu](mailto:ATGRAD@mailbox.sc.edu)**

**Phone: 803.777.0636**



**South Carolina**

# Table of Contents

<b>Introduction to Post-Professional Athletic Training</b> .....	<b>5</b>
Athletic Training Profession.....	5
Post-Professional Preparation.....	5
BOC Certification.....	5
<b>UofSC Athletic Training Faculty Directory</b> .....	<b>6</b>
<b>University Mission</b> .....	<b>7</b>
Arnold School of Public Health Mission.....	7
Athletic Training Vision and Mission.....	8
<b>UofSC Post-Professional Athletic Training Program Description</b> .....	<b>8</b>
<b>Graduate Student Academic Information</b> .....	<b>9</b>
General Information for Master of Science Degrees.....	9
UofSC Admission for the Graduate School.....	9
UofSC Admission Standards.....	9
UofSC Admission Process.....	9
Application Requirements.....	9
Graduate Degree Options in Department of Exercise Science.....	10
Academic Requirements for master's Degrees.....	10
Application for Graduation and Degree Audit.....	12
Academic Regulations.....	13
MS Degree in Advanced Athletic Training Academic Course Work.....	16
MS Degree in Athletic Training Project/Thesis Information.....	17
<b>Clinical Education</b> .....	<b>18</b>
South Carolina State Certification.....	18
Selection for Graduate Clinical Sites.....	18
Graduate Assistant Clinical Assignments.....	18
Options for Clinical Sites.....	18
Graduate Assistantship Package.....	18
Evaluation of Clinical Supervisor and Clinical Site.....	18
Conflict Resolution.....	18
Clinical Hours.....	19
Supervision of UofSC AT Professional Students.....	20
Clinical Education Policies.....	20
Employment during Clinical Assignments.....	20
Mandatory Athletic Training Program Events.....	20
Professional Appearance.....	20
Clinical Experience Attendance Policy.....	21
Clinical Availability and Punctuality.....	22
Benefits for Graduate Assistance.....	22
Time-Off Policy.....	23
Summer Responsibilities.....	23
Preparation Responsibilities for Clinical Outreach.....	24
Clinical Education Rules and Guidelines.....	27

Visiting Teams .....	27
Travel.....	28
Transportation .....	28
Transportation with Athletes .....	28
Graduate Assistant/Intern Clinical Requirements .....	28
Graduate Assistant/Intern Code of Conduct .....	28
Appropriate Behavior.....	28
Graduate Assistant/Intern Relationships.....	28
Professional Communication Policy .....	29
Confidentiality.....	31
Social Media Policy.....	31
Cell Phone Voicemail .....	31
Violations of Code of Conduct (Reprimand).....	32
Grievances .....	32
Probation/Dismissal.....	32
Violations of UofSC AT Code of Conduct.....	33
<b>University of South Carolina Wellness Program: Alcohol, Drugs, and Health.....</b>	<b>34</b>
<b>General Health and Safety Standards.....</b>	<b>41</b>
Student Health Insurance/Student Health Center.....	41
Athletic Training Liability .....	41
Communicable Disease Policy .....	41
Blood Borne Pathogens Exposure Control Plan .....	41
Blood Borne Pathogens.....	42
Hepatitis B Virus (HBV).....	42
HIV (AIDS Virus) .....	42
Comparison of HBV/HIV.....	42
Testing Student-Athletes.....	43
Participation of Student-Athletes with Hepatitis B (HBV) Infection.....	43
Participation of Student Athletes with HIV .....	43
Administrative Issues.....	43
Athletics Health-Care Responsibilities .....	44
<b>Appendix .....</b>	<b>46</b>
NATA Code of Ethics.....	46
Carolinian Creed.....	47
Post-Professional AT Student/Intern Agreement Signature Form.....	48
Acknowledgement of Risk Signature Form .....	49
Appropriate Behavior Policy Signature Form.....	50
Professional Appearance Policy Signature .....	51
Professional Communication Policy Signature Form .....	53
Relationship with Representatives within UofSC AT Clinical Assignments Signature Form .....	55
Social Media Policy Signature Form.....	56
Time-Off Policy Signature Form.....	57
Time-Off Form .....	59

## **INTRODUCTION TO POST-PROFESSIONAL ATHLETIC TRAINING PROGRAM**

The Post-Professional Athletic Training Program at the University of South Carolina is committed to distinguishing itself as a state and national leader in its efforts to address the needs of its student athletes, community, and the athletic training profession.

### **A. The Athletic Training Profession - What is an Athletic Trainer?**

Athletic trainers (ATs) are highly qualified, multi-skilled health care professionals who render service or treatment, under the direction of or in collaboration with a physician, in accordance with their education, training and the state's statutes, rules and regulations. As a part of the health care team, services provided by athletic trainers include primary care, injury and illness prevention, wellness promotion and education, emergent care, examination and clinical diagnosis, therapeutic intervention and rehabilitation of injuries and medical conditions.

- National Athletic Trainers' Association. (2012). [www.nata.org]

### **B. Post-Professional Athletic Training Preparation**

All UofSC Graduate Assistants are required to be certified through the Board of Certification to be enrolled in the Post-Professional AT Program. UofSC's athletic training program requires all graduate students have completed an professional bachelors or master's degree, which covered the clinical competencies for didactic and clinical knowledge from the following subject matter areas: evidence-based practice, clinical examination and diagnosis, therapeutic intervention, healthcare administration, prevention and health promotion, acute care of injury and illness, psychosocial strategies and referral, and professional development and responsibility.

The post-professional athletic training student's professional preparation is directed toward the development of specific educational competencies and clinical proficiencies outlined by the Commission on Accreditation for Athletic Training Education Post Professional programs. Post-professional graduate degree programs and residency programs are designed to prepare athletic trainers for advanced clinical practice, and research and scholarship, in order to enhance the quality of patient care, optimize patient outcomes, and improve patients' health-related quality of life. The athletic trainer's post-professional preparation is based on developing student's knowledge, skills, and abilities, beyond the professional level, as determined by the Commission. Post-Professional athletic training degree programs incorporate core competencies required for advanced clinical practice. The Post-Professional core competencies are:

- Evidence-Based Practice
- Interprofessional Education and Collaborative Practice
- Quality Improvement
- Healthcare Informatics
- Professionalism
- Patient-Centered Care

### **C. BOC Certification**

PLEASE VISIT THE BOARD OF CERTIFICATION WEBSITE AT [www.bocatc.org](http://www.bocatc.org) FOR MORE DETAILED INFORMATION

## I. UofSC ATHLETIC TRAINING PROGRAM FACULTY DIRECTORY

<b>FACULTY</b>	<b>OFFICE</b>	<b>OFFICE PHONE</b>	<b>E-MAIL</b>
<b>Dawn Emerson PhD, SCAT, ATC</b> Clinical Assistant Professor	Blatt 102	803-777-9860	<a href="mailto:mintond@mailbox.sc.edu">mintond@mailbox.sc.edu</a>
<b>Amy Hand PhD, SCAT, ATC</b> Clinical Assistant Professor Professional AT Clinical Education Coordinator	BLATT 101-A	803-777-5257	<a href="mailto:fraleyal@email.sc.edu">fraleyal@email.sc.edu</a>
<b>Jim Mensch PhD, SCAT, ATC</b> Clinical Associate Professor Professional AT Program Director	BLATT 102	803-777-3846	<a href="mailto:jmensch@mailbox.sc.edu">jmensch@mailbox.sc.edu</a>
<b>Toni Torres-McGehee PhD, SCAT, ATC</b> Associate Professor Post-Professional AT Program Director	BLATT 212	803-777-0636	<a href="mailto:torresmc@mailbox.sc.edu">torresmc@mailbox.sc.edu</a>
<b>Zachary Winkelmann PhD, SCAT, ATC</b> Clinical Assistant Professor Post-Professional AT Clinical Education Coordinator	BLATT 213	803-777-4616	<a href="mailto:winkelz@mailbox.sc.edu">winkelz@mailbox.sc.edu</a>
<b>Susan Yeargin PhD, SCAT, ATC</b> Associate Professor AT Research Lab Coordinator	PHRC 226	803-777-3169	<a href="mailto:syeargin@mailbox.sc.edu">syeargin@mailbox.sc.edu</a>
<b><u>AT Program Doctoral Students</u></b>			
<b>Courtney Meyer, MS, SCAT, ATC</b>	PHRC	703-963-3722	<a href="mailto:cmmeyer@email.sc.edu">cmmeyer@email.sc.edu</a>
<b>Kenya Moore MS, SCAT, ATC</b>	Blatt 211	407-416-1545	<a href="mailto:kenyam@email.sc.edu">kenyam@email.sc.edu</a>
<b>Nancy Uriegas MS, SCAT, ATC</b>	Blatt 211	414-828-5000	<a href="mailto:nuriegas@email.sc.edu">nuriegas@email.sc.edu</a>

### III. UNIVERSITY MISSION

#### A. University Of South Carolina's Mission (Approved by Board of Trustees – June 2010)

The primary mission of the University of South Carolina Columbia is the education of the state's citizens through teaching, research, creative activity, and community engagement. Among America's oldest and most comprehensive public universities, UofSC Columbia is the major research institution of the University of South Carolina system and its largest campus, enrolling approximately 21,000 undergraduate students and approximately 8,000 students in graduate and professional programs. At the heart of its mission lies the University's responsibility to state and society to promote the dissemination of knowledge, cultural enrichment, and an enhanced quality of life.

The University serves a diverse population of students with widely varying backgrounds, career goals, and levels of aspiration. UofSC Columbia offers over 320 degrees at the bachelor's, master's, doctoral, and professional program levels, affording students the most comprehensive array of educational programs in the state. Additional opportunities for personal and career development, including an associate degree program at Fort Jackson, are provided to the citizens of South Carolina through outreach and continuing education activities. Through the primary method of classroom and laboratory instruction, and through a secondary method of distance learning delivered via the Internet, teleconference, and electronic media, degree programs are offered in the following areas: arts and sciences; education; engineering and computing; hospitality, retail, and sport management; mass communications and information studies; music; public health; and social work; and in professional programs such as business, law, medicine, nursing, and pharmacy. The depth and breadth of its graduate programs in the arts and sciences, international business, public health, social work, and library and information science distinguishes UofSC Columbia from all other institutions of higher learning in South Carolina.

Recognized by the Carnegie Foundation as a top research and service institution, nationally ranked in start-up businesses, and conferring over 30% of all bachelor's and graduate degrees awarded at public institutions in South Carolina, the University has a profound relevance, reach, and impact on the people of the state. As the flagship institution of the state system, UofSC Columbia leads the way in providing all students with the highest-quality education, including the knowledge, skills, and values necessary for success and responsible citizenship in a complex and changing world through engagement in nationally and internationally ranked research, scholarship, community outreach, and artistic creation.

#### B. Arnold School of Public Health Mission, Vision, and Values

The Arnold School of Public Health is the primary public health research and education resource for the citizens of our state. With particular focus on physical activity, nutrition and cancer prevention, we prepare the next generation of professional practitioners and scholars to serve our communities and impact disease prevention through public health education and intervention.

---

##### **Mission**

The Arnold School of Public Health will improve population health and well-being by fostering innovative education and research that promotes health and healthy environments and will use that knowledge to prevent and effectively respond to disease, disability, and environmental degradation in diverse communities.

##### **Vision**

The Arnold School of Public Health advances discovery and innovation, develops outstanding graduates, and promotes health through collaboration, dissemination and outreach in our local and global communities.

##### **Values**

- **Community**—The Arnold School actively engages and collaborates with community partners in its education, research and public service.

- **Diversity and Inclusion** — The vibrant intellectual environment of the Arnold School embraces respect for diversity and inclusion of all persons.
- **Impact** — Through discovery and dissemination, the Arnold School improves community health, health systems and the environment for populations and individuals worldwide.
- **Integrity** — The Arnold School adheres to the highest standards of honesty, fairness, stewardship, professional responsibility and scholarly ethics.
- **Learning** — Students are the foundation of the school. With its outstanding faculty and staff, the Arnold School provides dynamic educational and experiential opportunities for learners at all levels.
- **Social Justice** — In pursuit of health equity for all populations, the Arnold School seeks to bridge the deep divisions that prevent individuals from attaining complete environmental, physical, mental and social well-being.
- **Translation** — Through scholarship and outreach, the Arnold School supports evidence-based practices and policies and the application of scientific knowledge to improve individual, community and societal health.

### C. Athletic Training Program Vision

The University of South Carolina's Athletic Training programs are two of the largest in the country. From Professional and Post-Professional graduate education to continuing education opportunities, the Athletic Training Programs annually influences hundreds of athletic training students and certified athletic trainers. Through education, community outreach, research, national presentations, and international initiatives the Athletic Training Program reaches populations at the community level as well as on a global stage.

It is the vision of the University of South Carolina's Athletic Training program to distinguishing itself as a leader in the community, at the state level and as a national leader in its efforts to address the needs of its community of lifelong learners, diverse patient populations, community engagements, and the profession of athletic training. The pursuit of excellence in both the academic and clinical education setting is our program's approach for providing students with the knowledge and skills required to enhance their athletic training skills and to successfully contribute to the profession of athletic training. The graduate athletic training program at the University of South Carolina will also provide a coordinated balance of education and clinical exposure.

#### UofSC Post-Professional Athletic Training Program Educational Objectives

Our program is structured around the following:

1. Interdisciplinary approach to sports medicine
  - Expose PPAT Students to a variety of patient populations. All students will have two separate clinical assignments during their graduate program (e.g., UofSC athletics, smaller colleges, high schools, orthopedic office, UofSC campus recreation/club sports, etc.)
2. Enhance Professional Development
  - Advocate for Athletic training Education: Teaching assistant opportunities in both didactic and laboratory classes in the Professional AT program
  - Recognize the role of Athletic Trainers in healthcare
3. Implement and development research (evidence-based practice)
  - Teach students to access, interpret, and integrate relevant research into their clinical decisions (evidence-based medicine)
  - Must complete a **data-based research project** as part of the program
  - Numerous opportunities for involvement in faculty research projects

The Post-Professional Athletic Training program will provide lifelong learners with educational excellence, equity and opportunity in the 21st century on a local, regional, and national level.

1. To provide lifelong learners with the theoretical knowledge and understanding necessary to actively engage in theory, research and practice.
2. To provide an atmosphere that is conducive to quality instruction and clinical experiences.
3. To engage lifelong learners with a variety of experiences that will best develop their clinical skills by partnering with government agencies; educators, schools, and districts; communities; professional organizations; and other institutions of higher education
4. To prepare lifelong learners for diverse career opportunities by remaining responsive to the evolving needs of the communities we serve.
5. To promote, foster, and sustain the highest quality research and evidence-based practice.

### IV. UofSC AT PROGRAM DESCRIPTION

The program is a collaborative effort between the Department of Exercise Science & Athletic Training, University of South Carolina's School of Medicine, and Athletic Department of the University of South Carolina. The two-year program is designed to offer advanced studies and clinical experiences in athletic training to BOC certified athletic trainers, while also providing health care to athletes in the state of South Carolina. Graduate assistants with stipends, out-of-state tuition waivers, and tuition credits are available for qualified students.

The UofSC AT Program provides students with the theoretical knowledge and understanding of the allied health profession of athletic training as well as current procedures and techniques in sport injury management. Students gain this knowledge through required coursework and clinical experiences as they prepare to make successful contributions to the athletic training profession. The program combines formal classroom instruction and clinical experiences to enhance a certified athletic trainer's clinical skills. Students who graduate from the program and will be qualified to be employed as an athletic trainer in a variety of allied health settings, including secondary schools, two- and four-year colleges and universities, professional athletic teams, sports medicine clinics, or in industrial preventative medicine clinics.

## **V. GRADUATE STUDENT ACADEMIC INFORMATION**

### **A. General Information for Master of Science Degrees**

For Master of Arts and Master of Science degrees, the minimum requirement is 30 semester hours of graduate credit, but programs may require additional hours. A thesis or special project is required in most programs. Not more than 9 hours of 799 (thesis preparation) may be used on a master's program of study. The department may require master's students to make up deficiencies or may have additional requirements. At least half of the credit hours on the Program of Study, exclusive of thesis preparation (799), must be earned in courses numbered 700 and above. Master's students must have a completed and approved Master's Program of Study (M-POS) form on file within 12 months of initial enrollment in the program. Students enrolled in a master's degree program have six years from the first term of enrollment in which to complete the degree. Students must be enrolled for at least 1 credit during the term of graduation.

### **B. UofSC Admissions for the Graduate School**

The Graduate School Application is hosted by a third-party vendor, [Collegenet/Applyweb](#). Every applicant must create an account prior to beginning the Graduate School Application. Once an account is created you may use that account to apply to both the Degree Seeking and Non-Degree seeking applications. You do not need to complete your application at one sitting. You may save your work and come back to the application at any time. Other institutions use the Collegenet/Applyweb systems for their application. If you have applied to another institution through the Collegenet/Applyweb system, you can use the same collegenet/applyweb account to apply to The Graduate School.

### **C. UofSC Admission Standards**

For admission to The Graduate School, a baccalaureate or higher degree from a college or university accredited by a regional accrediting agency is required. Applicants' academic records should demonstrate adequate preparation in the field in which graduate work is to be undertaken. Standardized test scores, letters of recommendation, and other materials specified by the individual academic program may also be required. The dean of The Graduate School admits applicants on the recommendation of the department or college concerned after an appraisal of the credentials submitted.

Applicants whose educational preparation is equivalent to that represented by a baccalaureate degree and who have sufficient maturity to undertake advanced study may be admitted after submitting their credentials, including appropriate test scores, for review by the dean of The Graduate School.

**Note:** Individual programs may have special application requirements in addition to those of The Graduate School. These requirements range from personal interviews to statements of purpose and employment histories to auditions and portfolios. Applicants should consult the appropriate college or department to learn what these requirements are. However, all materials must be submitted directly to The Graduate School to ensure that they are included in the applicant's file.

### **D. UofSC Admissions Process**

Graduate students are admitted through a cooperative effort between The Graduate School and the colleges or departments that offer degree programs. When the Graduate School receives your application and supporting documents they are entered into our Student Information System, scanned, and shared through a password protected Web interface with the faculty of the program to which you wish to be admitted. This process is coordinated by a faculty member who serves as the Graduate Director for that program. After reviewing your credentials, the program makes a recommendation to The Graduate School. Your program may inform you that it has recommended your acceptance. Official notice of your admission can come only from The Graduate School.

### **E. Graduate Student Academic Information**

#### **A. UofSC Admissions for the Graduate School**

The Graduate School Application is hosted by a third-party vendor, [Collegenet/Applyweb](#). Every applicant must create an account prior to beginning the Graduate School Application. Once an account is created you may use that account to apply to both the Degree Seeking and Non-Degree seeking applications. You do not need to complete your application at one sitting. You may save your work and come back to the application at any time. Other institutions use the Collegenet/Applyweb systems for their application. If you have applied to another institution through the Collegenet/Applyweb system, you can use the same collegenet/applyweb account to apply to [The Graduate School](#).



## B. UofSC Admissions Process

Graduate students are admitted through a cooperative effort between The Graduate School and the colleges or departments that offer degree programs. When the Graduate School receives your application and supporting documents they are entered into our Student Information System, scanned, and shared through a password protected Web interface with the faculty of the program to which you wish to be admitted. This process is coordinated by a faculty member who serves as the Graduate Director for that program. After reviewing your credentials, the program makes a recommendation to the Graduate School. Your program may inform you that it has recommended your acceptance. Official notice of your admission can come only from the Graduate School.

