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AHAT 411.01: Advanced Practicum in Athletic Training I

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Advanced Practicum in Athletic Training I
AHAT 411

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Class Meeting: Tuesday 8-10am, McGill 235

Course Objectives (also see Clinical Education Plan)
1. To evaluate athletic injuries with confidence and to communicate those findings with the supervising preceptor and/or team physician
2. To determine appropriate use and selection of modalities and with what parameters
3. To devise and implement preventative, conditioning, post-injury, and post-surgical rehabilitation programs
4. Mentoring of the pre-professional athletic training students as well as other professional athletic training students (including the use of psychosocial strategies, such as imagery, self-talk, etc)
5. Increase working knowledge in the conduction of the general medical assessment, as well as communicating and working with a diverse population
6. Further develop ability to recognize patients with psychosocial disorders and/or mental health emergencies
7. Collaborate with other pre-professional athletic training students, other professional athletic training students, and supervising preceptors
8. Gain a deeper understanding of administrative policies and procedures for a health care facility
9. Maintain current first aid and CPR for the Healthcare Provider certification
10. Increased responsibilities with practice and event coverage; play an active role in athlete’s care
11. Prepare for the BOC exam

Evaluation of Student Outcomes:

A) Completion of/Participation in Weekly Review Activities
Each week activities and/or assignments will be given to help students review skills learned in the first year of the professional program. Each student will be expected to complete or turn in these assignments for evaluation/feedback. There will be a skills test at the end of the semester!

B) Completion of Clinical Integration Proficiencies
Completion of clinical integration proficiencies as assigned in the course. It is the student’s responsibility to ensure that all clinical integration proficiencies are kept current and appropriate signatures are obtained.

C) Resume, Cover Letter, Mock Interviews
Students will develop a cover letter and resume preparing for the job application process this spring. Specific jobs will be posted on Moodle for students to apply (students must apply to 3 different positions). After resumes and cover letters are reviewed, students will be invited to participate in a mock interview for that selected position. All interviews will be videotaped to provide students with feedback on their performance. Interviews will be conducted outside of normal class meeting time!
D) Clinical Rotations
Students will complete clinical rotations gaining a minimum of 250 clinical hours with assigned preceptor(s). At the conclusion of each rotation, students will complete a self-evaluation and an evaluation of his/her preceptor.

E) Journals
Each student will develop a journal containing his or her thoughts, ideas and concerns regarding daily clinical experiences. The journal should also contain a case study of one patient or an injury witnessed that you followed during the clinical rotation. You should describe not only the case/injury but also your involvement with the assessment(s), treatment and/or rehabilitation of the athlete. The case study might include/describe a copy of the evaluation, documentation of treatment, a discharge plan, a copy of correspondence you wrote to other medical providers, or any assistance you provided in planning, assessing performance and modifying such a case.

The following guidelines should be followed in writing your journal entries:

- Submit at least one entry electronically (further information to be given in class) by 5:00 pm every other Tuesday. Late journals will not be accepted. Students are not responsible for journals the first week of class or finals week.
- Each entry should follow the ALAC* model described below.

1. **Action:**
Describe the type of clinical experience with which you were involved that week. For example: Women’s soccer practice, baseball treatments in athletic training facility, men’s basketball off-season conditioning; general observation in athletic training facility. Students might also choose to include a learning experience that was outside of the traditional clinical environment (e.g. studying with a fellow athletic training student) but that caused the student to critically reflect on past clinical experiences and to re-evaluate his/her clinical actions based on this recent awareness.

2. **Looking Back on the Action:**
Describe the overall results of the clinical experience described. For example, an entry might say: “Practice went without incident of injury, however the athletes were late getting in for treatments so pre-practice preparation was a bit rushed.” OR “It started raining during practice so I had to watch for lightening but it never stormed so we made it through practice. “There did seem to be a lot of minor injuries on the field.” More specifically you might also include:
   a. Types of duties, injuries and/or treatments observed and/or participated (This might include your “case study” athlete)
   b. Practice, game, or travel experiences
   c. Problems associated with athlete, injury, or treatment
   d. Positive/negatives of the day

3. **Awareness of Essential Aspects:**
In this section reflect on the experience and determine why you think something occurred the way it did, why you did something or acted toward someone in a certain way, your thoughts, feelings and/or attitudes toward the experience in #1 & #2, and why you think you felt that way. Describe relevant factors that may have influenced the situation and how/why they were relevant. This section requires careful thought and an honest analysis of your own actions and feelings. Your entry should be evident of critical thought and personal reflection.