## C. Application Requirements

- 1. Application:** A completed [application](#) with all requested information and supporting documents supplied.
- 2. Application Fees:** A nonrefundable application fee of \$50 is required of all first-time applicants to the Graduate School and for applicants reapplying after a three-year period of non-enrollment. A Change of Status fee of \$15 is charged when requesting a change in program or degree intent with submission of a Change of Status ([COS](#)) form.
- 3. Transcripts:** Official transcripts showing all college-level course work attempted and the award of the baccalaureate or higher degree by an accredited college or university. Official transcripts verifying all previous college-level course work are required for the University's records. To be considered official, transcripts must be sent directly from the institution to The Graduate School or delivered in a sealed envelope bearing a registrar's stamp. **Please send transcripts to:**  
  
The Graduate School  
1705 College Street  
Close-Hipp Suite 552  
Columbia, SC 29208
- 4. Letters of Recommendation:** Applicants are strongly encouraged to submit at least **three** letters of recommendation through the electronic application process. Please carefully consider the waiver of right to view letters of recommendation because this decision cannot be altered after submission.
- 5. Test Scores:** Most programs require an admissions test such as the GRE, GMAT or MAT. Please consult the of the Graduate Studies Bulletin appropriate program for the test requirements for admission. Applications for the GRE and the GMAT can be obtained from the Educational Testing Service, Box 955, Princeton, NJ 08540 or by visiting the website [www.ets.org](http://www.ets.org). Applicants from western states should contact the Educational Testing Service, 1947 Center Street, Berkeley, CA 94704 or visit the website. **Note:** GRE, GMAT, and MAT test scores are valid for five years.
- 6. International Applicants:** International applicants whose native language is not English are also required to submit a satisfactory score on the TOEFL or the IELTS Intl. Academic Course Type 2 exam. The minimum acceptable score on the TOEFL is 80 Internet-based or 570 paper-based. The minimum acceptable overall band score on the IELTS Intl. Academic Course Type 2 exam is 6.5. Programs may set higher score requirements. See [International Students and Credentials](#) for more information. **Note:** TOEFL and IELTS scores are valid for two years.
- 7. Graduate School Academic Tuition & Fees (2021-2022, these are subject to change for 2022-2023)**

Academic Tuition & Course Fees	Full-Time (9 Credits)	Part-Time Per Credit
Graduate Resident Student	~\$6,867	~\$572.25
Graduate Non-Resident Student	~\$14,880	~\$1,240.00
Technology Fee	\$200	\$17 per credit hour
Health Insurance**	\$2,591	-----
Health Center Fee (6-8 hours)	\$127.00	-----
Health Center Fee (9-11 hours)	\$190.00	-----
ASPH Health Professions Program Fee (Resident)	\$800 (Per Semester)	\$80 (Per Credit)
ASPH Health Professions Program Fee (Non-Resident)	\$1,100	\$110 (Per Credit)
Athletics Event Fee (optional)	\$86	\$86
<b>Course Fees (depends on course – AT Courses below)</b>	<b>Cost</b>	<b>Cost</b>
Health Professions Program Fee (one-time fee – 1 <sup>st</sup> Year)	\$1000	\$1000

ATEP 740 – 1 <sup>st</sup> Year	\$100	\$100
ATEP 738 – 1 <sup>st</sup> Year	\$250	\$250
ATEP 739 – 2 <sup>nd</sup> Year	\$250	\$250
ATEP 733 – 2 <sup>nd</sup> Year	\$100	\$100
ATEP 734 – 2 <sup>nd</sup> Year	\$100	\$100
ATEP 798 – 2 <sup>nd</sup> Year	\$200	\$200

**Note:** This does not include all other University fees and course fees. These can be found on the University website: <http://www.sc.edu/bursar/fees.shtml>

**\*Health Insurance:** \$2,591.00 (Graduate students who take 6 credit hours or more, graduate assistants and international students are **required** by the university to have health insurance. Students can either purchase insurance or waive out by providing documentation of enrollment in a comparable plan.). For graduate students who **do not** have their own insurance and are granted a Graduate Assistantship, they will qualify for a **Graduate Assistant Insurance Full Subsidy**. Beginning Fall 2022, Colleges (and grants, where applicable) will assume the full balance of health insurance beyond the \$1000 subsidy, which will continue to be covered by the Graduate School/Provost Office.

#### D. Programs offered in the Arnold School of Public Health within the Department of Exercise Science

- 1. Master of Science – Advanced Athletic Training:** The Master's degree in Advanced Athletic Training is designed to provide students advanced clinical preparation in the field of athletic training. Admitted students must possess an undergraduate degree or graduate degree with specialization in athletic training.
- 2. Additional Information on master's degree**  
**Thesis or Research Project:** A thesis or research project is a requirement of most Master of Arts or Master of Science degree programs and some professional master's programs. The thesis is the ultimate requirement of the master's program and becomes a permanent record of the student's independent research or creative effort. The best academic tradition and professional practice require the Graduate School to preserve and share graduate student work with other scholars. To do that successfully means maintaining high standards concerning the form and appearance of the thesis. Thesis formatting and organization guidelines are available on the website of the Graduate School. **All Athletic Training projects must be data based.**
- 3. Department of Exercise Science (EXSC) Requirements for Thesis:** Thesis committee must be composed of a minimum of 3 graduate faculty members: 1) committee chair from the Department of EXSC, 2) committee member from the Department of EXSC, and 3) outside committee member. All faculty committee members must be considered Graduate Faculty within the University of South Carolina's Graduate School. Student must follow all Graduate School requirements for Thesis (Listed Above).
- 4. Department of EXSC Requirements for Project:** Project committee must be composed of a minimum of 3 members approved by the AT Program's Research Director and Chair of committee. Project committee chair must be a faculty in the Department of EXSC.
- 5. Academic Course Work – master's in advanced athletic training**  
**ATHLETIC TRAINING REQUIREMENTS** (36 hours)

<b>MS in Athletic Training (Proposed Courses)</b>		
ATEP 733	Evidence Based Practice in Medical Emergencies	(3)
ATEP 734	Evidence-Based Approach to Evaluation, Treatment, and Rehabilitation of Injuries	(3)
ATEP 735	Contemporary Issues in Athletic Training	(3)
ATEP 738	Advanced Athletic Training Practicum I	(3)
ATEP 739	Advanced Athletic Training Practicum II	(3)
ATEP 740	Evidenced Based Practice in Weight Management Assessment	(3)
ATEP 741*	Advanced Clinical Skills in Athletic Training	(3)
PUBH 700*	Perspectives in Public Health	(3)
<b>Research Requirements</b>		
ATEP 770/EXSC 755	Research Methods & Prospectus Writing in Athletic Training	(3)
ATEP 798/799	Project/Thesis in Athletic Training	(3)
BIOS 700	Introduction to Biostatistics	(3)
EPID 701	Concepts and Methods of Epidemiology	(3)
PUBH 726	Qualitative Methods for Public Health Practice	(3)
PHTY 788*	Evidence Based Research in Physical Therapy	(2)
<b>Professional Elective (Pick ONE) Can pick a different course it just needs to be approved by Graduate Director.</b>		
ATEP 736	Advanced Treatment and Rehabilitation of Injuries	(3)
ATEP 737	Current Research in Athletic Training Education	(3)

#### Two-Year Course Plan for Athletic Training (Total 36 Credit Hours)

<b>FIRST YEAR – SUMMER II (3 Credits)</b>	
ATEP 738 – Advanced Athletic Training Practicum I	
<b>3 Credits</b>	

<p><b>FIRST YEAR – FALL SEMESTER (6 Credits)</b>  ATEP 770 – Research Methods in Athletic Training  3 Credits  <b>Pick ONE</b>  <b>BIOS 700</b> – Biostats or other stats option (3 Credits)  <b>EPID 701</b> – Concepts and Methods of Epidemiology  <b>PUBH 726</b> – Qualitative Methods for Public Health Practice (3 Credits) or  <b>PHYT 788</b> – Evidence Based Research in PT (2 Credits)</p>	<p><b>FIRST YEAR – SPRING SEMESTER (9 Credits)</b>  <b>ATEP 733:</b> Evidence Based Practice in Medical Emergencies (3 Credits)  <b>PUBH 700</b> – Perspectives in Public Health (3 Credits)    <b>ATEP 741</b> – Advanced Clinical Skills in AT (3 Credits)    <b>ATEP 798</b> – Research Project in Athletic Training (1 Credit)</p>
<p><b>SECOND YEAR – SUMMER I (3 Credits)</b></p>	
<p><b>ATEP 739</b> – Advanced Athletic Training Practicum II (3 Credits)</p>	
<p><b>SECOND YEAR – FALL SEMESTER (6 Credits)</b></p>	<p><b>SECOND YEAR – SPRING SEMESTER (9 Credits)</b></p>
<p><b>ATEP 736</b> - Advanced Treatment and Rehabilitation of Injuries (3 Credits)    <b>ATEP 740:</b> Evidenced Based Practice in Weight Management Assessment (3 Credits)    <b>ATEP 798</b> – Research Project in Athletic Training (1 Credit)</p>	<p><b>ATEP 735</b> – Contemporary Issues in Athletic Training (3 Credits)    <b>ATEP 734</b> – Evidence-Based Approach to Evaluation, Treatment, and Rehabilitation of Injuries (3 Credits)    <b>ATEP 798</b> – Research Project in Athletic Training (1 Credit)</p>

### Research Project

- First Fall Semester** - Graduate students are encouraged to meet with faculty in area of interest. Narrow down a topic for project/thesis and form a committee (3 members approved by the PPAT Program Director or Research Coordinator). The Chair of your project/thesis must be a faculty member in the Department of Exercise Science and an Athletic Training Faculty member. Graduate Students should start reading pertinent literature as directed by the faculty; write a literature review, and methods section.
- First Spring Semester** - Complete writing the Introduction, Literature Review, and Methods chapters of paper. Propose Research project, submit IRB, and possible start of data collection. Submit Graduate School research grant if applicable.
- Second Fall Semester** - Graduate students should be collecting data, analyze data and write results and discussion. Submit abstract to professional conferences.
- Second Spring Semester** - Finish writing document and defend research project.

### E. Additional Information on Master Degrees

- Course Enrollment Load:** A graduate student may enroll for a term load not to exceed 15 graduate hours. Some programs limit their students to a 9- or 12-hour maximum term course load. A student with a term course load of 9 or more hours during a fall or spring term is classified as full-time for academic purposes. The maximum course load in each of the two summer sessions is 6 hours. May session enrollment is part of the 6-hour limit for Summer 1 term. A student must be enrolled for at least 1 credit hour during any semester in which thesis progress is made and such University resources as the library, computer facilities, or faculty time are used.
- Right to an Advisor:** Every graduate student admitted to a degree program is entitled to an advisor. The academic program graduate director is the default academic advisor for graduate students until another academic advisor is assigned or an advisory committee is formed. Students are urged to consult with an advisor prior to enrollment.
- Master's Program of Study:** Every degree student must file a Master's program of study (M-POS) in The Graduate School for approval by the dean of The Graduate School. A program of study is a list of courses that satisfy degree requirements, and it must be approved by the student's advisor, the graduate director, and the dean of The Graduate School. This formal agreement serves a number of purposes that benefit both the student and the University. It allows the student and the advisor to engage in early planning of course work, explore research interests, and discuss requirements for progress toward degree; facilitates subsequent advisement; and protects the student in the event of unexpected curriculum or faculty changes. The student must file a completed Master's Program of Study form (M-POS) within the first 12 months of course work. If necessary, an approved program of study can be modified with a Program Adjustment form.
- Transfer Credit:** No more than 12 semester hours of graduate credit may be transferred into a master's program that requires 30-36 hours; no more than 15 semester hours of graduate

credit may be transferred into a master's program that requires 37-45 hours; and no more than 18 semester hours of graduate credit may be transferred into a master's program that requires 46 or more semester hours. Only credits with grades of B or better may be transferred from another institution into a master's degree program. Course work transferred for credit toward a master's degree must be from an accredited institution and must be no more than six years old at the time of graduation.

Course work transferred from another institution must be relevant to the program and have course content and a level of instruction equivalent to that offered by the University's own graduate programs. Approval for acceptance of transfer credit to a student's program of study must be approved and justified by the student's academic program and submitted to the dean of The Graduate School for final approval on the Request for Transfer of Academic Credit ([G-RTC](#)) form. Transfer credit is not posted to the student's official academic transcript until the term of graduation.

5. **Comprehensive Assessment:** All candidates for a master's degree must complete a comprehensive assessment in the major field of study that is distinct from program course requirements. A comprehensive assessment is one that requires a student to synthesize and integrate knowledge acquired in coursework and other learning experiences and to apply theory and principles in a situation that approximates some aspect of professional practice or research in the discipline. It must be used as a means by which faculty judge whether the student has mastered the body of knowledge and can demonstrate proficiency in the required competencies. Many different models are possible, including written and oral comprehensive examinations, portfolios, supervised practice placements with comprehensive evaluation, a major written paper such as a thesis or an applied research project, or development of case studies.

Each degree program must require a comprehensive assessment. Completion of course requirements or satisfaction of a specified GPA does not satisfy the comprehensive assessment requirement. The Graduate School must be notified by the graduate director of the student's academic program of successful completion of the comprehensive assessment. Completion remains valid for two years after which the assessment must be repeated.

6. **Thesis or Research Project:** A thesis or research project is a requirement of most Master of Arts or Master of Science degree programs and some professional master's programs. The thesis is the ultimate requirement of the master's program and becomes a permanent record of the student's independent research or creative effort. The best academic tradition and professional practice require The Graduate School to preserve and share graduate student work with other scholars. To do that successfully means maintaining high standards concerning the form and appearance of the thesis. Thesis formatting and organization guidelines are available on the website of The Graduate School.

No more than 9 hours of thesis preparation (799) may be included on the master's program of study, but some programs may allow less hours. Completion or satisfactory progress in thesis preparation will be indicated by the grade of T; unsatisfactory progress in thesis preparation will be indicated by the grade of U, but thesis preparation grades are not calculated into the graduate cumulative grade point average. Programs may establish policies regarding eligibility for continued enrollment. Any student who uses University facilities or confers with faculty on thesis work in any semester must be officially enrolled for at least one hour of graduate credit. It is recommended that the one hour or credit be in thesis preparation (799).

**Note:** With approval of the Graduate Council and dean of The Graduate School, some programs elect to have students complete a project in lieu of a thesis or offer a non-thesis option which requires additional course work instead of a thesis.

- a. **Thesis Committee:** The Thesis Committee is a program faculty committee approved by the department or school. The Thesis Committee should be composed only of faculty from the Columbia campus. Regular graduate faculty of any rank who hold the doctorate or the discipline's terminal degree and tenured faculty at the rank of full professor who do not hold the terminal degree may serve on or chair thesis committees.

Research, clinical, and adjunct faculty at any rank who hold the terminal degree may serve on and chair a thesis committee with approval of the program and the dean of The Graduate School. Instructors and lecturers who do not hold the terminal degree may serve as members of thesis committees with justification from the program and approval of the dean of The Graduate School. Emeritus or emeriti faculty may continue to chair the thesis committee of a student under their direction at retirement and may be appointed as a member or a thesis committee with the approval of the program and the dean of The Graduate School.

When the written thesis is completed, most programs require a thesis defense. Please consult the graduate director of the academic program for departmental, school, or college specific approval processes and submission deadlines. Completion of the thesis must be approved by the Thesis Committee and the signatures of the

committee members must be obtained on the Thesis Signature Approval (G-TSF) form. The electronic submission of the thesis will not have title page signatures; this is to prevent theft and unauthorized use of signatures that otherwise might occur. The graduate director of the academic program will also be asked to sign the G-TSF form to affirm that your thesis follows The Chicago Manual of Style, or another style manual endorsed by your program.

The G-TSF with signatures must be delivered to the Graduate School program coordinator who oversees the degree program. The G-TSF is to be submitted to the coordinator in an envelope marked "Confidential." Student may hand-deliver the form to The Graduate School program coordinator or may send it through the mail. The G-TSF must be received by the final-submission deadline in order for the student to be cleared for graduation.

- b. **Thesis Submission:** The thesis is submitted to The Graduate School through the electronic thesis and dissertation (ETD) submission process. Instructions for submission should be read thoroughly and followed explicitly, including deadlines for format check and final submission. The preliminary thesis document will need to be submitted electronically to The Graduate School for a format check not later than five weeks before graduation through the ProQuest/UMI ETD portal. The Graduate School coordinator for the academic program will respond with any needed corrections or revisions. At least 20 days prior to graduation, the candidate must submit the final revision of the dissertation through the ETD process. Students will receive notification of receipt of the final dissertation submission from The Graduate School program coordinator. The thesis must be reproduced by ProQuest/UMI for archival purposes as per the laws of the State of South Carolina and must be archived by the University library. Additional information on publication and copyright options is available on the website of The Graduate School. No paper copies of the thesis are required by the Graduate School. If the academic program requires students to submit a bound copy of the thesis, the department and student are responsible for obtaining the copy. The website of The Graduate School provides several options for thesis binding and/or obtaining paper copies.

7. **Application for Graduation and Degree Audit:** All students enrolled in a Master's degree program must file the application for degree/graduation available on the website of the Office of the University Registrar with The Graduate School within the first 15 class days of the fall or spring semester in which the degree is to be awarded, or within the first 10 class days of Summer Session I if the degree is to be awarded at the end of the summer (even if the student does not plan to take courses until the second summer session). Although some departments do not require students to provide the academic program with copies of the application for graduation, The Graduate School recommends that students do provide a copy to the academic program to facilitate assessment of degree requirements. Applicants are encouraged to consult with the academic program to confirm that all requirements for graduation have been met.

Applications for graduation submitted after the announced filing deadline will be accepted if supported by a letter from the graduate director of the student's program and accompanied by a late fee of \$25, which increases by \$25 every 30 days after the deadline. Deadlines are posted for each term on the official academic calendar of the University found on the website of the Office of the University Registrar. Any late application that lacks the supporting letter or late fee will be processed for the following term.

The Graduate School forwards the application for degree/graduation form to the Office of the University Registrar to start the degree audit process. In [Self-Service Carolina](#), students should view their Graduation Degree Application to confirm the accuracy of the information submitted and to correct any errors, so the diploma is printed correctly. It is also important to inspect the [Self-Service Carolina](#), graduation degree application information to determine if there are any holds that will prevent issue of an official transcript or mailing of the diploma. At the end of the semester, the degree program and The Graduate School both assess for degree audit whether all requirements have been completed, and then forward a recommendation to the Registrar to approve or disapprove award of the degree.

At the time of graduation, the student's cumulative grade point average (GPA) must be at least 3.00. Additionally, the student's average on all grades recorded on the program of study for courses numbered 700 or above must be at least 3.00 and all courses listed on the program of study must be at least 3.00.

8. **Degree Conferral:** Upon confirmation of a clear degree audit, the degree will be posted by the Office of the University Registrar to the student's official academic record. The degree award is posted to the student's transcript within 6 weeks after the commencement ceremony. Degree candidates may wish to check periodically the Academics tab of [VIP](#), Record of Academic Work for Advisement Only section, to see if the degree is posted. Diplomas will be mailed to the address recorded on the application for graduation via first class mail to U.S. addresses and via registered airmail to international addresses.

Graduates may expect to receive the diploma within three months after the commencement exercises. Degrees cannot be awarded retroactively.