4. **Creation of Alternative Methods of Action:**
After careful reflection and awareness of relevant factors influencing your above actions, determine how, if at all, you might do something different and based on this, describe any plans or goals you will set. For example, perhaps you determined that your lack of involvement during treatments was mainly due to your shyness and the fact that you don’t know any of the athletes. Therefore, perhaps you decide to introduce yourself to all athletes and make an honest attempt to get to know them by asking questions and by asking the certified to help you get involved during treatments. (In your next journal entry, you may then write about how this worked, how you felt, any other plans or goals you might now establish to earn the athletes trust more, etc)

****Journals that are not submitted in this format will not be given credit!!!!****
**Grading Criteria:**
Weekly Review Activities 20%
Skills Test 10%
Clinical Proficiencies 10%
Cover Letter, Resume, Interview 25%
Clinical Rotation (evaluations, performance, completion of hours) 20%
Journals 15%

- All course requirements must be completed with a grade of C or better to successfully complete this course.

**Attendance:** Attendance is compulsory. Unexcused absences may result on a loss of 3% off the final grade for each incident.

**Grading Scale:**
90-100% = A 80-89% = B 70-79% = C 60-69% = D <60% = F
The instructor reserves the right to award + or – grade where deemed appropriate

**Americans with Disabilities Act (ADA):**
The University of Montana upholds the ADA by providing reasonable accommodations to individuals with disabilities. If anyone requires a reasonable accommodation to adequately perform the duties of the class, please see the instructor as soon as possible so that specific plans can be made.

**Academic Misconduct:**
All assignments and exams are intended to be individual efforts unless otherwise assigned as a group project. Plagiarism is a violation of the law and against the Student Code of Academic Integrity. Any plagiarism or use of someone’s paper will result in the student receiving an “F” for the final grade in the course. Further action will be at the instructor’s discretion in accordance with the University of Montana’s policy and procedures.

**EMERGENCY PREPAREDNESS AND RESPONSE**
As members of a learning community we all have responsibilities for each other that extend beyond the teaching/learning experience and transcend our roles in that dimension. We are, as human beings, responsible for the protection and well-being of other members of our group, and one dimension of our individual and group responsibility in that area relates to how we prepare for, and respond to, emergencies. Toward that end, the following are important:

- In the event we need to evacuate the building, our primary route will be through the main doors to McGill Hall located on the west side of the building. If that route is blocked, our secondary route will be through the east door located toward the north end of this wing of the building.
- If you hear an alarm or are told to evacuate, always assume the emergency is real. Be sure to take coats, backpacks and valuables since the building may be closed for some time.
- Everyone should report to either the designated outdoor rally point or the indoor rally point (should conditions make it necessary to seek shelter in another building). Our outdoor rally point is in the area to the west of McGill Hall – at least 300 feet from the building exit. Our indoor rally point is in the Adams Center Lobby. We should reconvene as a group at the rally point so we can determine if anyone is missing.
- Do not use elevators as a means of evacuating, and do not use cell phones until safely away from the building.
- As the instructor of this course, I would ask students who feel they may require assistance in evacuating to privately inform me of that need. Together we will preplan appropriate assistance.
• I would also request that students with a medical condition that could present an emergency privately inform me of that situation. Again, this notification is so we can preplan an appropriate response should an emergency occur.
• As soon as the class roster stabilizes, I will route a sign-up sheet for students to identify whether or not they possess current first aid and/or CPR certification. This information will be passed on to the Facility Emergency Coordinator for use should a need for first aid expertise arise.