**Note:** To pursue further graduate study after completion of a graduate degree, a student must submit a new application to The Graduate School.

- 9. Academic Regalia:** Information on commencement exercises is posted to The Graduate School webpage. Academic regalia worn for the commencement ceremony is sold by the University Bookstore in the Russell House located on Greene Street in Columbia. To place an order for academic regalia to wear for graduation, please telephone the University Bookstore at 803-777-4160 or visit the website at <http://sc.bkstore.com>. You may also order academic regalia from the bookstore via a downloadable form. The completed form may be hand-carried or faxed to the University Bookstore at 803-777-4018.

## F. Academic Regulations

- 1. Transfer of Course Credit:** Course work not part of a completed certificate program or graduate degree from USC or another institution may be transferred for credit toward a master's or doctoral degree. Course work transferred from another institution must be relevant to the program and have course content and a level of instruction equivalent to that offered by the University's own graduate programs. Approval for acceptance of transfer credit to a student's program of study must be approved and justified by the student's academic program and submitted to the dean of The Graduate School for final approval on the Request for Transfer of Academic Credit (C-RTC) form. No more than 12 semester hours of graduate credit may be transferred into a master's program that requires 30-36 hours; no more than 15 semester hours of graduate credit may be transferred into a master's program that requires 37-45 hours; and no more than 18 semester hours of graduate credit may be transferred into a master's program that requires 46 or more semester hours. Only credits with grades of B or better may be transferred from another institution into a master's or doctoral degree program. Course work transferred for credit toward a master's degree must be from an accredited institution and must be no more than six years old at the time of graduation and coursework transferred into a doctoral degree program must be no more than eight years old at the time of graduation. Transfer credit is not posted to the student's official academic transcript until the term of graduation.
- 2. Grading Policies:** The letter grades **A**, **B**, **C**, **D**, and **F** are employed to designate excellent, good, fair, poor, and failing work, respectively. The grades **B+**, **C+**, and **D+** also may be recorded. Courses graded **D+** or lower cannot be applied to graduate degree programs. The letter grades **S** (satisfactory) and **U** (unsatisfactory) are assigned only in courses that have been approved for Pass-Fail grading or in a standard graded course where the student, with the approval of the dean of The Graduate School, has elected an individual Pass-Fail Option. Courses completed with an **S** may be counted in total credits earned. Grades of **T** (satisfactory progress) or **U** (unsatisfactory progress) are given for thesis (799) and dissertation (899) preparation. Grades of **T** in thesis (799) and dissertation (899) preparation are not computed in the cumulative graduate grade point average. Graduate-level courses completed with the grade of **U** are calculated as an **F** in the cumulative graduate grade point average. In certain circumstances, grades of **I** (incomplete) or **NR** (no record) may be assigned by the instructor. **Note:** Retaking a graduate course does not delete the original grade.

The grade of **I** (incomplete) is assigned at the discretion of the instructor when, in the instructor's judgment, a student is prevented from completing a portion of the assigned work in a course because of an illness, accident, verified disability, family emergency, or some other unforeseen circumstance. The student should notify the instructor without delay and request an extension of time to complete the course work, but the request for a grade of incomplete must be made to the instructor before the end of the term. The instructor will determine, according to the nature of the circumstance and the uncompleted requirements, how much additional time, up to 12 months, will be allowed for completing the work before a permanent grade is assigned. An Assignment of Incomplete Grade form is completed by the instructor in VIP as part of the usual grade submission process. The justification for the incomplete grade, conditions for make-up, a deadline for completion, and a back-up grade if the course work is not completed by the deadline must be included on the form. Re-enrolling in a course will not make up an incomplete grade. A grade of **I** is not computed in the calculation of a student's cumulative grade point average until the make-up grade is posted.

There is no automatic time period for completion of the work for which a grade of incomplete is given. The instructor should give the student a reasonable deadline, up to one year after the scheduled end of the course, to complete the work. After 12 months and **I** (incomplete) grade that has not been replaced with a letter grade is changed permanently to a grade of **F** or to the backup grade indicated by the faculty member on the Assignment of Incomplete Grade form. In the rare instance the instructor believes there is justification for an extension beyond the 12 month limit, a request for extension of incomplete time should be submitted to the dean of The Graduate School before the expiration of the 12 month period on the Extension of Incomplete Time Period Authorization (GS-47) form for approval. The Graduate School does not approve the make-up of **I** grades in courses which are already out-of-date for use on a student's program of study or extensions of time without sufficient justification and/or supporting documentation.

Graduate students cannot register for additional coursework if there are 3 or more temporary grades of incomplete (I) that have not yet been replaced with a permanent grade on their academic record. Student enrolled in graduate study may not graduate with a temporary grade of I on their record, even if that course is not listed on the Program of Study.

**NR** (no record) is a temporary mark on the transcript assigned by the Office of the University Registrar if a grade has not been submitted by the instructor at the proper time or if any grade not approved for a particular course has been submitted. As a temporary mark on the transcript the **NR** must be replaced by a grade. If the **NR** is not resolved or replaced by the instructor with a valid end-of-term grade before the end of the major (Fall or Spring) term following the term for which the grade of **NR** was recorded, a grade of **F** will be assigned.

3. **Academic Standard for Grade Point Average:** The cumulative grade point average (GPA) is defined as the GPA of all graduate credit courses recorded on the official USC transcript. In-date courses are eight or less years old for doctoral students and six or less years old for Master's, specialist, graduate certificate, and non-degree students. Revalidated courses are also included in the cumulative GPA calculation. Grades earned for graduate credits transferred from other colleges or universities are not included in the cumulative GPA.
4. **Academic Standard for Progression:** Graduate courses may be passed for degree credit with a grade as low as C, but a degree-seeking student must maintain at least a B (3.00 on a 4.00 scale) cumulative grade point average. Some programs stipulate that no grade below B can be applied to a core course. Programs may cancel a student's registration privilege if the student fails to make adequate progress toward degree as defined by the program's academic policies. A student's registration privileges may also be cancelled for failure to meet academic standards as defined by The Graduate School.
5. **Academic Standard for Graduation:** At the time of graduation, the student's graduate cumulative grade point average (GPA) must be at least 3.00 (B) on a 4.00 scale. Additionally, the student's average on all grades recorded on the program of study for courses numbered 700 or above must be at least 3.00 and all courses listed on the program of study must be at least 3.00.
6. **Academic Suspension Policy:** Graduate degree-seeking students whose cumulative grade point average (GPA) drops below 3.00 (B) will be placed on academic probation by The Graduate School and allowed one calendar year in which to raise the cumulative GPA to at least 3.00. In the case of conversion of grades of incomplete that cause a cumulative GPA to drop below 3.00, a degree-seeking student will be placed on academic probation at the end of the semester in which the grade is posted. Students whose cumulative GPA falls below the required minimum of 3.00 by receiving a grade for a course in which they received a grade of Incomplete will, instead of a one-year probationary period, be granted only one major semester of probation dating from the semester in which the Incomplete conversion grade is received by the registrar in which to raise their cumulative GPA to 3.00 or above. Students who do not reach a cumulative 3.00 grade point average during the probationary period will be suspended from graduate study and will not be permitted to enroll for further graduate course work as a degree or a non-degree student
7. **Reinstatement after Suspension:** The Graduate School's Policy on Academic Probation and Suspension stipulates that when a degree-seeking graduate student's cumulative graduate grade point average (GPA) falls below 3.0 the student is placed on academic probation. The student has one calendar year, or in the case of an Incomplete conversion one major term, from the academic probation term to increase his/her cumulative graduate GPA to at least 3.0. Failing to meet this condition will result in academic suspension from all graduate study at the University of South Carolina.

After suspension, reinstatement to graduate study or non-degree enrollment status cannot be granted for one calendar year following the term of suspension. To appeal for reinstatement the student must submit through the student's academic program a completed petition packet to the dean of The Graduate School following the guidelines below. Appeals may be initiated at any point following suspension, but petition packets must be received by The Graduate School at least 45 days before the start of the term for which the student wishes to be readmitted. A student must contact the academic program and ask for support for reinstatement to graduate study. The department must recommend reinstatement for an appeal to go forward. Only packets containing all of the required letters, documentation, and recommendations and forwarded to the dean of

The Graduate School from the graduate director of the academic program will be considered. Appeal packets must contain all of the following:

- A letter from the student that explains the factors that resulted in his/her academic suspension.
- An explicit plan written by the student and endorsed by the graduate director showing how the student will overcome the extenuating circumstances noted in the student's letter of appeal (e.g., medical treatment, change of major, adjustment of work demands, etc.) and raise his/her GPA. Supporting documentation of

extenuating circumstances must be included.

- A feasible projection of what grades will be required in what courses and which semesters to yield the requisite overall cumulative GPA of 3.0.
- A letter from the appropriate department chair or graduate director to confirm that all materials for this appeal are in order and that the appeal is supported by faculty of the academic program.

Complete packets may be delivered in person, by U.S. mail, or by campus mail to:

Dean of the Graduate School  
The Graduate School  
1705 College Street  
Close-Hipp Suite 552  
Columbia, SC 29208

**Note:** Students who have not been enrolled for three or more years must reapply to The Graduate School.

**8. Academic Forgiveness Policy:** The Academic Forgiveness Policy is intended to assist former University of South Carolina graduate students whose cumulative UofSC graduate grade point average (GPA) is below 3.00 to reenroll in graduate study without having to overcome the burden of previous unsatisfactory academic performance. Any former USC graduate student who has not been enrolled in graduate study for at least 24 consecutive months is eligible to apply for academic forgiveness. Academic forgiveness sets aside all former grades earned as a UofSC graduate student so that previous grades will not be calculated into the student's cumulative graduate GPA. Once academic forgiveness is granted courses taken during and prior to the term elected cannot be revalidated or count toward the completion of a graduate degree. A student who seeks academic forgiveness must submit a written petition for academic forgiveness to the dean of The Graduate School. That petition must include:

- A letter from the student that explains the factors that resulted in the student's previous academic record.
- An explicit plan written by the student and endorsed by the graduate director showing how the student will address those factors in future graduate study if academic forgiveness is granted.
- A letter from the appropriate department chair or graduate director in support of granting academic forgiveness and recommending reinstatement.
- Notice of the specific term for which courses taken during and prior to that term are to be segmented on the student's academic record as forgiven.

Each appeal for academic forgiveness will be considered on a case-by-case basis. If granted, the registrar's office will upon notification from the dean of The Graduate School segment the student's academic record showing all courses and grades to be included in academic forgiveness and will recalculate the UofSC graduate cumulative GPA accordingly. The courses and grades will remain a part of the student's academic record. A notation will appear on the transcript indicating the student was approved for academic forgiveness.

**9. Academic Grievances:** Students who have problems with their instructors, course grades, or course sequencing should talk to their instructor. Every student has the right to petition and can pick up the petition form in Student Affairs in the Arnold School of Public Health. The petition will be sent to the Department Chair and will be reviewed by the department grievance committee. If the student's grievance is not satisfied the student may bring formal charges to the Student Affairs Committee of the Arnold School of Public Health. The committee will not act if the dispute is solely over a grade.

**10. Post-Professional Athletic Training Student Obligations Class Attendance:** The UofSC Post-Professional AT Program faculty are responsible for the design and instruction of the academic courses contained within the curriculum. The faculty feel these courses, combined with clinical education and experience, are vital to the overall success of students in the AT Program. As such, the faculty feel students enrolled in the Post-Professional AT Program should attend 100% of all class meetings. Therefore, all students will be required to attend and be actively involved in all AT Program courses. Additionally, being "tardy" for any course will be considered an absence under the terms of this policy. Students are expected to be seated and prepared to initiate class activities at the time designated for the class to begin. Those students not ready to initiate class as described will be considered tardy. This policy applies to laboratory class meetings and includes appropriate dress. Faculty may, at their discretion, choose to refuse admittance to anyone who arrives after class has begun (i.e., lock classroom doors or dismiss student.)

Post-Professional Athletic Training (PPAT) students may occasionally be absent from courses while engaging in another aspect of athletic training education (traveling with a team, etc.). PPAT students will not be excused from class to observe surgeries. In these instances, students are encouraged to



provide advance notice to all their professors. Understandably, there will be times when absences will be excused (illness, family emergency, etc.).

## VI. CLINICAL EDUCATION

### A. South Carolina Certification

Athletic training GAs/Interns must be certified through the Department of Health and Environmental Control (DHEC). DHEC regulates the practice of athletic training in South Carolina. DHEC prohibits work in the capacity of an athletic trainer or calling oneself an athletic trainer unless that person is certified by the state to do so. South Carolina regulations for athletic trainers require BOC certification.

### B. Selection for Clinical Sites

Graduate Assistants are **NOT** offered specific clinical sites when offered a position here at UofSC. Graduate Assistants/Interns will be allowed to select their top 3 choices and 1 choice they absolutely would not want. The top three clinical sites are not guarantee, but we do our best to meet every graduate assistant's professional goals.

### C. Clinical Sites

- UofSC Athletics – football, baseball/men's soccer, women's soccer, women's tennis/women's golf, men's tennis/men's golf, track and field, softball/volleyball, sand volleyball, swimming and diving, and equestrian.
- UofSC Campus Recreation (club sports and intramurals)
- Small College – Benedict College, Claflin University, Columbia College, and Newberry College
- Larger University – South Carolina State University (Division I)
- High Schools – large high school, small high schools, private high schools
- Prisma Health Orthopedic Clinic
- UofSC University Health & Wellness Center
- UofSC Marching Band and Ballet

### D. Graduate Assistantship Package (Per Year)

Assistantship Package	Amount
Stipend & Tuition (See Note Below)	~\$21,500
Out of State Tuition Waiver (2 semesters difference in tuition)	~\$14,880
Graduate Assistant Insurance Subsidy	\$1000
AT Clinical Practice Insurance – covered under University Policy	-----
Gaston Module I	\$650
<b>TOTAL</b>	<b>\$38,030</b>
<p><b>NOTE:</b> 1<sup>st</sup> Year GA are on a 12-month contract (July 16-July 31) and 2<sup>nd</sup> Year GAs are on a 10.5-month contract (July 16 - May 31). <b>GAs will use the \$21,500 to pay in-state tuition</b>, and the remaining balance per semester will be distributed in a bi-monthly stipend. Students are responsible for the balance remaining on their tuition bills. Funds allocated for tuition &amp; stipend are as follows:</p> <p><b>Year 1 Tuition (\$12,200):</b> Summer I - \$1800, Fall I - \$5100; Spring I - \$3500, Summer II - \$1800  <b>Year 1 Salary (~\$9,300):</b> Paid bi-monthly across 12 months</p> <p><b>Year 2 Tuition (\$8,600):</b> Fall II - \$3500; Spring II - \$5100  <b>Year 2 Salary (~\$12,900):</b> Paid bi-monthly across 10.5 months</p>	

### E. Evaluation of Clinical Supervisor and Clinical Site

- You will be required to evaluate your supervisor and your clinical site at the conclusion of every semester. The evaluation form will be given to you by the Program Director.
- You will also be required to be evaluated by your Clinical Supervisor at the conclusion of every semester. The evaluation forms will be sent directly to your supervisor via the Program Director.

### F. Clinical Hours

The Post-Professional Athletic Training Student Clinical Hours Policy was created to assure that students, faculty, and clinical supervisors all follow the same guidelines in accordance with the university policy. This policy outlines the minimal and maximal amount of clinical experience hours graduate students are expected to complete as part of their graduate assistantship. **Work Assignment: average of 20-30 hours per week (unless the student derives direct academic benefit from the work, e.g., thesis or dissertation research or clinical practicum).**

- Equitable Workplace:** Graduate Assistants should not be subjected to unfair treatment within the context of their employment. Given the nature of the working relationship between graduate assistants and their supervisors, graduate assistants can be vulnerable to assignments and workloads which exceed the reasonable parameters of the assistantship. For example, graduate assistants hired for ten (10) hours per week should not be expected to work twenty (20) hours per week. Effort may vary throughout the semester, but the average hours worked per week should align with the level of the appointment.

The **Provost Study Group on Graduate Life 2008** agreed that departments and programs should effectively communicate to graduate assistants the nature and duration of their appointment,

expectations regarding performance of duties, criteria by which performance in an assistantships is evaluated, the basis upon which an appointment would be renewed or continued, the criteria the department or program uses to allocate assistantships, and the process through which the graduate assistant can raise concerns about their appointment. The University is dedicated to maintaining an equitable workplace for all graduate assistants.

2. **Conflict resolution:** Measures should be taken at the hiring unit level to ensure a fair work environment for graduate assistants. Clear delineation of standards and practices is of the utmost importance as they serve to level the playing field by alerting all graduate assistants to departmental expectations. They can also be valuable in resolving any misunderstanding which may occur. Graduate students should not be expected to fulfill or scheduled for graduate assistant responsibilities that are in conflict with the graduate student's required academic activities. Graduate students can refuse any non-professional activities (outside their terms of appointment) for their advisor or anyone else (e.g., babysitting, yard clean-up, meeting outside of academic facilities, etc.). When there is a misunderstanding or concern over unfair treatment of graduate assistants, here are recommended steps for resolution:
  - Prepare a written summary of the concerns and send to the immediate GA supervisor with a request for a face-to-face meeting to discuss the concerns and their resolution;
  - Contact the **Student Ombudsperson** for a confidential, neutral, informal and independent discussion to gain perspective on the seriousness of the concerns and possible paths for resolution;
  - Prepare a written summary of the concerns and send to the unit supervisor (Graduate Director or department chair) with a request for a face-to-face meeting to discuss the concerns and their resolution.
  - Prepare a written summary of the concerns and send to the college or School's Dean's Office (Associate Dean for Graduate Programs) with a request for a face-to-face meeting to discuss the concerns and their resolution.
  - Prepare a written summary of the concerns and send to the Graduate School Dean with a request for a face-to-face meeting to discuss the concerns and their resolution. The dean of The Graduate School will attempt to resolve appeals filed with The Graduate School and will refer unresolved issues to the Graduate Council, whose decision will be the final action taken within The Graduate School. Any further appeal must be directed to the Office of the Provost.
3. It is the responsibility of the graduate student to make design a schedule based on needs of each individual clinical site. GA/Interns are required to provide athletic training services for all home events. Athletic training graduate students must keep track of their clinical hours. The Clinical Supervisor (at the sport or site that you are assigned) is responsible for verifying the completed hours, however it is the graduate student's responsibility to turn in all clinical hours to the Graduate Program Director.
4. How to Report Clinical Hours
  - It is the PPAT student's responsibility to record and report all clinical hours electronically. Link will be sent out to each student every 2 weeks.
  - Graduate Students should keep a copy of their hours they submit electronically.
  - PPAT Graduate students will record one hour for each hour they are in the athletic training facility working or engaged in athletic training activity. Graduate students must also record the type of activity they are participating in while in the clinical setting.
  - When traveling on a road trip, only actual hours spent working in athletic training activities can be recorded (hours to and from the site or hours spent in a motel are not acceptable)
  - Try to estimate your time as closely as possible to the actual amount of time spent completing each clinical role.
  - All reporting of clinical hours must be submitted electronically every 2-weeks. If you have questions, **contact Dr. Torres-McGehee or Dr. Zach Winkelmann**. Failure to report clinical hours on designated dates will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).
5. **Hours That Do Not Count toward UofSC AT Program Requirements**
  - Hours spent traveling (team travel, lodging, etc.). However, while traveling, hours spent giving treatment and those spent at the competition and practice sites will count
  - Hours spent at clinical sites not affiliated with the UofSC AT Program

#### G. SUPERVISION OF UofSC AT PROGRAM PROFESSIONAL STUDENTS

Athletic training students in the clinical rotations will be exposed to a variety of experiences with different levels of supervision by Preceptors. CAATE has defined supervision of students in a way that distinguishes between direct and indirect supervision as follows:

1. **Direct Supervision:** The athletic training student must include provision for supervised clinical education with a preceptor. Students must be directly supervised by a preceptor during the delivery of athletic training services. The preceptor must be physically present and have the ability to intervene on behalf of the athletic training student and the patient.
2. **Emergency Action Plan:** All athletic training students must have immediate access to the emergency action plan. Students must also have access to, and use of, proper sanitation precautions (e.g., hand washing stations, at all sites) to prevent blood borne pathogens.

## I. CLINICAL EDUCATION INFORMATION AND CLINICAL POLICIES

### 1. Employment during Clinical Assignments

PPAT students should expect a considerable time commitment at their clinical site. This includes weekends, evenings, and UofSC designated academic breaks/holidays. Employment during the academic year is strongly discouraged. GAs/Interns are expected to follow the schedule of their clinical assignment. It is the responsibility of the student to discuss their schedule with their Clinical Supervisor prior to start of their clinical assignment. Any outside employment schedules must not conflict with clinical expectations and requirements.

### 2. Mandatory Athletic Training Program Events:

- **Monthly PPAT Meeting:** All Graduate Students/Interns are required to attend a virtual monthly meeting.
- **End of the Year Banquet:** All Graduate Students/Interns are required to attend the end of the year Banquet. Graduate Student/Intern will only be excused if they have clinical responsibilities.
- **Prisma Health Sports Medicine Black & Blue Clinic:** Graduate Students/Interns will be expected to escort any of their student-athlete(s) that attends Saturday Black & Blue Clinic (Fall Only).
- **Spring Pre-Semester Meeting:** (Time TBA)
- **2<sup>nd</sup> Year Orientation** (Summer TBA)

### 3. Professional Appearance

As a member of the allied health professional staff at UofSC, Post-Professional AT Students/Interns are required to maintain a professional and appropriate appearance. This is a necessary measure to present a professional image to our UofSC faculty, staff, and students as well as maintaining a positive public image for the Post-Professional AT Program and athletic training profession. It is the Post-Professional AT Student/Intern's responsibility to be always in appropriate dress when working. Clothing available through UofSC AT Program but is not required to purchase. You can purchase non-logo clothing on your own.

*At no time will a Post-Professional AT Student/Intern's absence or tardy report for athletic training duties be excused for a student being dismissed by primary or secondary supervisor for inappropriate dress. Collared shirts, t-shirts and other apparel are usually ordered at the beginning of each semester through the Post-Professional AT Program Director.*

#### **Proper Attire for Collegiate or High School Events (games, matches & meets)**

- Must wear name badge (both DHEC and Program) during **ALL** clinical obligations
- UofSC (or plain) Athletic Training collared shirt (no "Cocks" logos). Shirts must be **TUCKED IN** at all times and no rolled up sleeves.
- Flat-bottomed shoes (no open-toed shoes)
- Socks
- Shorts or khaki pants or slacks in one of the following colors: black, gray, or khaki (shorts should pass the "arms at side test," **with arms are extended at side, shorts should be at least as long as finger length**)
- Post-Professional students must adhere to the dress code mandated by clinical supervisor and/or coaching staff. \* *Indoor/court sports may require professional and/or business casual dress.*

#### **Proper Attire for Collegiate or High School Practices**

- Must wear name badge (both DHEC and Program) during **ALL** clinical obligations
- UofSC (or plain) collared shirt or t-shirt (no "Cocks" and no rolled up sleeves)
- Flat-bottomed shoes (no open-toed shoes)
- Socks
- Khaki shorts or khaki pants or slacks in one of the following colors: black, gray, or khaki (shorts should pass the "arms at side test," **with arms are extended at side, shorts should be at least as long as finger length**)

#### **Proper Attire for Allied Health Sites (physician offices, physical therapy clinics)**

- Must wear name badge (both DHEC and Program) during **ALL** clinical obligations
- Business Casual attire only (no shorts)
- No open-toed shoes

### ***Additional Guidelines for Appearance at ANY UofSC AT Program Clinical Site***

- If a PPAT student has visible tattoos, they must follow clinical site recommendation for “covering” tattoos.
- Large facial jewelry must be removed at ALL times (e.g., lips, nose, eyebrow, and tongue), clear studs can be worn
- All Post-Professional AT Students/Interns should be well groomed
- Fingernails **must be** well groomed and kept at an appropriate length No acrylic/fake **long nails**
- No hats inside the athletic training clinics (outside: hats must be worn visor forward)

### ***Additional Guidelines for Appearance at ANY UofSC AT Program Clinical Site (Continue)***

- No jeans (EVER, this includes jeans of **ALL** colors: khaki, black, blue, gray, etc.)
- No yoga pants or tights (EVER)
- No sweatpants (EVER)
- No flip flops (ever)
- No boots (e.g., UGGS, etc.)
- DO NOT wear any other college or high school logo clothing (this includes outreach sites)
- No workout clothing (**tank tops, mesh shorts, basketball shorts, running shorts, etc.**) are allowed at any practice and/or game unless shorts were specifically issued by sport or clinical site (UofSC Football only).
- If belt loops are present, belt is required.
- Pants will be worn in an appropriate, and neat manner (waist of pants will be on the person’s waist, no cut off bottoms or holes, etc.).
- Hairstyles should be neat and maintained.
- Only age-appropriate hair apparel (no big bows or flashy head bands with sequins and glitter & no flashy hair clips, etc.)
- For males, facial hair must be shaven or kept neatly trimmed. Make it a point to be cleanly groomed (no stubble), especially at athletic events, physicals, or on doctor’s visits.
- Females with long hair, it must be **pulled back/put up** in a neat and functional fashion.

### **3. Clinical Experience Attendance Policy**

The clinical experience portion of the Post-Professional Athletic Training Program is where graduate students are introduced to, implement, practice, and master skills vital to their success as athletic training professionals. These experiences are provided in the form of clinical assignments (both on and off campus) and assigned a clinical primary and secondary supervisor.

A PPAT student enrolled in the AT Program is required to attend and actively participate in scheduled/assigned clinical experiences. Therefore, all athletic training graduate students will be required to attend and be actively involved in AT Program clinical experiences as assigned. Additionally, being “tardy” for any clinical assignment will be considered an unexcused absence under the terms of this policy. PPAT students are expected to be ready to initiate the clinical assignment at the designated time. Those graduate students not ready, including appropriate dress and equipment, to initiate the clinical assignment as described will be considered tardy.

Furthermore, the clinical supervisor may choose to refuse admittance to anyone who arrives late to the clinical assignment (dismiss graduate student). Please note that athletic teams may alter scheduled practices and games without warning or notice; it is our requirement that these events receive the same consideration and attendance as all other events. At no time is anyone other than the primary supervisor and PPAT Program Director allowed to excuse a graduate student from a clinical experience. ***Those requests for excused absences (including dates and reason) must be submitted in writing to the PPAT Program Director/PPAT Clinical Education Coordinator AND Clinical Supervisor TWO weeks prior to the absence.*** These documents will be kept on file in the graduate student’s portfolio. Failure to comply with this procedure will result in the absence being treated as unexcused/unapproved. (See Time-off Policy below)

Understandably, there will be times when absences cannot be pre-approved (illness, family emergency, etc.). These will be dealt with at the discretion of the Program Director. It is the graduate student’s responsibility to communicate with all appropriate instructors, staff, and coaches when these instances do arise. Again, the graduate student should make every effort in advance of the absence to follow this notification procedure. Athletic training graduate students are encouraged to provide advance notice to all their clinical supervisors. Habitual tardiness or absence from clinical assignments will be addressed by the following guidelines. Records of absences and tardiness will become a part of the graduate student’s permanent record.

Any graduate student who is tardy or absent from assigned clinical experiences will be reprimanded by the following guidelines:

- Graduate Student will be reprimanded by supervisor (Warning)
- Graduate Student will have written documentation in sent to the PPAT Program Director or Clinical Education Coordinator
- Graduate Student may be removed from his/her clinical site
- Graduate Student will have to meet with chair, program director, clinical education coordinator, and departmental representative to discuss continuance in the program.
- In all cases a record of this negligence will be placed in the graduate student's permanent folder which will factor into consideration for continuance in the program.

#### 4. **Clinical Education Availability and Punctuality**

- Arrive at practice at least 30-45 minutes or more as indicated before the beginning of practice and remain until all post-practice activity is complete or until dismissed.
- When anticipating arriving late, call immediately.
- Graduate students should be where assigned on time or early. If anything, be five minutes early.
- Be ready to participate when entering the facility.
- Look for something to do before sitting and talking.
- When unable to make an assigned duty, call one your clinical supervisor and the graduate program director in advance where arrangements can be made to cover your absence.
- If unable to cover a practice, game, etc. or assigned sport, advance notice must be given to the staff.
- Failure to report to duties and unexcused absences will lead to probation, suspension, or termination from the Athletic Training Education Program.
- Be in the athletic training facility to assist with morning and night treatments during your scheduled hours

#### 5. **Benefits Graduate Assistants Receive**

Graduate students from out of state who hold qualifying assistantships are granted an out-of-state waiver and will pay in-state tuition. Graduate assistantship paperwork must be completed no later than 25 calendar days from the first day of class in order to qualify for this reduction. In addition, graduate students who hold assistantships in the spring semester and pre-register for the upcoming fall semester automatically are accorded the reduced in-state tuition rates during the summer sessions (Maymester, Summer I, and Summer II).

#### **Typical GA Work Assignments & Course Load Limits:**

Work Assignments	Minimum	10 hours per week (Half-time)
	Maximum	20 hours per week (Full-time)

#### **Athletic Training GA/Interns**

Work Assignments	Maximum	Average of ~20 hours per week (Full-time)
------------------	---------	---

*Graduate assistants working **more than** the required hours per week must have approval of the Dean of Graduate School prior to the beginning date of their graduate assistantship appointment.*

Course Load Limits	Minimum	6 semester hours (1 hr summer)
	Maximum	15 semester hours

Academic Fees (Same for all GAs)	Per credit hour amount
----------------------------------	------------------------

*Graduate Assistantship tuition may increase when the University's tuition increases.*

**NOTE:** Graduate assistants **DO NOT** receive any of the following benefits: free parking stickers; paid activity or technology fees; **sick leave or paid holidays**; insurance; or reduced textbook rates at either bookstore. Graduate assistants are **NOT** entitled to faculty benefits or privileges. Graduate assistants may pay separately for health services/activities fees by paying the University fee at the time of registration.

---

#### 6. **TIME-OFF**

Post-Professional AT Graduate Assistants/Interns are on either a 12-month contract (1<sup>st</sup> Year with 25 pay periods) or a 10.5-month contract (2<sup>nd</sup> Year with 21 pay periods). There is no University policy for time-off for GA/Interns, meaning that GAs/Interns do not get paid time-off nor can they accrue time-off. UofSC AT Program will honor all University Holidays (**13 days**) and will give the students **12 days** to take throughout the year for a total of **25 days for 1<sup>st</sup> year students**. **Note: 2<sup>nd</sup> Year GAs will only have the 18 working days during the duration of their contract.** Students can carry over up to **5 days** from year 1 in the program. **Two weeks** notification **AND** the permission of the direct supervisor are required for not working during UofSC-recognized holidays. If a GA/Intern works on a UofSC Holiday, that day can be used

at another time. **Fall break, Winter break, and Spring break are NOT considered official UofSC holidays, and graduate assistants are required to fulfill their 20 hours per week.**

**NOTE: Any time requested off beyond the (25 days for 1<sup>st</sup> years and 18 days for the 2<sup>nd</sup> years) will be taking into consideration on an “individual” basis and made at the discretion of the direct supervisor and PPAT Program Director and/or Clinical Education Coordinator. Please note that every clinical site is different; therefore, responsibilities for each clinical site are made by the discretion of the direct clinical supervisor.**

#### **Request for Time Off**

All time-off requests must be made at least **TWO** weeks in advance and **email** Dr. Zachary Winkelmann and **copy BOTH** Dr. Torres-McGehee and Mr. Dwaun Sellers. Do **NOT** schedule time-off until cleared with the direct clinical supervisor **AND** Post-Professional AT Program Director/Clinical Education Coordinator. Time-off requests not made within the **TWO** weeks, will be decided on an individual basis but not guaranteed.

The Post-Professional AT Graduate Assistant/Intern is responsible for seeking clinical services during **ALL** time-off. If the GA/Intern must take emergency leave, the direct clinical supervisor and/or the Program Director/Clinical Education Coordinator will find clinical services for the GA/Intern. Time off missed will be made up at another time. It is **HIGHLY** discouraged to request time off during in-season or when hosting home events.

#### **Time Off Winter Break**

- i. Winter break is from the last day of Fall semester exams to the first day of the Spring semester. Because GA/Interns are still getting paid during this time, time-off is not guaranteed. GA/Interns are **REQUIRED** to request the time off during winter break. All time-off requests for Winter break must be submitted no later than **November 1<sup>st</sup>** so that the direct supervisors and faculty can plan athletic training services accordingly. GA/Intern is required to provide clinical services (any home events or regular scheduled practices or clinical hours) during the winter break. GAs/Interns with a longer break may be reassigned to another clinical site unless they have requested and have approval of time-off by the primary supervisor and Post-Professional AT Program Director/Clinical Education Coordinator.

***Please note: It is NOT to be assumed that graduate students/interns will have time off because their clinical site does not require athletic training services (e.g., season is over, or school has ended) and/or they get all Winter break off without approval from the Post-Professional AT Program Director/Clinical Education Coordinator. It is the responsibility of the GA to notify the PPAT Program Director/Clinical Coordinator in the event there is no need for you to attend your clinical site (supervisor gave you the day off, no practice of game services, etc.). If they are not notified, this could lead further disciplinary actions.***

- ii. **May Time Off (2<sup>nd</sup> Years): Graduation is on Friday May 5, 2022;** however, 2<sup>nd</sup> year contracts end **May 31, 2022**. It should not be assumed fulfillment of graduation releases the student from their contract obligations. The AT Program will only allow release of the contract if the student has an official job offer letter **AND** it specifies a start date. All time off will follow normal time off policy with appropriate approval. Although, the student may have days to request time off, if the clinical site is still active with practice and competition time off is not guaranteed.

#### **b. Summer Responsibilities (June 1 to mid-July)**

- i. Summer Time-Off Request: Summer time-off requests will be due around mid-April 2023. This date will be confirmed by mid-semester. The program highly suggests students do not take all of their time-off together in the summer.
- ii. All PPAT GA/Interns will be required to work 3 (30-hour weeks between June-1 and July 15 (tentative each year). Which will be scheduled by the Clinical Education Coordinator in coordination with the site supervisors. All PPAT GAs/Interns will be responsible for summer athletic training services at their current clinical site (e.g., high school summer workouts, small college/university summer workouts, UofSC Rec Center summer intramurals, etc.). If current clinical site does not have clinical responsibility for the summer, the PPAT GA/Intern will be reassigned to a different clinical site. PPAT GA/Interns must fulfill athletic training services as assigned by the direct clinical supervisor/PPAT Program Director/Clinical Education Coordinator prior to signing up for paid summer camps. **This is priority before time off and summer camp sign up. Once your 3-week block is finalized, then additional summer camps and time off can be granted.**

**Please note: It is NOT to be assumed that graduate students/interns will have time off because their clinical site does not require athletic training services (e.g., season is over, or school has ended) and/or they get all Winter break off without approval from the Post-Professional AT Program Director/Clinical Education Coordinator. It is the responsibility of the GA to notify the PPAT Program Director/Clinical Coordinator in the event there is no need for you to attend your clinical site (supervisor gave you the day off, no practice of game services, etc.). If they are not notified, this could lead further disciplinary actions.**

**Summer Camps:** All UofSC Athletic GAs/Interns are highly recommended to work their assigned team summer camps as medical staff in the summer. The staff athletic trainers overseeing summer camp will contact the Clinical Education Coordinator to begin scheduling the PPAT GAs/Interns with for the summer camp schedule during the spring semester. PPAT GAs/Interns may also sign up for additional paid summer camps as an athletic trainer/medical staff for larger camps. GAs/Interns may also sign up for additional camps as a Gatorade Team Leader, separate from medical staff, for larger camps; **ONLY** if all other summer clinical site medical services does not require an Athletic Trainer at their site.

**End Summer:** GA/Interns will NOT be allowed to request time-off the last week of July, in the Month of August and early September, unless it has been pre-approved by direct clinical supervisor AND the Post-Professional AT Program Director/Clinical Education Coordinator.

We encourage all students to make sure they do the following prior to the requesting time-off and/or to travel out-of- state:

1. **Instructor of Record:** Speak to your instructor about the possibility of missing class due to quarantine. It will be up to the individual instructor to decide how they will work with the student during this time.
2. **Clinical Supervisors:** it is the responsibility of each GA to be transparent with their supervisors about the COVID-19 Travel Policy when asking for time off to leave the state, so they know exactly what they are approving and have a full understanding of the quarantine.
3. **Requesting Time-Off:** You will use the TIME OFF REQUEST FORM on Blackboard (it was also emailed to every student). Please complete it using Adobe and return via e-mail to Dr. Winkelmann and copy Dr. Torres-McGehee and Dwaun Sellers.

#### **H. PREPARATION RESPONSIBILITIES FOR CLINICAL OUTREACH**

- a. **Initial Contacts:** A contact list will be distributed to all GAs/Interns on the first day of UofSC AT Program Orientation. GAs/Interns are expected to contact their Primary Contact or site administrator at their clinical assignment immediately and set up a formal appointment to go out to the clinical site for an introduction, tour facilities, meet the Athletic Director, Athletic Trainer (if applicable) and coaches, and discuss budget and ordering of supplies.
- b. **Keys:** One of the first priorities is to get keys so that GAs/Interns will have access to all areas necessary to carry out responsibilities. Primary contact will provide GAs/Interns with keys or tell them how to go about securing keys. Other than outside entrance and athletic training facility keys, additional keys may be necessary to access athletic training facility cabinets and storage areas. Be sure that you survey all playing areas prior to the first practice session, try keys to all doors and gates, and let the administrator know if you find that additional keys are needed. Remember that GAs/Interns should always have access to a telephone in the event of an emergency. Never assume that someone else has a key to a critical area or that keys will always work.
- c. **Supplies:** During one of the early visits to the athletic training facility, the GA/Intern should plan to inventory supplies. Open all cabinets, drawers, and storage areas to see what you will have to work with. Check to see if any supply requisitions or purchase orders were submitted prior to arrival. GA/Interns should attempt to locate this purchase order and compare it with the supplies in the athletic training facility. If supplies that were ordered have not been delivered, some are missing, or that none were ordered, you should discuss this with the administrators as soon as possible.
- d. **Emergency Care Equipment:** A top priority is to inventory the emergency care equipment well ahead of your first practice session in the Fall. If a piece of basic equipment is missing, or if other items are needed, check with the athletic director about purchasing them as soon as possible. It is also important that the GA/Intern checks all emergency equipment for proper working order. Proper equipment is essential to a complete emergency care plan. Do not be caught without the equipment you may need.
- e. **Therapeutic Modalities:** It is essential that the GA/Intern be sure that all therapeutic modalities are in working order. Note equipment that needs repair and contact the site administrators. This equipment should not be used until it is restored to proper working order.

by a qualified technician. GA/Intern also need to be sure that ground fault interrupters have been installed in all electrical outlets used for hydrotherapeutic or electrotherapeutic modalities. Make sure that modalities have been calibrated on an annual basis, if not do not use them until a calibration can be performed. Failure to have calibrated modalities will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).