AHAT 411 Educational Competencies

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Instructed</th>
<th>Evaluated</th>
</tr>
</thead>
<tbody>
<tr>
<td>CIP-4</td>
<td>Perform a comprehensive clinical examination of a patient with an upper ... extremity, lower extremity, head, neck, thorax, and/or spine injury or condition. This exam should incorporate clinical reasoning in the selection of assessment procedures and interpretation of findings in order to formulate a differential diagnosis and/or diagnosis, determine underlying impairments, and identify activity limitations and participation restrictions. Based on the assessment data and consideration of the patient's goals, provide the appropriate initial care and establish overall treatment goals. Create and implement a therapeutic intervention that targets these treatment goals to include, as appropriate, therapeutic modalities, medications (with physician involvement as necessary), and rehabilitative techniques and procedures. Integrate and interpret various forms of standardized documentation including both patient-oriented and clinician-oriented outcomes measures to recommend activity level, make return to play decisions, and maximize patient outcomes and progress in the treatment plan.</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>CIP-4a</td>
<td>upper extremity</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>CIP-4b</td>
<td>lower extremity</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>CIP-4c</td>
<td>head</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>CIP-4d</td>
<td>neck</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>CIP-4e</td>
<td>thorax</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>CIP-4f</td>
<td>spine</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>CIP-6</td>
<td>Clinically evaluate and manage a patient with an emergency injury or ... condition to include the assessment of vital signs and level of consciousness, activation of emergency action plan, secondary assessment, diagnosis, and provision of the appropriate emergency care (eg, CPR, AED, supplemental oxygen, airway adjunct, splinting, spinal stabilization, control of bleeding).</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>CIP-7</td>
<td>Select and integrate appropriate psychosocial techniques into a patient's ... treatment or rehabilitation program to enhance rehabilitation adherence, return to play, and overall outcomes. This includes, but is not limited to, verbal motivation, goal setting, imagery, pain management, self-talk, and/or relaxation.</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Code</td>
<td>Task Description</td>
<td>Achieved</td>
<td></td>
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<tr>
<td>CIP-8</td>
<td>Demonstrate the ability to recognize and refer at-risk individuals and individuals with psychosocial disorders and/or mental health emergencies. As a member of the management team, develop an appropriate management plan (including recommendations for patient safety and activity status) that establishes a professional helping relationship with the patient, ensures interactive support and education, and encourages the athletic trainer’s role of informed patient advocate in a manner consistent with current practice guidelines.</td>
<td>✔️ ✔️</td>
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<tr>
<td>PHP-5</td>
<td>Explain the precautions and risk factors associated with physical activity in persons with common congenital and acquired abnormalities, disabilities, and diseases.</td>
<td>✔️ ✔️</td>
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<tr>
<td>PHP-7</td>
<td>Implement disinfectant procedures to prevent the spread of infectious diseases and to comply with Occupational Safety and Health Administration (OSHA) and other federal regulations.</td>
<td>✔️ ✔️</td>
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<tr>
<td>PHP-17c</td>
<td>Traumatic brain injury</td>
<td>✔️ ✔️</td>
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<tr>
<td>PHP-17h</td>
<td>Cervical spine injury</td>
<td>✔️ ✔️</td>
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<td>PHP-19</td>
<td>Instruct clients/patients in the basic principles of ergodynamics and their relationship to the prevention of illness and injury.</td>
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<tr>
<td>Date</td>
<td>Lab/Discussion Topic</td>
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<tr>
<td>8/27</td>
<td>Course Objectives; syllabi, paperwork completed/Review game</td>
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<tr>
<td>9/3</td>
<td>Resume and Cover Letter/Scenarios</td>
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<td>9/10</td>
<td>Therapeutic Modality Review</td>
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<tr>
<td>9/17</td>
<td>Head/Cervical Spine</td>
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<tr>
<td>9/24</td>
<td>Emergency medical conditions</td>
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<tr>
<td>10/1</td>
<td>Upper Extremity Manual Muscle Testing/ROM</td>
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<td>10/8</td>
<td>Shoulder/Shoulder Girdle Evaluation, Rehab</td>
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<td>10/15</td>
<td>Elbow, Wrist and Hand Evaluation, Rehab</td>
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<tr>
<td>10/22</td>
<td>Lower Extremity Manual Muscle Testing/ROM</td>
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<tr>
<td>10/29</td>
<td>Lumbar Spine, Hip/Pelvis Evaluation/Rehab</td>
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<td>11/5</td>
<td>Open day- TBD</td>
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<td>11/12</td>
<td>Knee Evaluation/Rehab</td>
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<tr>
<td>11/19</td>
<td>Foot/Ankle Evaluation/Rehab</td>
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<tr>
<td>11/26</td>
<td>Mental Health/Psychosocial Disorders</td>
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<tr>
<td>12/3</td>
<td>Interview discussions-tips</td>
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<tr>
<td>12/11</td>
<td>Skills Test 10-12</td>
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**Please note interviews will be scheduled/conducted outside of class time**

**** The appropriate attire for class is t-shirt and shorts unless otherwise stated by the instructor. Failure to dress appropriately for class will be considered an unexcused absence for that day.