- f. **Accident Reports/Injury Records:** Previous records should be reviewed well in advance of each sports season. GA/Intern should attempt to identify all athletes who may need follow-up care. These files may include 1) a standard student accident report, 2) medical referral forms, and 3) daily treatment logs. Make sure to check with administrators to determine if the school district requires athletic accident report forms be filed. Failure to have an accident reports/injury reports will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).
- g. **Physical Examinations:** GAs/Interns will need to determine each sites individual plan for physical examinations and the extent of their involvement. GAs/Intern should review all physical examination forms prior to the beginning of each sport season for any medical information that may be helpful in the care of your athletes. Important information regarding allergies, drug reactions, and pervious injuries or illnesses can often be obtained from these records. Failure to have an updated physical examines from all participating athletes will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).
- h. **Emergency Information Cards:** All schools and colleges require that an emergency card be kept on file for all athletes. These cards provide basic information including parent's home and business phone numbers, preferred physicians and hospitals, and other pertinent information that may be critical for the proper management of an emergency situation. These cards should be in your possession before an athlete is allowed to practice. Coaches should have copies in the graduate student's absence. The graduate student will need to find the most efficient way to file these cards so that they are readily accessible at any time.
- i. **Emergency Action Plan:** One of the most critical areas to access in the athletic injury emergency care plan at the site. A comprehensive emergency plan includes essential basic components including (a) development of general procedures and guidelines that will govern actions, (b) emergency care personnel training, c) maintenance of necessary emergency care equipment, d) establishment of an effective communication system, e) arrangement for emergency transportation, 6) development of emergency care protocol, and f) completion and filing of accident reports. Failure to have an updated and accessible EAP will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).
- j. **Institutional Policies and Procedures:** Review thoroughly. Should the GA/Intern find any problems they should plan to discuss them immediately with the supervisor. In preparation for emergencies, do not leave anything to chance and never assume that someone else has taken care of things. Ensure all policies match the NATA position and consensus statements including asthma, concussion, diabetes, medication, and lightning policies. Failure to have an updated Policy and Procedure Manual will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).
- k. **Football Equipment:** During the first meeting with the supervisor, GA/Intern will need to determine the procedures used for issuing and fitting football equipment. It is highly desirable that the GA/Intern be involved in this process. Thus, they should be well versed in the proper fitting procedures. Whether or not they are directly involved in the fitting procedure, graduate students should make it a point to periodically check each player's equipment for defects and proper fit. This is an important part of the job.
- l. **Consent to Treat Form:** If the GA/Intern is working with minors they will need to have consent from their parent/guardian to treat them. Most schools have a standard form that has to be signed prior to participation. This is especially important if the GA/Intern is utilizing Graston Technique as a form of treatment. Failure to have an updated consent to treat form for Graston will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).
- m. **Athlete Insurance:** Most schools require that all athletes have proof of insurance prior to participation. Make sure you have a copy in the athletic training facility and a copy in any kits that travel with teams in addition to the emergency contact information. Failure to have an updated insurance form will result in disciplinary actions. See section V (Violation of Code of Conduct or Clinical Site Rules).
- n. **Medical Team:** It is important to develop a list of individuals in the local medical community to be members of the medical team if one does not already exist. Compiling a list of competent doctors and dentists with various specialties should be done before the season begins. Remember, insurance will often dictate whom the athlete can see, so, be sure to have



this type of emergency information easily on hand at all times. If the school or the assistantship is sponsored through our system, these physicians should be given priority to be part of the medical team. Also, priority of referral should be to this hospital. However, athletes and parents always have the right to see whomever they wish.

- o. **Additional State Policies:** It is important that graduate students know the policies concerning athletic competition as well as medical issues set forth by the governing body for the clinical site (i.e., SCHSAA). For example, return to play criteria for skin disease or how many practices an athlete must participate in order to be eligible to participate in a game.
- p. **People to Contact - School Nurse & Janitor/Equipment Manager:** The GA/Intern should plan to visit with the school nurse. She/he can be a valuable source of information regarding school policies and procedures governing the health care of the student-athletes. Sometimes the school nurse is in charge of biohazard and therefore a discussion of disposal should occur. The custodian is a particularly good person to get to know. He/she can supply the ATR with various cleaning items that may be needed and help the graduate student gain access to places where keys do not fit. Most likely, the school has an established policy for submitting a requisition for repairs which you will need to become familiar with.
- q. **Communication Systems:** The essentials of an effective emergency care communication system include 1) a telephone, 2) lists of emergency telephone numbers, 3) posted information to be given during emergency telephone calls, and 4) policies for notification of emergency department personnel, parents, and school administrators. Telephones with direct outside lines should be available in all athletic training facilities and should be accessible to all those who may need them for emergency calls on a 24-hour basis. If for some reason, any of the team's practices are located off-campus the GA/Intern will need to be sure that an emergency telephone is also available at these sites.

Emergency telephone numbers must be in place prior to the first practice session in the fall. This list should include telephone numbers for:

- a. Emergency transportation system (911),
- b. Private ambulance companies,
- c. Hospital emergency departments,
- d. Your team physician's office and answering service,
- e. Athletic trainers' home or cell phone,
- f. Athletic training facility,
- g. Your school administrators

It is also recommended the GA/Intern type emergency telephone numbers on wallet-size cards and distribute them to all athletic administrators, coaches and student trainers. Emergency numbers should also be taped inside all athletic training kits. Emergency information should be typed and posted by each telephone. The following specific information should be given during calls to the emergency medical system (911) and posted by all telephones.

- 1. The caller's name and position (e.g., coach, athletic trainer)
  - 2. The telephone number from which you are calling
  - 3. A brief description of the problem (type of injury)
  - 4. The name of the school and the school address
  - 5. Specific directions to the location of the injured athlete including location of access doors or gates to be used by emergency vehicles. Notification of emergency department personnel, parents and administrators is necessary in any serious or life-threatening situation in which an injured student-athlete has been transported.
  - 6. In any situation involving serious or life-threatening injuries/illnesses, the parents or guardians should be notified as soon as possible following stabilization of the injury and the necessary emergency care measures. With the exception of situations in which life-saving measures need to be taken, most hospitals require parental consent for follow-up medical treatment. Thus, the graduate student should do everything possible to facilitate contact between parent and emergency department personnel. Information of the emergency information card should be given to emergency department personnel. In situations involving life-threatening, catastrophic or other serious injuries, appropriate school administrators should be notified as soon as possible.
- r. **Game and Practice Medical Services:** The dual responsibilities of a GA/Intern at the University and as a high school athletic trainer will place significant demands on time. As a general policy, GAs are required to attend all classes as a first priority. The graduate student also needs to attend home athletic events and away varsity football games in addition to practice sessions during the time that your school is in session. In view of academic responsibilities and

conflicting class schedules at the University, graduate students may find it difficult or impossible to adhere to this policy completely. In order to provide some flexibility graduate students should establish several types of game and practice services with the administrators ahead of time. All class conflicts should be communicated with the supervisor as early as possible and possible solutions discussed with the supervisor and professor.

- s. **Injury Management:** Parent Notification - Previously discussed. 2) Medical referral forms - The use of a medical referral form is strongly advised as a means of direct communication between the graduate student and the attending physician. A copy should be sent with the athlete and then returned by the athlete with physician comments and recommendations for further treatment. 3) Injury Reports to Coaches - Time factors will often limit opportunities to communicate with coaches regarding the status of injured athletes. Graduate students must remember that coaches need to have this information in order to plan for practices and games. It is suggested that in order to facilitate this communication graduate students provide a daily injury report to coaches to inform coaches of 1) new injuries, 2) update an athlete's injury status, and 3) recommendations and/or restrictions of an athlete's practice activities.
- t. **End-of-Season Reports:** It is recommended that, at the end of each sports season graduate students provide head coaches with a written summary of the rehabilitation progress of all athletes who were injured during the season. This report should include a list of those athletes who should continue to report for daily treatment sessions and those who should continue an extended post-season rehabilitation program. Involvement of coaches in the encouragement of athletes to report for post-season rehabilitation sessions is frequently highly effective. Check with administrator as to what reports the school requires.
- u. **End-of-the-Year Closing:** Toward the end of the school year, GA/Interns will need to begin thinking of things that will need to be done to close the athletic training facility for the summer months. One of the most important matters that should be taken care of before closing for the summer is to remove the athletic injury reports and records of graduating seniors from your active files. Contact your administrative personnel for record storage or destruction instructions. All therapeutic modalities should be checked for proper working order. As a general rule, electrotherapeutic modalities should be checked annually by a qualified servicemember. Arrangements should be made for the repair or replacement of any defective emergency care equipment. Summary report of the number of athletes treated, number of injuries, etc. should be compiled.

It is highly suggested that a list of all available supplies, equipment, policies, procedures and medical personnel contacts be left for the next athletic trainer. Cleaning the facility, defrosting the refrigerator, and arranging athletic training facility supplies are some of the last-minute details that should be taken care of before final closing. GA/Intern should return keys to the appropriate administrator.

## I. Clinical Education Rules and Guidelines

### a. General Rules

- Profanity, horse play, or similar actions are unacceptable to the allied health care professional and will not be tolerated.
- All rules of the NCAA and SEC governing varsity practices, events, or competitions are to be followed by the athletic training students.
- Schedule all personal appointments away from athletic training clinical hours
- Personal business should not be conducted in the athletic training facility
- Appropriate emergency procedures are discussed and demonstrated with each new student.

## J. Visiting Teams

All visiting teams are to be treated with proper courtesy and respect. Remember these athletes and staffs are our guests. We should try to meet their needs as much as possible. Once an athlete is injured, we are all on the same team. Hopefully, if our guests are treated properly here, they will reciprocate the same attitude and availability when we visit them.

## K. Travel

Graduate students are to abide by the respective rules of their assigned varsity sport/clinical site when traveling on a road trip. They should be ready to go if requested by their clinical supervisor. Graduate students are to adhere to all travel regulations that apply to that team. It is mandatory that in any travel situation the graduate student should arrive at least 15 minutes earlier than the departure time.

## L. Transportation

GA/Interns are responsible for their own transportation to and from their clinical site. An additional stipend may be provided for select sites, such as Newberry High School, due to mileage traveled

daily. All GAs/Interns must have a valid driver's license, possess automobile insurance that covers use of other vehicles, and possess personal health insurance.

#### **M. Transportation of Patients**

GA/Interns are not allowed to transport any patients that are minors (Under the age of 18) and non-minors (age above 18) off site to a physician appointment or medical facility. If transportation is needed a parent, coach, or ambulance should be used.

#### **N. Post-Professional Athletic Training Graduate Assistant Clinical Requirements (Must Complete):**

- a. Emergency Cardiac Care certification must be completed biannually. Course must provide adult and pediatric CPR, AED, 2<sup>nd</sup> Rescuer CPR, Airway Obstruction, and Barrier Devices (e.g., pocket mask, bag valve mask). Acceptable ECC providers are those adhering to the most current International Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiac Care. The two most common courses that meet these requirements are: 1) CPR/AED for the Professional Rescuer through the American Red Cross, and 2) BLS Healthcare Provider through the American Heart Association.
- b. Annual documented completion of Blood Borne Pathogen (BBP) training.  
[http://www.sc.edu/ehs/training/BBP/bbp\\_intro.htm](http://www.sc.edu/ehs/training/BBP/bbp_intro.htm)
- c. Graduate assistants must provide electronic documentation of completing these guidelines.

#### **O. Post-Professional Athletic Training Student Code of Conduct**

##### **a. Appropriate Behavior**

Post-Professional Athletic Training Students/Interns are expected to uphold the Code of Ethics of the National Athletic Trainers' Association, the BOC Standards of Professional Practice, and the Carolinian Creed. Post-Professional Athletic Training Students are encouraged to review the **Code of Ethics** (Appendix in Post-Professional AT Handbook), which can be found on the National Athletic Trainers' Association website ([www.nata.org](http://www.nata.org)), **BOC Standards of Professional Practice** (Appendix in Post-Professional AT Handbook), and **The Carolinian Creed** (Appendix in Post-Professional AT Handbook).

The Post-Professional AT Program Director, Post-Professional Clinical Education Coordinator, and Primary Supervisors reserve the right to dismiss and/or terminate Post-Professional AT Students/Interns from their clinical site for inappropriate behavior. Post-Professional AT/Interns are expected to follow the guidelines for personal conduct established by the UofSC Post-Professional AT Program, the University of South Carolina, the National Athletic Trainers' Association, and the BOC Standards of Professional Practice. Any behavior deemed embarrassing to the UofSC Post-Professional AT Program, the University of South Carolina, or a clinical site would qualify as inappropriate behavior. Use of any substance (drugs and alcohol) is prohibited during all UofSC AT Program clinical experiences (this includes travel).

*\*This includes travel with outreach clinical sites, any UofSC or UofSC AT program affiliated clinical site.*

#### **P. Post-Professional Athletic Training Student Relationships**

##### **POLICY 1.1:**

Athletic Training Programs' (AT Program) Post-Professional Students/Interns should always conduct themselves in a professional manner. At no time should they engage in conduct that would undermine their patients' confidence or cause a conflict of interest in their patients' care. Relationships (casual or sustained) between AT Program Post-Professional Student/Interns and any individual at a clinical education site (patients, administrators, staff or full-time athletic trainers, graduate assistants, other students, coaches, student assistants, etc.) is prohibited. It is a clear conflict of interest to serve in a clinical education setting providing athletic training services to a patient with whom an AT Program Post-Professional Student/Intern has such a relationship. Relationships including but not limited to athletic trainers, graduate assistants, AT Program students, coaches, staff, and/or student assistants in the clinical education setting can also be detrimental to patient care and the learning process. Therefore, AT Program Post-Professional Students/Interns must notify the Post-Professional AT Program Director and Post-Professional Clinical Education Coordinator prior to beginning any type of non-platonic personal relationship with any individual in the clinical education setting. If a Post-Professional Student/Intern fails to follow appropriate notification of procedures for disclosure of a relationship, they will risk possible termination of Post-Professional Graduate Assistant/Intern position. Each disciplinary action pertaining to Post-Professional AT Students/Intern will be determined by the Post-Professional AT Program Disciplinary Committee.

##### **POLICY 1.2:**

This policy includes all social interaction with individuals (patients, administrators, athletic trainers, graduate assistants, other students, coaches, staff, student assistants, etc.) outside of the Post-Professional AT Program Student/Intern's clinical education experience. Post-Professional AT Program Student/Intern will follow the rules and procedures of their clinical education site regarding social interactions with all representatives of that site. The UofSC AT Program will support the rules implemented by the clinical education sites. However, the UofSC AT Program prohibits fraternizing with

any representative of a site either within their assigned clinical education site, at other clinical education sites, or outside of any assigned clinical education site. The Post-Professional AT Program Student/Interns are considered an extension of the UofSC AT Program and the UofSC/Prisma Sports Medicine Staff and are always to conduct themselves in a professional manner. If a Post-Professional AT Student/Intern fails to follow appropriate notification of procedures, he/she/they will risk possible termination of Post-Professional Graduate Assistant/Intern position. Each disciplinary action pertaining to Post-Professional AT Students/Interns will be determined by the Post-Professional AT Program Disciplinary Committee.

**NOTE:** If any Post-Professional AT student/intern is suggested to have a “relationship” with a patient, undergraduate student, professional AT student, or an underage student/patient. Their case will automatically be sent to the Human Resources and the Office of Equal Opportunity to be investigated. This may jeopardize not only employment status but academic status as well.

#### **Q. Professional Communication Policy**

Post-Professional AT Students/Intern are required to communicate in a professional and appropriate manner with all persons associated with the UofSC AT Program and its affiliated clinical sites. You will find yourself interacting and communicating with a variety of individuals, with a variety of personalities and communication methods. It is imperative to understand your role as it may differentiate depending upon the person you are conversing with.

##### **Telephone**

- When leaving a voicemail leave your name, title/affiliation, message, and contact information.
- Your personal voicemail message should be professional. For example:  
“You have reached *your name*. Athletic trainer at *your clinical site*. I am currently unable to answer your phone call. If this is an emergency call 911. If this is not an emergency leave your name, number, and short message and I will get back to you as soon as possible.”

##### **Text Messages**

- Maintain professionalism and proper etiquette in all text message communication. Do not use abbreviations (e.g., LOL, u, idk, etc.).
- Use complete sentences to avoid sounding abrupt. However, if the message is too long, consider a phone call instead.
- Double check your message before hitting the send button.

##### **Email**

- All e-mails should be professionally addressed and written. Use appropriate salutations (i.e., Dr., Mrs., Mr., etc.), grammar (i.e., complete sentences, punctuation, capitalization, etc.), terminology, and signature. Do not address emails with “Hey,” “Hey there,” “Yo, Bro, etc..”
- E-mail is easy to be misinterpreted unless you have made it truly clear what you say. Readers of e-mails cannot see your face or hear your tone of voice.
- Do not use e-mail as a medium for initiating or prolonging a disagreement. If you have a problem with an individual, we encourage you to resolve the situation face to face or over the phone.
- If you read something that offends you, do not respond immediately. It may not have been intended to offend. Take time to calm down (“The 24-hour rule”), reread and respond without being offensive, only if you consider it worthy of response.
- Discussing medical information attached to a patient’s name within an e-mail is discouraged. The University suggests that messages containing protected health information, personally identifiable information, credit card information, and any information protected by institutional regulations be encrypted. To learn more how to add e-mail message encryption, please follow this link: [https://scprod.service-now.com/sp/?sys\\_kb\\_id=e235f901db327300c3d917e15b961911&id=kb\\_article\\_view&sysparm\\_rank=5&sysparm\\_tsqueryId=383e10a5dbb8c8d41300f2f5ab9619d0](https://scprod.service-now.com/sp/?sys_kb_id=e235f901db327300c3d917e15b961911&id=kb_article_view&sysparm_rank=5&sysparm_tsqueryId=383e10a5dbb8c8d41300f2f5ab9619d0)
- All AT students are required to create a professional e-mail signature using the university generator for detailed signatures which can be located at [https://sc.edu/about/offices\\_and\\_divisions/communications/toolbox/resources/email\\_signature\\_generator/index.php](https://sc.edu/about/offices_and_divisions/communications/toolbox/resources/email_signature_generator/index.php). After doing so, the student is required to add this to their Outlook (desktop and mobile, if possible). Directions on how to add an e-mail signature in Outlook can be found at: <https://www.lifewire.com/how-to-create-an-email-signature-in-outlook-1173664#:~:text=Select%20File%20%3E%20Options%20%3E%20Mail%20%28under%20Outlook,OK%20again%20in%20the%20Outlook%20Options%20dialog%20box.>
- You are encouraged to insert the following disclaimer in your e-mail signature:

“This e-mail transmission, in its entirety and including all attachments, is intended solely for the use of the person or entity to whom it is addressed and may contain information, including health information, which is privileged, confidential, and the disclosure of which is governed by applicable law. If you are not the intended recipient, you are hereby notified that disclosing, distributing, copying or taking any action in relation to this e-mail is STRICTLY

PROHIBITED. If you have received this e-mail in error, please notify the sender immediately and destroy the related message."

### **Additional Guidelines for Personal Contact**

*Patients* - As an AT you should practice communication skills in a manner that separates yourself from the patient. Common courtesy is necessary. At times, a patient may demonstrate inappropriate behavior. Do not tolerate this behavior and address it immediately to maintain discipline in the athletic training setting.

*Athletic Training Colleagues and ATs* – It is expected that graduate ATs address supervisors, staff ATs, and ATs with respect. Communications with ATs should be in a non-demeaning manner. All issues, whether clinical or academic, should be addressed in the appropriate environment at the appropriate time. Never address a situation or discuss medical information in the direct presence of additional parties who should not be privy to the information. Never address a situation in front of a patient unless the patient's immediate health is in jeopardy. When hosting an event, you are expected to introduce yourself to the visiting AT or appropriate visiting staff.

*Physicians and Other Medical Professionals* - Physician-AT relationship is imperative and highly valued within the UofSC AT Program. Numerous opportunities will be presented to you to observe and interact with physicians. Physicians affiliated with UofSC AT Program value the educational aspect of all AT students and Interns. Athletic trainers should appreciate the opportunity to interact with physicians and treat such interactions as a privilege. When communicating with physicians utilize proper medical terminology, address him/her with the proper title, and be respectful of his/her medical decisions. You will come in contact with a variety of other medical professionals including physical therapists, chiropractors, nurses, physician assistants, paramedics, and others. Everyone should be treated with the utmost respect. If hosting an event be familiar with all medical personnel in attendance (e.g., EMTs providing services at the event). If you have a conflict with one of these individuals maintain your professionalism and report serious conflicts to a supervisor.

*Other Clinical Site Personnel* - Communication with coaches, administrators, parents, and other personnel at your clinical site will occur on a regular basis. Represent yourself with confidence, introduce yourself to all associated personnel, and treat all individuals with respect. Whether a phone call or personal contact, medical information should not be provided to an individual without consent from the patient.

### **Conflicts**

In the event of a communication problem, you are expected to direct the concern to a supervisor or next appropriate person within the chain of command. If at any time you feel you are not being treated with respect by a coach, administrator, or other personnel attempt to address the situation and discuss with a supervisor. During any conflict, professional language and mannerisms are always to be practiced. Vulgar language or elevating your voice is not appropriate. Conflicts should be handled immediately and in a proper manner. If you feel that you cannot handle a conflict in a professional manner it may be appropriate to distance yourself from the situation and follow up later.

### **Inappropriate Communication**

If at any point you feel that an individual associated with the UofSC AT Program, or your clinical site has been unprofessional in their communication with you notify a supervisor immediately. It is inappropriate to send text messages to patients, coaches, AT colleagues, and any other personnel affiliated with UofSC AT Program and clinical site that includes or depicts unprofessional behavior. Any non-athletic training communication (e.g., pictures of yourself, discussion of weekend party plans, any sexual connotations that may be deemed sexual harassment, etc.) to patients, coaches, administrators, ATs, or any personnel affiliated at your clinical site is strictly prohibited. The Post-Professional AT Program reserves the right to dismiss any athletic training member (Post-Professional AT Student or Intern) from his/her/their clinical assignment for any violation of this policy. Disciplinary action pertaining to Post-Professional AT Students/Interns will be determined by the Post-Professional AT Program Disciplinary Committee

## **R. Confidentiality**

Always stay within the limits of your position and knowledge. Do not discuss any athletic training facility activities (injuries, treatments, doctor's reports, etc.) with others, online websites, or in a classroom setting. The confidentiality of the medical atmosphere is paramount.

You may not release information to anyone regarding an athlete. This includes the health status of an athlete, open the athlete's file for inspection, copy or reproduce any reports for anyone but the athlete, pass authorized information by telephone or use X-ray or test results for demonstration or instruction without prior, written permission.

All graduate students will sign a Confidentiality statement at the beginning of each academic year. These guidelines must be adhered to strictly. Disregarding these instructions will result in prompt dismissal from the UofSC AT Program. Must abide by all FERPA/HIPAA guidelines.

## **S. Social Media Policy**

The following are guidelines for members of the University of South Carolina (UofSC) Athletic Training Program (AT Program) who participate in social media (Facebook, Twitter, Instagram, SnapChat,

Google+, etc.). These guidelines apply to any individual posting to their own sites or commenting on other sites:

1. Follow all applicable UofSC and UofSC AT Program policies. For example, you must maintain patient privacy. Among the policies most pertinent to this discussion are those concerning patient confidentiality, university affairs, mutual respect, photography and video, and release of patient information to media.
2. Write in the first person. Where your connection to UofSC and UofSC AT Program is apparent, make it clear that you are speaking for yourself and not on behalf of UofSC or UofSC AT Program. In those circumstances, you should include this disclaimer: "The views expressed on this [blog; website] are my own and do not reflect the views of UofSC or UofSC AT Program." Consider adding this language in an "About me" section of your blog or social media profile.
3. If you identify your affiliation to UofSC or UofSC AT Program, your social media activities should be consistent with UofSC and UofSC AT Program's high standards of professional conduct.
4. If you communicate in the public internet about UofSC or UofSC AT Program-related matters, you must disclose your connection with UofSC or UofSC AT Program and your role at UofSC or UofSC AT Program.
5. Be professional, use good judgment and be accurate and honest in your communications; errors, omissions or unprofessional language or behavior reflect poorly on UofSC or UofSC AT Program, and may result in liability for you, UofSC, or UofSC AT Program. Be respectful and professional to fellow students, faculty, staff, clinical affiliations, business partners, competitors and patients.
6. Ensure that your social media activity does not interfere with your UofSC or UofSC AT Program commitments.
7. The UofSC AT Program prohibits "friending" of patients on social media websites. Members of the UofSC AT Program in patient care roles should not initiate or accept friend requests except in unusual circumstances such as the situation where an in-person friendship pre-dates the treatment relationship.
8. The UofSC AT Program prohibits members in Preceptor roles from initiating "friend" requests with Athletic Training Students (ATS) they supervise.

Any violation of the social media policy outlined above could be grounds for termination from the clinical education site and/or UofSC PPAT Athletic Training Program. The PPAT Program Director, PPAT Clinical Education Coordinator, and Primary Supervisors reserve the right to dismiss any athletic training member (Graduate or Intern) from his/her clinical assignment for any violation. Disciplinary action pertaining to Graduate Students/Interns will be determined by the PATAT Graduate Program Disciplinary Committee.

#### **T. Cell Phone Voicemail**

Graduate students should all have appropriate and professional voicemail message and music. For example:

- a. **Example:** *Name, Athletic Trainer at the University of South Carolina, if an emergency call 911, if not an emergency please leave a message.*

#### **U. Violations of Code of Conduct or Clinical Site Rules**

Any violation of the professional behavior code of conduct outlined above could be grounds for dismissal from the clinical site and/or UofSC athletic training education program. Clinical supervisors reserve the right to dismiss any athletic training graduate student from his/her clinical assignment for any violation of clinical site rules and regulations. The typical sequence of disciplinary actions follows:

- 1<sup>st</sup> Offense Mandatory discussion with Graduate Student, Clinical Supervisor, PPAT Program Director, and PPAT Clinical Education Coordinator. Written reprimand will be placed in student's file. Depending on the student's violation, it is possible the student can be dismissed from the program for their 1<sup>st</sup> offense.
- 2<sup>nd</sup> Offense Mandatory meeting with AT Program committee (Chair of Department, PPAT Director, Clinical Supervisor, Clinical Education Coordinator and one additional AT Program faculty member) and possible dismissal from clinical experience and/or athletic training education program.

\*All cases will be handled on an individual basis by the AT Program committee (AT Program Faculty, PPAT Program Director, PPAT Clinical Education Coordinator, and Chair of the Department).\*

#### **V. Grievances**

On any staff larger than one person there are bound to be some interpersonal problems. These problems can and should be handled quietly and efficiently with little disruption of routine. They should be handled in the office and not during treatment or rehabilitation. All that is required is some maturity and patience. All interpersonal problems should first try to be resolved by those involved. If no progress can be made, then the parties must look to the staff for arbitration.

For student-to-student problems, he or she should first look to the clinical supervisor with direct responsibility for the athletic training graduate student. Each party will register their complaint separately so that the moderator may hear both sides and then meet with the clinical supervisor to discuss resolutions.

The same procedure applies for graduate student to staff problems. The only difference is that another staff member that is uninvolved in the incident will fill the role of arbitrator. It is our feeling that fairness will be best served in this manner. The UofSC Grievance Policy, as published in the University of South Carolina Policies and Procedures, will ultimately be followed for grievances that are not easily resolved.

#### **W. Probation/Dismissal**

Failure to meet one or more of the requirements for program progression will result in the student being placed on program probation. While on program probation, subsequent failure to meet any program requirements will result in dismissal from the program.

Failure to meet the 2.75 cumulative GPA requirements automatically places the student on academic probation. If the student fails to re-establish the GPA to a 2.75 after one semester, the student will be dismissed from the program. Students on academic probation are not eligible for a clinical assignment/rotation. Each case is handled on an individual basis by the AT Program committee, which consists of the AT Program director, the AT Program clinical coordinator, department chairperson, and departmental representative.

#### *Appeals*

Each case brought to the Graduate Athletic Training Program committee will be handled on an individual basis and a recommendation will be made regarding probation or termination from the program. The student may appeal the committee's decision per university procedures.

#### **X. Violations of UofSC PPAT Graduate Assistant/Intern Code of Conduct**

Any violation of the professional behavior code of conduct outlined in the UofSC Athletic Training Graduate Student Handbook could be grounds for dismissal from the clinical site and/or UofSC athletic training education program. Clinical supervisors reserve the right to dismiss any athletic training graduate student from his/her clinical assignment for any violation of clinical site rules and regulations. For additional information on this policy, please contact the Athletic Training Program Director or review your Athletic Training Graduate Student Handbook. A copy of the performance evaluation can be found in the appendix.

### **VII. UNIVERSITY OF SOUTH CAROLINA WELLNESS PROGRAM: ALCOHOL, DRUGS, AND HEALTH**

#### **A. Scope**

Participation in the Wellness Program is required of all University of South Carolina student-athletes, including scholarship and non-scholarship student-athletes, and other students directly associated with the Athletics Department, including cheerleaders, student athletic trainers and equipment managers (collectively referred to in this policy as "student-athletes"). Student-athletes whose eligibility has expired or who no longer participate in intercollegiate athletics but who continue to receive athletic aid are subject to the Wellness Program.

#### **B. Policy Statement**

The Athletics Department is concerned about the potential use and abuse of drugs and alcohol by student-athletes at the University of South Carolina. This concern includes the use of illegal drugs, the use of anabolic steroids, the use of drugs that are not medically indicated, the misuse of prescription drugs, the use of alcohol, and the use of diuretics and "masking agents" designed to prevent the detection of such drug and alcohol use.

The Athletics Department believes that drug and alcohol use and abuse, in addition to being a violation of team rules, poses a significant threat to the health, growth, development and overall physical and mental well-being of its student athletes; results in diminished academic and athletic performance; increases the risk of injury to student-athletes and, in team sports, to their teammates and opponents; may retard the healing of injuries; and may produce dependence and addiction problems that can have devastating societal, financial and career ramifications.

Therefore, the Athletics Department has adopted and implemented this Wellness Program, including a mandatory program of drug testing, education and counseling, in an effort to protect the health, safety and wellbeing of student-athletes associated with the Athletics Department.

#### **C. Purpose**

The purpose of the Wellness Program is:

1. To educate student-athletes about the dangers and effects of drug and alcohol use and abuse.
2. To identify through periodic and random testing those student-athletes who may be involved in drug and alcohol use and abuse.
3. To recommend and provide confidential assessment and treatment for those student-athletes identified as having drug or alcohol related problems.

4. To provide corrective actions for those student-athletes found in violation of the Wellness Program.

#### **D. Prohibited Substances**

The Wellness Program tests for substances identified by the Athletics Department or the National Collegiate Athletics Association (“NCAA”) as purporting to be performance enhancing or potentially harmful to the health, safety or well-being of student-athletes, or that are illegal under applicable federal or state law. Student-athletes are reminded they are responsible for the presence of any banned or illegal substance in their body and are to refrain from areas of risk. Student-athletes are therefore prohibited from using the following substances:

1. Illegal drugs, including but not limited to, marijuana, phencyclidine, stimulants (e.g., amphetamines, ecstasy and cocaine), and hallucinogens (e.g., LSD).
2. Anabolic steroids (e.g., Anavar and Dianabol) and similar growth enhancing or performance enhancing substances.
3. Prescription or over-the-counter drugs not medically indicated.
4. Drugs banned by the NCAA.
5. Diuretics and “masking agents” designed to prevent the detection of drug and alcohol use, not otherwise medically indicated.
6. Alcohol

The Athletics Department reserves the right to modify the list of prohibited substances as it deems appropriate to meet the purposes of the Wellness Program. The NCAA’s list of banned drugs may change during the academic year. An updated list may be found on the NCAA web site ([www.ncaa.org](http://www.ncaa.org)).

#### **E. Procedural Guidelines**

##### **1. General.**

The Athletics Department considers education to be the most important part of its Wellness Program. The Athletics Department will endeavor to educate its student-athletes about the risks inherent in drug and alcohol use and abuse. The Director of Wellness will be responsible for coordinating and making available to student-athletes drug and alcohol related educational programs, services and information throughout the year, including, for example:

- (a) programs for student-athletes, such as educational and motivational speakers that will provide necessary information to enable student-athletes to make decisions that will enhance and encourage a healthy lifestyle.
- (b) dissemination of information and materials available from campus and community resources regarding drugs, alcohol and tobacco, as well as materials related to general health and well-being; and
- (c) providing opportunities for student-athletes to discuss the health, legal and ethical risks of drug and alcohol use and abuse.

##### **2. Annual Orientation Program.**

At the beginning of each academic year, prior to the commencement of drug testing, all student-athletes will be required to participate in an athletics Department orientation program that will include presentations regarding the Wellness Program. Each student-athlete will receive a copy of the Wellness Program, and the drug testing procedures to be used by the Athletics Department will be explained in detail.

All student-athletes will be required to sign a consent form acknowledging their agreement to abide by the terms and conditions of the Wellness Program and granting the Athletics Department permission to perform drug tests at any time and to disclose test results to certain designated individuals. Student-athletes will be subject to drug testing in accordance with the Wellness Program at any time thereafter.

##### **3. Freshman and Transfer Student-Athletes.**

In addition to the orientation program held at the beginning of each academic year, the Athletics Department will conduct an initial education program for all first-year students and transfer student-athletes on the dangers of drug and alcohol use and abuse within twenty (20) days of the first day of classes of the semester of their initial enrollment. First-year student and transfer student-athletes will be drug tested for medical evaluation purposes immediately thereafter (“Medical Test”). Medical Test results indicating the presence of a prohibited substance shall not be considered a positive test result for purposes of the Wellness Program; provided, however, student-athletes will be:

- a. Referred for assessment, counseling and treatment as determined by the Director of Wellness; and
- b. Scheduled for follow-up testing as deemed necessary by the Director of Wellness in order to monitor the continued presence and concentration of the prohibited substance in the student-athlete’s system. Decreased levels of the same prohibited substance not otherwise medically expected to have cleared from the student-athlete’s system will not be considered a positive test result.

First-year students and transfer student-athletes will be subject to drug testing in accordance with the Wellness Program any time after the Medical Test.



4. **Drug Testing Procedure.**

Drug testing will be conducted throughout the year, and student-athletes may be drug tested in-season, out-of-season, and during summer school, if they are enrolled at the University of South Carolina. Testing takes a variety of forms:

- a. **Random Individual Test** -- student-athletes' names are computer generated and each student-athlete receives notification that they will be tested and the date, time and place of the test.
- b. **Team Testing** -- a team or any portion of a team may be tested with or without notice immediately before or **after a workout, practice or competition.**
- c. **Non-Random Testing for Reasonable Cause** -- a student-athlete may be tested with or without notice if reasonable cause exists that the student-athlete may be using a prohibited substance. The Director of Wellness, or the Director of Sports Medicine, will determine reasonable cause. Circumstances which may constitute reasonable cause include, but are not limited to, the following: current or past involvement with the criminal justice system for drug-related activities; prior treatment for drug problems; admission of a current drug problem; prior positive test for any prohibited substance, including alcohol; physiological signs or other reasonable indications of possible use of or impairment from drugs or alcohol; or a pattern of aberrant behavior.
- d. **Arrest on a Drug or Alcohol Related Criminal Offense; Ticketed Offenses** -- a student-athlete arrested on a drug or alcohol related criminal offense will be required to submit to an immediate drug test at a time and place designated by the Athletics Department. Additionally, for purposes of the Wellness Program, any ticketed offense related to or involving the presence of or consumption of drugs or alcohol, including without limitation the possession or use of false identification, will result in automatic referral for drug testing.

Student-athletes selected for testing will be required to provide a urine specimen for purposes of determining the presence or absence of prohibited substances.

To ensure validity, each specimen will be obtained under direct supervision and will be coded to ensure confidentiality. Security of the specimen (chain of custody) will be implemented from the moment the student-athlete signs in at the site of the drug test until final completion of analysis of the specimen.

With respect to testing for prohibited substances, urine specimens will be sent to an independent laboratory for screening to determine its specific gravity and the presence or absence of prohibited substances. Screening for drugs will be performed at the highest level of sensitivity and testing confidence. All specimens that show the presence of a prohibited substance will be subject to a confirmation test using state-of-the-art technology. Positive specimens will be retained by the laboratory for a period of sixty (60) days following a positive test report.

5. **Contact of Student-Athlete for Drug Test.**

Student-athletes will be contacted for drug testing as follows:

- a. Contact for Random and Non-Random Drug Test: Once a student-athlete has been placed on a manifest for drug testing, the Director of Wellness or his/her designee will have four (4) hours from the time the test starts to notify student-athletes to appear at the specified test session. The Director of Wellness or his/her designee is prohibited from notifying student-athletes prior to the four (4) hour time period. Student-athletes who are not contacted within the specified time period will remain on the manifest for subsequent tests. Student athletes who are not contacted for two (2) consecutive tests may be prohibited from working-out, practicing or participating in competition until a valid specimen is provided.

Notwithstanding the above, student-athletes with previous positive tests may be required to submit a specimen on each test date and may be prohibited from working-out, practicing or participating in competition until a valid specimen is submitted.

- b. Contacting for Team or Partial Team Drug Test: Student-athletes selected as part of a team or partial team for drug testing will be notified in person upon presenting for a practice or competition or immediately at the conclusion of a practice or competition. Once the student-athlete has been notified of a scheduled drug test, the student-athlete must produce a urine sample within the allotted time period not to exceed three (3) hours prior to leaving the locker room or facility. Leaving the designated area prior to producing a sample will constitute a "no show" offense.

6. **Failure to Provide Urine Sample at Drug Test ("No Void").**

Student-athletes who fail or are unable to provide a urine specimen during a drug test ("no-void") may be prohibited from working-out, practicing or participating in competition until a valid specimen is provided.

7. **Failure to Appear for Drug Test ("No Show").**

Student-athletes who fail to appear for drug testing after receiving notification of the test ("no show") will be subject to the following; provided, however, a student-athlete's failure to appear for drug testing will not be considered a "no show" in the event extenuating circumstances, as

determined by the Director of Wellness and the Director of Sports Medicine, justified his/her failure to appear:

a. *First "No Show" Offense*

1. Student-athlete will be required to submit to an immediate drug test at a time and place designated by the Athletics Department.

a. If the drug test is positive, the student-athlete will be subject to corrective actions as set forth hereinafter.

b. If the drug test is negative, the student-athlete's failure to appear for drug testing will not be considered a no-show; however, the student-athlete will be scheduled for non-random drug testing as deemed necessary by the Director of Wellness.

b. *Second "No Show" Offense.*

1. Student-athlete may be prohibited from working-out, practicing or participating in competition until a valid specimen is provided.

2. Student-athlete will be required to submit to an immediate drug test at a time and place designated by the Athletics Department.

a. If the drug test is positive, the student-athlete will be subject to corrective actions as set forth hereinafter.

b. If the drug test is negative, the student-athlete's failure to appear for drug testing will not be considered a no-show; however, the student-athlete will be scheduled for non-random drug testing as deemed necessary by the Director of Wellness.

8. ***Willful Refusal to Participate in Drug Test.***

In the event a student-athlete is notified of a drug test and willfully and intentionally refuses to test or to make himself/herself available for testing, the student-athlete will be suspended from the team and subject to dismissal.

9. ***Specific Gravity; Dilute Specimens.***

All specimens determined by an independent laboratory to have a specific gravity of less than 1.0030 will be considered a dilute specimen. For dilute specimens, test results for prohibited substances will be determined and reported by quantity via normalized standard lab procedures performed by the testing laboratory.

Student-athletes found to have a dilute specimen may be prohibited from working-out, practicing or participating in competition until a valid, non-dilute specimen is provided.

10. ***Positive Test Results***

A student-athletes urine specimen will be considered a positive test result upon confirmation of the presence of a prohibited substance by an independent laboratory. Confirmation threshold levels for prohibited substances are set forth in Exhibit 1 attached hereto.

Positive test results from NCAA administered tests will be considered a positive test result under this Wellness Program and will subject the student-athlete to corrective actions as set forth hereinafter.

Student-athletes having a positive test result will be scheduled for follow-up testing as deemed necessary by the Director of Wellness in order to monitor the continued presence and concentration of the prohibited substance in the student-athlete's system. Upon notification of a positive test result, the student-athlete may be drug tested immediately to determine possible further utilization of the drug and appropriate corrective actions to be taken. Decreased levels of the same prohibited substance not otherwise medically expected to have cleared from the student-athlete's system will not be considered a positive test result.

A student-athlete's failure to appear for drug testing following an arrest or ticketed offense as required by Paragraph E(4)(d) herein will result in the student-athlete being prohibited from working-out, practicing or participating in competition until a valid specimen is provided.

A student-athlete's conviction, guilty plea, nolo contendere plea, or entry into pre-trial intervention, resulting from a criminal offense or ticketed offense involving a prohibited substance will result in the student-athlete being required to submit to non-random testing as determined by the Director of Wellness.

11. ***Notification of Test Results***

The following University and Athletics Department officials may be notified of laboratory-confirmed positive test results, no-contacts, no-shows for drug tests, refusals to participate in drug tests, or arrests on drug or alcohol related criminal offenses or ticketed offenses:

- (a) Director of Wellness.
- (b) Director of Sports Medicine.
- (c) Athletics Director and/or his/her designee.
- (d) Student-athlete's head coach or supervisor.

- (e) Student-athlete's parents or legal guardians; and
- (f) Health care providers involved in assessment, counseling and treatment to which the student-athlete may be referred.

#### **F. Corrective Actions**

The following corrective actions will be implemented by the Athletics Department in the event a student-athlete tests positive for a prohibited substance:

1. *First Offense.*
  - a. The student-athlete will be required to meet with the Athletics Director within forty-eight (48) hours of notice of the positive test. Unless there are extenuating circumstances, as determined by the Athletics Director, in the event the student-athlete fails to meet with the Athletics Director in a timely manner, he/she will be prohibited from working-out, practicing or participating in competition until a meeting is held.
  - b. The student-athlete will, in the presence of the Athletics Director or the Director of Wellness or his/her designee, and the head coach or supervisor, notify his/her parents or legal guardians of the incident by telephone call or in person. The parents or legal guardians will also be informed of the corrective actions being taken via certified letter.
  - c. The student-athlete may be scheduled for testing each time drug testing is performed for a period of not less than twelve (12) months, and for non-random drug testing thereafter as deemed necessary by the Director of Wellness.
  - d. The student-athlete will be referred for mandatory assessment, counseling and treatment as determined by the Director of Wellness. If the student-athlete fails to cooperate, he/she may be suspended or dismissed from the team.
2. *Second Offense.*
  - a. The student-athlete will be required to meet with the Athletics Director within forty-eight (48) hours of notice of the positive test. Unless there are extenuating circumstances, as determined by the Athletics Director, in the event the student-athlete fails to meet with the Athletics Director in a timely manner, he/she will be prohibited from working-out, practicing or participating in competition until a meeting is held.
  - b. The student-athlete will, in the presence of the Athletics Director or the Director of Wellness or his/her designee, and the head coach or supervisor, notify his/her parents or legal guardians of the incident by telephone call or in person. The parents or legal guardians will also be informed of the corrective actions being taken via certified letter.
  - c. The student-athlete may be scheduled for testing each time drug testing is performed for a period of not less than eighteen (18) months, and for non-random drug testing thereafter as deemed necessary by the Director of Wellness.
  - d. The student-athlete will be referred for mandatory assessment, counseling and treatment as determined by the Director of Wellness. If the student-athlete fails to cooperate, he/she may be suspended or dismissed from the team.
  - e. The student-athlete will be withheld from twenty-five (25%) percent of the team's season competition schedule, including post-season events (e.g., SEC Championships, NCAA Championships, and bowl games), beginning with the next consecutive events in the schedule. When calculating the withholding from competition, fractional numbers are always rounded up to the next whole number. The student-athlete may practice but will be prohibited from dressing in uniform for a competition, traveling with the team, or being present in the team area on the day of competition.
3. *Third Offense.*
  - a. The student-athlete will be required to meet with the Athletics Director within forty-eight (48) hours of notice of the positive test.
  - b. The student-athlete will, in the presence of the Athletics Director or the Director of Wellness or his/her designee, and the head coach or supervisor, notify his/her parents or legal guardians of the incident by telephone call or in person. The parents or legal guardians will also be informed of the corrective actions being taken via certified letter.
  - c. The student-athlete will be referred for assessment; counseling and treatment at his/her own expense.
  - d. The student-athlete will be dismissed from intercollegiate athletics at the University of South Carolina.
  - e. The student-athlete will forfeit further financial aid from the Athletics Department.

#### **G. Self-Referral Program**

1. *General*

Consistent with the educational mission of the Wellness Program, the Athletics Department has adopted this Self-Referral Program in order to encourage student-athletes to voluntarily seek assistance for drug or alcohol use or abuse. The Self-Referral Program is a six (6) week

program designed to allow student-athletes, without fear of disciplinary action, to initiate the process by which drug or alcohol use or abuse issues are identified, confronted and addressed through voluntary participation in assessment, medical evaluation, counseling, and education. Student-athletes may avail themselves of the Self-Referral Program one-time during their association with the Athletics Department. Student-athletes may not self-refer for assistance regarding the use of anabolic steroids and similar growth enhancing or performance enhancing substances.

## 2. Procedure

The Self-Referral Program shall be conducted as follows:

- a. The student-athlete shall advise the Director of Wellness or the Director of Sports Medicine of his/her desire to self-refer for assistance with drug or alcohol use or abuse. Such notification must be made before the student-athlete is notified that the student-athlete has been selected for a drug test pursuant to the Wellness Program.
- b. The student-athlete shall identify the drugs or alcohol used for which assistance is requested.
- c. The student-athlete shall submit to an immediate drug test to determine the presence and concentration of drugs or alcohol in the student-athlete's system. If the drug test reveals the presence of a prohibited substance not disclosed by the student-athlete at the time of self-referral, the student-athlete shall be automatically removed from the Self-Referral Program and subject to corrective actions as set forth in the Wellness Program.
- d. The Director of Wellness shall meet with the student-athlete, conduct a medical evaluation, as appropriate, and determine the characteristics of his/her drug or alcohol use or abuse. Thereafter, the student-athlete shall be required to submit to periodic drug tests as determined by the Director of Wellness so that the level of drugs or alcohol in the student-athlete's system can be continuously monitored. If any drug test reveals the presence of a prohibited substance not disclosed by the student-athlete at the time of self-referral, the student-athlete shall be automatically removed from the Self-Referral Program and subject to corrective actions as set forth in the Wellness Program.
- e. The Director of Wellness shall refer the student-athlete to health care professionals for assessment, counseling and education as deemed necessary to address issues regarding the student-athlete's drug or alcohol use or abuse.
- f. The maximum period of time that a student-athlete can remain in the Self-Referral Program is six (6) weeks. The Director of Wellness may release a student-athlete from the Self-Referral Program at any time once the student-athlete has completed all required counseling and education, and it is determined that the drugs or alcohol in question are no longer present in the student-athlete's system. The Director of Wellness may remove a student-athlete from the Self-Referral Program at any time if it is determined that the student-athlete is not fulfilling his/her obligations under the Self-Referral Program or that the student-athlete is continuing to use the prohibited substance for which the student-athlete self-referred.
- g. While participating in the Self-Referral Program, a student-athlete shall not be subject to drug testing as otherwise required by the Wellness Program unless there is reasonable cause to believe that the student-athlete may be using a prohibited substance not disclosed by the student-athlete at the time of self-referral, and shall not be subject to corrective action for positive test results for prohibited substances for which the student-athlete self-referred.
- h. A student-athlete's participation in the Self-Referral Program shall be confidential. However, student-athletes are encouraged to advise their head coach or supervisor and parents or legal guardians of their decision to participate in the Self-Referral Program.

## H. Supplements and Prescription Medications

Many supplements and prescription medications are available today that may be banned by either the NCAA or national or international amateur athletics associations or federations. It is the responsibility of the student-athlete to be aware of banned substances and to understand that the use of any banned supplement or prescription medication may result in sanctions including but not limited to preclusion from athletics competition and loss of scholarship. Athletics Department staff or physicians will not prescribe a banned supplement or medication unless it is medically indicated and only after advising the student-athlete that such medication is banned.

## I. Miscellaneous

1. Nothing contained in this Wellness Program shall prohibit the head coach of a student-athlete who has tested positive for a prohibited substance from taking such additional corrective or disciplinary action as he/she deems appropriate, including but not limited to suspending or dismissing the student-athlete from the team.
2. The Athletics Department reserves the right to change the terms and conditions of this Wellness Program at any time upon reasonable notice to the student-athletes.
3. This Wellness Program shall be effective as of August 1, 2007 and shall supersede all previous Wellness Program documents.

For purposes of determining positive test results for prohibited substances and alcohol, the following confirmation threshold levels shall be utilized:

<b>Prohibited Substance</b>	<b>Screen Cutoff</b>	<b>Confirmation Cutoff</b>
Alcohol:	0.04g/dL 500ng/mL*	
Amphetamines:	1000 ng/mL	100 ng/mL
Ecstasy:	250 ng/mL	100 ng/mL
Amphetamine Class:	5000 ng/mL	5000 ng/mL
Cannabinoids (Marijuana):	20 ng/mL	5 ng/mL
Cocaine Metabolite:	100 ng/mL	50 ng/mL
Ephedrine:	5000 ng/mL	5000 ng/mL
Masking Agents & Diuretics:	Presence	Presence
Opiates:	100 ng/mL	100 ng/mL
Nitrites:	200 mcg/mL	200 mcg/mL
Chromate:	50 mcg/mL	50 mcg/mL
Phencyclidine (PCP Angel Dust):	10 ng/mL	10 ng/mL
Anabolic Steroids:	Presence	Presence

\*EtG

*The Athletics Department reserves the right to modify the confirmation threshold levels utilized to determine positive test results for prohibited substances and alcohol.*

## VIII. GENERAL HEALTH AND SAFETY STANDARDS

### A. Student Health Insurance/Student Health Center

[Student health insurance](#) is available through the UofSC University Health and Wellness Center. UofSC Healthcare fee coverage for students can be found within the same link.

### B. Athletic Training Liability Insurance

Students will pay for your liability insurance through course fees. This insurance will ONLY cover GAs/Interns for UofSC clinical experiences assigned by the UofSC AT Program Director/Clinical Education Coordinator. A detailed description of the UofSC Liability insurance for students can be found in the program directors office.

### C. Communicable Disease Policy

All GAs/Interns are reminded that while it may seem admirable to carry on when one is sick this creates an environment for infection to spread. If an athletic training student is ill, the student will report to the University Health and Wellness Center (803-777-3175) or a physician of his or her choice. The physician will determine the appropriate treatment and the amount of time the student will be absent from clinical activity.

If the student has a communicable disease, the student will notify the PPAT Program Director/Clinical Education Coordinator and Primary Supervisor with whom he or she is working as soon as possible via phone or e-mail. The GA/Intern will be restricted from participation in a clinical experience until written notice is provided by a physician that she/he is no longer infectious. Any GA/Intern displaying signs and symptoms of a communicable disease and/or running a fever above 100 degrees will be asked to leave the clinical site and see a physician.

GAs/Interns are responsible for notifying the Office of Student Affairs (803-777-4172) if they contract a communicable and/or contagious disease, which presents a significant degree of health risk to other members of the University community.

### D. Blood Borne Pathogens Exposure Control Plan

As a healthcare professional you are exposed to infectious diseases that are borne by blood and other bodily fluids. Following OSHA guidelines, these regulations designed to protect those who might come in contact with another's bodily fluids and should be followed throughout your clinical experience. Annual blood borne pathogens training will occur prior to the beginning of your clinical experience. All students are required to complete this training. Passing a quiz is required, and proof of completion must be submitted to the AT program director. It is essential that you become knowledgeable about your protection and adhere to the following:

In accordance with the Occupational Safety Health Administration (OSHA) Blood Borne Pathogens Standard, 29 CFR 1910.1030, the following Exposure Control Plan has been developed:

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials.

The exposure determination is made without regard to the use of personal protective equipment (i.e., employees are considered to be exposed even if they wear personal protective equipment). This exposure determination affects all full-time athletic trainers on staff, graduate assistants, and athletic training students at USC.

OSHA also requires that this plan include a schedule and method of implementation for the various requirements of the standard. The following complies with this requirement:  
Universal Precautions will be observed at this facility in order to prevent contact with blood, blood products, or other potentially infectious materials.

All blood, blood product, or other potentially infectious material will be considered infectious regardless of the perceived status of the source or source individual.

Where occupational exposure remains after institution of these controls, personal protective equipment shall be used

### E. Blood Borne Pathogens

2010-2011 NCAA Sports Medicine Handbook, Eighteenth edition, July 2010, page 66-72.

Blood-borne pathogens are disease-causing microorganisms that can be potentially transmitted through blood contact. The blood-borne pathogens of concern include (but are not limited to) the hepatitis B virus (HBV) and the human immunodeficiency virus (HIV). Infections with these (HBV, HIV) viruses have increased throughout the last decade among all portions of the general population. These diseases have potential for catastrophic health consequences. Knowledge and awareness of appropriate preventive strategies are essential for all members of society, including student-athletes.

The particular blood-borne pathogens HBV and HIV are transmitted through sexual contact, direct contact with infected blood or blood components, and perinatally from mother to baby. In addition, behaviors such as body piercing and tattoos may place student-athletes at some increased risk for contracting HBV, HIV or Hepatitis C.

The emphasis for the student-athlete and the athletics health-care team should be placed predominately on education and concern about these traditional routes of transmission from behaviors off the athletics field. Experts have concurred that the risk of transmission on the athletics field is minimal.

#### **F. Hepatitis B Virus (HBV)**

HBV is a blood-borne pathogen that can cause infection of the liver. Many of those infected will have no symptoms or a mild flu-like illness. One-third will have severe hepatitis, which will cause the death of one percent of that group. Approximately 300,000 cases of acute HBV infection occur in the United States every year, mostly in adults.

Five to 10 percent of acutely infected adults become chronically infected with the virus (HBV carriers). Currently in the United States there are approximately one million chronic carriers. Chronic complications of HBV infection include cirrhosis of the liver and liver cancer.

Individuals at the greatest risk for becoming infected include those practicing risky behaviors of having unprotected sexual intercourse or sharing intravenous (IV) needles in any form. There is also evidence that household contacts with chronic HBV carriers can lead to infection without having had sexual intercourse or sharing of IV needles. These rare instances probably occur when the virus is transmitted through unrecognized-wound or mucous-membrane exposure.

The incidence of HBV in student-athletes is presumably low, but those participating in risky behavior off the athletics field have an increased likelihood of infection (just as in the case of HIV). An effective vaccine to prevent HBV is available and recommended for all college students by the American College Health Association. Numerous other groups have recognized the potential benefits of universal vaccination of the entire adolescent and young-adult population.

#### **G. HIV (AIDS Virus)**

The Acquired Immunodeficiency Syndrome (AIDS) is caused by the human immunodeficiency virus (HIV), which infects cells of the immune system and other tissues, such as the brain. Some of those infected with HIV will remain asymptomatic for many years. Others will more rapidly develop manifestations of HIV disease (i.e., AIDS). Some experts believe virtually all persons infected with HIV eventually will develop AIDS and that AIDS is uniformly fatal. In the United States, adolescents are at special risk for HIV infection. This age group is one of the fastest growing groups of new HIV infections. Approximately 14 percent of all new HIV infections occur in persons aged between 12 to 24 years. The risk of infection is increased by having unprotected sexual intercourse, and the sharing of IV needles in any form. Like HBV, there is evidence that suggests that HIV has been transmitted in household-contact settings without sexual contact or IV needle sharing among those household contacts. Similar to HBV, these rare instances probably occurred through unrecognized wound or mucous membrane exposure.

#### **H. Comparison of HBV/HIV**

Hepatitis B is a much more “sturdy/ durable” virus than HIV and is much more concentrated in blood. HBV has a much more likely transmission with exposure to infected blood; particularly parenteral (needle-stick) exposure, but also exposure to open wounds and mucous membranes. There has been one well-documented case of transmission of HBV in the athletics setting, among sumo wrestlers in Japan. There are no validated cases of HIV transmission in the athletics setting. The risk of transmission for either HBV or HIV on the field is considered minimal; however, most experts agree that the specific epidemiologic and biologic characteristics of the HBV virus make it a realistic concern for transmission in sports with sustained close physical contact, such as wrestling. HBV is considered to have a potentially higher risk of transmission than HIV.

#### **I. Testing of Student-Athletes**

Routine mandatory testing of student-athletes for either HBV or HIV for participation purposes is not recommended. Individuals who desire voluntary testing based on personal reasons and risk factors, however, should be assisted in obtaining such services by appropriate campus or public-health officials. Student-athletes who engage in high-risk behavior are encouraged to seek counseling and testing. Knowledge of one’s HBV and HIV infection is helpful for a variety of reasons, including the availability of potentially effective therapy for asymptomatic patients, and modification of behavior, which can prevent transmission of the virus to others. Appropriate counseling regarding exercise and sports participation also can be accomplished.

#### **J. Participation by the Student-Athlete with Hepatitis B (HBV) Infection**

*Individual’s Health*—In general, acute HBV should be viewed just as other viral infections. Decisions regarding ability to play are made according to clinical signs and symptoms, such as fatigue or fever. There is no evidence that intense, highly competitive training is a problem for the asymptomatic HBV carrier (acute or chronic) without evidence of organ impairment. Therefore, the simple presence of HBV infection does not mandate removal from play.

*Disease Transmission*—The student-athlete with either acute or chronic HBV infection presents limited risk of disease transmission in most sports. However, the HBV carrier presents a more distinct transmission risk than the HIV carrier (see previous discussion of comparison of HBV to HIV) in sports with higher potential for blood exposure and sustained close body contact. Within the NCAA, wrestling is the sport that best fits this description.

The specific epidemiologic and biologic characteristics of hepatitis B virus form the basis for the following recommendation: If a student-athlete develops acute HBV illness, it is prudent to

consider removal of the individual from combative, sustained close-contact sports (e.g., wrestling) until loss of infectivity is known. (The best marker for infectivity is the HBV antigen, which may persist up to 20 weeks in the acute stage). Student-athletes in such sports who develop chronic HBV infections (especially those who are e-antigen positive) should probably be removed from competition indefinitely, due to the small but realistic risk of transmitting HBV to other student-athletes.

#### **K. Participation of the Student-Athlete with HIV**

*Individual's Health*—In general, the decision to allow an HIV positive student-athlete to participate in intercollegiate athletics should be made on the basis of the individual's health status. If the student-athlete is asymptomatic and without evidence of deficiencies in immunologic function, then the presence of HIV infection in and of itself does not mandate removal from play.

The team physician must be knowledgeable in the issues surrounding the management of HIV-infected student-athletes. HIV must be recognized as a potentially chronic disease, frequently affording the affected individual many years of excellent health and productive life during its natural history. During this period of preserved health, the team physician may be involved in a series of complex issues surrounding the advisability of continued exercise and athletics competition.

The decision to advise continued athletics competition should involve the student-athlete, the student athlete's personal physician and the team physician. Variables to be considered in reaching the decision include the student-athlete's current state of health and the status of his/ her HIV infection, the nature and intensity of his/her training, and potential contribution of stress from athletics competition to deterioration of his/her health status.

There is no evidence that exercise and training of moderate intensity is harmful to the health of HIV-infected individuals. What little data that exists on the effects of intense training on the HIV-infected individual demonstrates no evidence of health risk. However, there is no data looking at the effects of long-term intense training and competition at an elite, highly competitive level on the health of the HIV-infected student-athlete.

*Disease Transmission*—Concerns of transmission in athletics revolve around exposure to contaminated blood through open wounds or mucous membranes. Precise risk of such transmission is impossible to calculate but epidemiologic and biologic evidence suggests that it is extremely low (see section on comparison of HBV/HIV). There have been no validated reports of transmission of HIV in the athletics setting<sup>3,13</sup>. Therefore, there is no recommended restriction of student-athletes merely because they are infected with HIV, although one court has upheld the exclusion of an HIV-positive athlete from the contact sport of karate<sup>19</sup>.

#### **L. Administrative Issues**

The identity of individuals infected with a blood-borne pathogen must remain confidential. Only those persons in whom the infected student-athlete chooses to confide have a right to know about this aspect of the student-athlete's medical history. This confidentiality must be respected in every case and at all times by all college officials, including coaches, unless the student-athlete chooses to make the fact public.

#### **M. Athletics Health-Care Responsibilities**

The following recommendations are designed to further minimize risk of blood-borne pathogens and other potentially infectious organisms' transmission in the context of athletics events and to provide treatment guidelines for caregivers. In the past, these guidelines were referred to as "Universal (blood and body fluid) Precautions." Over time, the recognition of "Body Substance Isolation," or that infectious diseases may also be transmitted from moist body substances, has led to a blending of terms now referred to as "Standard Precautions." Standard precautions apply to blood, body fluids, secretions and excretions, except sweat, regardless of whether or not they contain visible blood. These guidelines, originally developed for healthcare, have additions or modifications relevant to athletics. They are divided into two sections — the care of the student-athlete, and cleaning and disinfection of environmental surfaces.

##### ***Care of the Athlete:***

1. All personnel involved in sports who care for injured or bleeding student-athletes should be professionally trained in first aid and standard precautions.
2. Assemble and maintain equipment and/or supplies for treating injured/ bleeding athletes. Items may include Personal Protective Equipment (PPE) [minimal protection includes gloves, goggles, mask, fluid-resistant gown if chance of splash or splatter]; antiseptics; antimicrobial wipes; bandages or dressings; medical equipment needed for treatment; appropriately labeled "sharps" container for disposal of needles, syringes and scalpels; and waste receptacles appropriate for soiled equipment, uniforms, towels and other waste.
3. Pre-event preparation includes proper care for wounds, abrasions or cuts that may serve as a source of bleeding or as a port of entry for blood-borne pathogens or other potentially infectious organisms. These wounds should be covered with an occlusive dressing that will withstand the demands of competition. Likewise, care providers with healing wounds or dermatitis should have these areas adequately covered to prevent transmission to or from a participant. Student-athletes may be advised to wear more protective equipment on high-risk areas, such as elbows and hands.



4. The necessary equipment and/or supplies important for compliance with standard precautions should be available to caregivers. These supplies include appropriate gloves, disinfectant bleach, antiseptics, designated receptacles for soiled equipment and uniforms, bandages and/or dressings, and a container for appropriate disposal of needles, syringes or scalpels.
5. When a student-athlete is bleeding, the bleeding must be stopped, and the open wound covered with a dressing sturdy enough to withstand the demands of activity before the student-athlete may continue participation in practice or competition. Current NCAA policy mandates the immediate, aggressive treatment of open wounds or skin lesions that are deemed potential risks for transmission of disease. Participants with active bleeding should be removed from the event as soon as is practical. Return to play is determined by appropriate medical staff personnel and/or sport officials. Any participant whose uniform is saturated with blood must change their uniform before return to participation.
6. During an event, early recognition of uncontrolled bleeding is the responsibility of officials, student-athletes, coaches and medical personnel. In particular, student-athletes should be aware of their responsibility to report a bleeding wound to the proper medical personnel.
7. Personnel managing an acute blood exposure must follow the guidelines for standard precaution. Gloves and other PPE, if necessary, should be worn for direct contact with blood or other body fluids. Gloves should be changed after treating each individual participant. After removing gloves, hands should be washed.
8. If blood or body fluids are transferred from an injured or bleeding student-athlete to the intact skin of another athlete, the event must be stopped, the skin cleaned with antimicrobial wipes to remove gross contaminate, and the athlete instructed to wash with soap and water as soon as possible. NOTE: Chemical germicides intended for use on environmental surfaces should never be used on student-athletes.
9. Any needles, syringes or scalpels should be carefully disposed of in an appropriately labeled "sharps" container. Medical equipment, bandages, dressings and other waste should be disposed of according to facility protocol. During events, uniforms or other contaminated linens should be disposed of in a designated container to prevent contamination of other items or personnel. At the end of competition, the linen should be laundered and dried according to facility protocol; hot water at temperatures of 71°C (160°F) for 25-minute cycles may be used.

#### **Care of Environmental Surfaces:**

1. All individuals responsible for cleaning and disinfection of blood spills or other potentially infectious materials (OPIM) should be trained on procedures and the use of standard precautions.
2. Assemble and maintain supplies for cleaning and disinfection of hard surfaces contaminated by blood or OPIM. Items include Personal Protective Equipment (PPE) [gloves, goggles, mask, fluid-resistant gown if chance of splash or splatter]; supply of absorbent paper towels or disposable cloths; red plastic bag with the biohazard symbol on it or other waste receptacle according to facility protocol; and properly diluted tuberculocidal disinfectant or freshly prepared bleach solution diluted (1:100 bleach/water ratio).
3. Put on disposable gloves.
4. Remove visible organic material by covering with paper towels or disposable cloths. Place soiled towels or cloths in red bag or other waste receptacle according to facility protocol. (Use additional towels or cloths to remove as much organic material as possible from the surface and place in the waste receptacle.)
5. Spray the surface with a properly diluted chemical germicide used according to manufacturer's label recommendations for disinfection, and wipe clean. Place soiled towels in waste receptacle.
6. Spray the surface with either a properly diluted tuberculocidal chemical germicide or a freshly prepared bleach solution diluted 1:100 and follow manufacturer's label directions for disinfection; wipe clean. Place towels in waste receptacle.
7. Remove gloves and wash hands.
8. Dispose of waste according to facility protocol.

#### **Final Notes:**

1. All personnel responsible for caring for bleeding individuals should be encouraged to obtain a Hepatitis B (HBV) vaccination.
2. Latex allergies should be considered. Non-latex gloves may be used for treating student-athletes and the cleaning and disinfection of environmental surfaces.
3. Occupational Safety and Health Administration (OSHA) standards for Bloodborne Pathogens (Standard #29 CFR 1910.1030) and Hazard Communication (Standard #29 CFR 1910.1200) should be reviewed for further information.

Member institutions should ensure that policies exist for orientation and education of all health-care workers on the prevention and transmission of blood-borne pathogens. Additionally, in 1992, the Occupational Safety and Health Administration (OSHA) developed a standard directed to eliminating or minimizing occupational exposure to blood-borne pathogens. Many of the recommendations included in this guideline are part of the standard. Each member institution should determine the applicability of the OSHA standard to its personnel and facilities.

## References

1. AIDS education on the college campus: A theme issue. *Journal of American College Health* 40(2):51-100, 1991.
2. American Academy of Pediatrics: Human immunodeficiency virus (AIDS virus) in the athletic setting. *Pediatrics* 88(3):640-641, 1991.
3. Calabrese L, et al.: HIV infections: exercise and athletes. *Sports Medicine* 15(1):1-7, 1993.
4. Canadian Academy of Sports Medicine position statement: HIV as it relates to sport. *Clinical Journal of Sports Medicine* 3:63-68, 1993.
5. Fitzgibbon J, et al.: Transmissions from one child to another of human immunodeficiency virus type I with azidovudine-resistance mutation. *New England Journal of Medicine* 329 (25):1835-1841, 1993.
6. HIV transmission between two adolescent brothers with hemophilia. *Morbidity and Mortality Weekly Report* 42(49):948-951, 1993.
7. Kashiwagi S, et al.: Outbreak of hepatitis B in members of a high-school sumo wrestling club. *Journal of American Medical Association* 248 (2):213-214, 1982.
8. Klein RS, Freidland GH: Transmission of human immunodeficiency virus type 1 (HIV-1) by exposure to blood: defining the risk. *Annals of Internal Medicine* 113(10):729-730, 1990.
9. Public health services guidelines for counseling and antibody testing to prevent HIV infection and AIDS. *Morbidity and Mortality Weekly Report* 36(31):509-515, 1987.
10. Recommendations for prevention of HIV transmission in health care settings. *Morbidity and Mortality Weekly Report* 36(25):3S-18S, 1987.
11. United States Olympic Committee Sports Medicine and Science Committee: Transmission of infectious agents during athletic competition, 1991. (1750 East Boulder Street, Colorado Springs, CO 80909)
12. Update: Universal precautions for prevention of transmission by human immunodeficiency virus, hepatitis B virus, and other blood borne pathogens in health care settings. *Morbidity and Mortality Weekly Report* 37:377-388, 1988.
13. When sports and HIV share the bill, smart money goes on common sense. *Journal of American Medical Association* 267(10):1311-1314, 1992.
14. World Health Organization consensus statement: Consultation on AIDS and sports. *Journal of American Medical Association* 267(10):1312, 1992. Human immunodeficiency virus (HIV) and other blood-borne pathogens in sports. Joint position statement by the American Medical Society for Sports Medicine (AMSSM) and the American Academy of Sports Medicine (AASM). *The American Journal of Sports Medicine* 23(4):510-514, 1995.
15. Most E, et al.: Transmissions of blood-borne pathogens during sport: risk and prevention. *Annals of Internal Medicine* 122(4):283-285, 1995.
16. Brown LS, et al.: Bleeding injuries in professional football: estimating the risk for HIV transmission. *Annals of Internal Medicine* 122(4):271-274, 1995.
17. Arnold BL: A review of selected blood-borne pathogen statements and federal regulations. *Journal of Athletic Training* 30(2):171-176, 1995.

## APPENDICES

### A. NATA Code of Ethics

#### Preamble

The National Athletic Trainers' Association Code of Ethics states the principles of ethical behavior that should be followed in the practice of athletic training. It is intended to establish and maintain high standards and professionalism for the athletic training profession. The principles do not cover every situation encountered by the practicing athletic trainer but are representative of the spirit with which athletic trainers should make decisions. The principles are written generally; the circumstances of a situation will determine the interpretation and application of a given principle and of the Code as a whole. When a conflict exists between the Code and the law, the law prevails.

The National Athletic Trainers' Association respects and values diversity amongst its members and patients served. Our members work respectfully and effectively with diverse patient populations in varied healthcare environments. The NATA prohibits discrimination based on race, ethnicity, color, national origin, citizenship status, religion (creed), sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, military status, family/parental status, income and socioeconomic status, political beliefs, or reprisal or retaliation for prior civil rights activity, or other unlawful basis, in any program or activity conducted or funded by the NATA (VATA, 2020).

Important Professional Values (PV) shared by the NATA membership include: 1) Caring & Compassion, 2) Integrity, 3) Respect, 4) Competence, and 5) Accountability. These shared PV underpin the NATA Code of Ethics, motivate honorable interpersonal behaviors, and conduct in member's interactions with all persons.

The Appendix to the Code of Ethics reveals a definition and sample behaviors for each shared PV.

#### **PRINCIPLE 1. IN THE ROLE OF AN ATHLETIC TRAINER, MEMBERS SHALL PRACTICE WITH COMPASSION, RESPECTING THE RIGHTS, WELL-BEING, AND DIGNITY OF OTHERS**

*(PRINCIPLE 1 is associated with the PV of Respect, Caring & Compassion, and Competence.)*

- 1.1 Members shall act in a respectful and appropriate manner to all persons regardless of race, religion, age, sex, ethnic or national origin, disability, health status, socioeconomic status, sexual orientation, or gender identity and expression.
- 1.2 Member's duty to the patient is the first concern, and therefore members are obligated to place the well-being and long-term well-being of their patient above other stakeholders to provide competent care in all decisions, and advocate for the best medical interest and safety of their patient as delineated by professional statements and best practices.
- 1.3 Members shall preserve the confidentiality of privileged information and shall not release or otherwise publish in any form, including social media, such information to a third party not involved in the patient's care without a release unless required by law.

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

*(PRINCIPLE 2 is associated with the PV of Accountability.)*

- 2.1. Members shall comply with applicable local, state, federal laws, and any state athletic training practice acts.
- 2.2. Members shall understand and uphold all NATA Standards and the Code of Ethics.
- 2.3. Members shall refrain from, and report illegal or unethical practices related to athletic training.
- 2.4. Members shall cooperate in ethics investigations by the NATA, state professional licensing/regulatory boards, or other professional agencies governing the athletic training profession. Failure to fully cooperate in an ethics investigation is an ethical violation.

- 2.5. Members must not file, or encourage others to file, a frivolous ethics complaint with any organization or entity governing the athletic training profession such that the complaint is unfounded or willfully ignore facts that would disprove the allegation(s) in the complaint.
- 2.6. Members shall refrain from substance and alcohol abuse. For any member involved in an ethics proceeding with NATA and who, as part of that proceeding is seeking rehabilitation for substance or alcohol dependency, documentation of the completion of rehabilitation must be provided to the NATA Committee on Professional Ethics as a requisite to complete a NATA membership reinstatement or suspension process.

**PRINCIPLE 3. MEMBERS SHALL MAINTAIN AND PROMOTE HIGH STANDARDS IN THEIR PROVISION OF SERVICES**

***(PRINCIPLE 3 is associated with the PV of Caring & Compassion, Accountability.)***

- 3.1. Members shall not misrepresent, either directly or indirectly, their skills, training, professional credentials, identity, or services.
- 3.2. Members shall provide only those services for which they are qualified through education or experience, and which are allowed by the applicable state athletic training practice acts and other applicable regulations for athletic trainers.
- 3.3. Members shall provide services, make referrals, and seek compensation only for those services that are necessary and are in the best interest of the patient as delineated by professional statements and best practices.
- 3.4. Members shall recognize the need for continuing education and participate in educational activities that enhance their skills and knowledge and shall complete such educational requirements necessary to continue to qualify as athletic trainers under the applicable state athletic training practice acts.
- 3.5. Members shall educate those whom they supervise in the practice of athletic training about the Code of Ethics and stress the importance of adherence.
- 3.6. Members who are researchers or educators must maintain and promote ethical conduct in research and educational activities.

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

***(PRINCIPLE 4 is associated with the PV of Respect.)***

- 4.1. Members should conduct themselves personally and professionally in a manner, which reflects the shared professional values, which does not compromise their professional responsibilities or the practice of athletic training.
- 4.2. All NATA members, whether current or past, shall not use the NATA logo or AT logo in the endorsement of products or services, or exploit their affiliation with the NATA in a manner that reflects badly upon the profession.
- 4.3. Members shall not place financial gain above the patient's well-being and shall not participate in any arrangement that exploits the patient.
- 4.4. Members shall not, through direct or indirect means, use information obtained in the course of the practice of athletic training to try and influence the score or outcome of an athletic event, or attempt to induce financial gain through gambling.
- 4.5. Members shall not provide or publish false or misleading information, photography, or any other communications in any media format, including on any social media platform, related to athletic training that negatively reflects the profession, other members of the NATA, NATA officers, and the NATA office.

**B. Athletic Training's Shared Professional Values**

*Established from research conducted by the NATA Professional Responsibility in Athletic Training Committee in 2020, the following are the five shared professional values of athletic training.*

**Caring & Compassion** is an intense concern and desire to help improve the welfare of another.

Sample behaviors include:

- 1) Listening for understanding and a readiness to help.
- 2) Focusing on achieving the greatest well-being and the highest potential for others.
- 3) Spending the time needed to provide quality care.

**Integrity** is a commitment that is internally motivated by an unyielding desire to do what is honest and right.

Sample behaviors include:

- 1) Providing truthful, accurate and relevant information.
- 2) Abiding by the rules, regulations, laws and standards of the profession.

- 3) Using applicable professional standards and established policies and procedures when acting or making decisions.

**Respect** is the act of imparting genuine and unconditional appreciation and value for all persons.

Sample behaviors include:

- 1) Engaging in active listening when communicating with others.
- 2) Acknowledging and expressing concern for others and their well-being.
- 3) Acting in light of the belief that the person has value.

**Competence** is the ability to perform a task effectively with desirable outcomes.

Sample behaviors include:

- 1) Thinking critically, demonstrating ethical sensitivity, committing to evidence-based practice, delivering quality skills and effective collaboration.
- 2) Making sound decisions while demonstrating integrity.
- 3) Ongoing continuous quality assessment and improvement.

**Accountability** is a willingness to be responsible for and answerable to one's own actions.

Sample behaviors include:

- 1) Acknowledging and accepting the consequences of one's own actions.
- 2) Adhering to laws, codes, practice acts and standards that govern professional practice.
- 3) Assuming responsibility for learning and change.

**C. BOC Professional Standards of Practice**

- a. <https://www.bocatc.org/athletic-trainers/maintain-certification/standards-of-professional-practice/standards-of-professional-practice>

**D. Carolinian Creed**

The community of scholars at the University of South Carolina is dedicated to personal and academic excellence. Choosing to join the community obligates each member to a code of civilized behavior.

As a Carolinian...

I will practice personal and academic integrity.

I will respect the dignity of all persons.

I will respect the rights and property of others.

I will discourage bigotry, while striving to learn from differences in people, ideas and opinions.

I will demonstrate concern for others, their feelings, and their need for conditions which support their work and development.

Allegiance to these ideals requires each Carolinian to refrain from and discourage behaviors which threaten the freedom and respect every individual deserves