

1-2014

## ATEP 541.01: Clinical Practicum in Athletic Training II

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### Recommended Citation

Moody, Valerie J. and Moore, Jessica L., "ATEP 541.01: Clinical Practicum in Athletic Training II" (2014). *Syllabi*. 2495.  
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**Clinical Practicum in Athletic Training II**  
ATEP 54I

**Instructors:** Valerie Moody, PhD, ATC, LAT, CSCS, WEMT-B      **Credits:** 3  
Jessica Moore MEd, ATC, LAT, PES

**Semester:** Spring 2014

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**Class Meeting:** Friday, 10:10-12 McGill Hall 235

**Course Objectives (also see Clinical Education Plan):**

**Objectives:**

1. Gain a better understanding of the athletic training profession in a variety of settings through clinical education
2. Gain a working knowledge of emergency action plan at each clinical site (understand role, know telephone numbers, memorize procedures)
3. To perform basic techniques of taping, wrapping, and bracing
4. Demonstrate an understanding of operational policies and procedures of an athletic training facility, clinic, or high school. This includes, but is not limited to opening and closing duties, cleaning, maintenance, preparing whirlpools and other modalities, administrative duties such as filing, and data entry
5. Develop a working knowledge and perform injury documentation, utilizing both paper and computerized systems
6. Modality set-up with parameters provided by clinical preceptor or higher level professional athletic training student
7. Provide proper first aid to injured athletes
8. Assist with the pre and post practice treatment of athletes
9. Initiate evaluation of injured athlete under the supervision of a clinical preceptor
10. Develop and implement rehabilitation programs under the supervision of a clinical preceptor
11. Adhere to OSHA standards and guidelines
12. Use appropriate medical terminology
13. Practice and event coverage with assigned clinical preceptor
14. Gain a better understanding of general medical conditions through clinical observation
15. Maintain current first aid and CPR for the Professional Rescuer/Health Care Provider certification
16. Collaborate and communicate effectively with pre-professional athletic training students, other professional athletic training students, and supervising clinical preceptors

**Evaluation of Student Outcomes:**

**A) Journal:**

Each student will develop a journal containing his or her thoughts, ideas and concerns regarding daily clinical experiences. The journal should 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. If an injury does not occur during the rotation, then a topic relevant to the rotation may be discussed.

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 Friday. 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!!!\*\*\*\***

**B) Promotion and Marketing of the Athletic Training Profession**

March is National Athletic Training Month and is a time to promote the athletic training profession to the public. Each year the NATA designates a theme for the month. Students will be assigned collaborative groups to work on different projects that will promote athletic training. These projects will be presented during the month of March and used for the promotion of the Athletic Training Profession. Groups will be determined the first week of class and project assignments will be determined.

**C) Completion of Clinical Proficiencies**

Completion of clinical proficiencies as assigned in the course. It is the student's responsibility to ensure that all clinical proficiencies are kept current.

**D) Capstone Examination**

Students will complete a comprehensive examination covering educational competencies and proficiencies learned from the first full year in the academic program. This examination will have a written and practical component. **Any station or skill that receives a score below an 80% will require remediation to be scheduled with the instructor.**

**E) Clinical Rotations**

Students will complete clinical rotations gaining a minimum of 200 clinical hours with assigned clinical preceptor. At the conclusion of each rotation, students will complete a self-evaluation and an evaluation of his/her clinical preceptor. **Attendance at spring seminar is mandatory in May.**

**F) Completion of/Participation in Weekly Review Activities**

Each week activities and/or assignments will be given to help students review clinical skills. Each student will be expected to complete or turn in these assignments for evaluation/feedback as directed.

**G) Case Study/Research Paper**

Students will select a topic of their choice but should focus on evidence based practices associated with a **psychologically related injury or illness**. Students should formulate a question using PICO format and answer that question using current literature. The organization, format, and content of each case study should be similar to an article in a medical or health care journal adhering to current AMA style (ex: Journal of Athletic Training). The paper should be 3-5 double-spaced (12-point) word-processed pages, excluding references. Students should choose a topic that will actively engage them in the research and writing process. All topics must be approved ahead of time.

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

**Grading Criteria:**

Weekly Review Activities/Participation	10%
Clinical Proficiencies	5%
Capstone Exam	20%
Clinical Rotation (evaluations, performance, completion of hours)	20%
Journals	10%
PR Project	20%
Case Study/Research Paper	<u>15%</u>
	100%

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

**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.

### Tentative Outline of ATEP 541

Date	Lab/Discussion Topic	Assignment Due
1/31	Course Objectives; PR projects (Val)	
2/7	MMT/Goniometry Review (Val)	Journal 1 due
2/14	Splinting/Taping Review (Jess)	Topic Due for Case/Research Paper
2/21	Scenarios and History Taking Practice (Jess)	Journal 2 due
2/28	Lower Extremity Review Ankle/Knee (Val)	
3/7	Lower Extremity Review Hip Back (Jess)	Journal 3 due
3/14	Modality Review (Val)	
3/21	<b>No Class- Travel to District 10</b>	
3/28	PR Project Presentations	Journal 4 due
4/4	Spring Break	
4/11	Lower Extremity Eval Scenarios (Jess)	Journal 5 due
4/18	Emergency Procedures/Environmental Considerations (outside) (Val)	
4/25	Pharmacology/General Medical- Case Studies (Val/Jess)	Journal 6 due
5/2	More scenarios (Outside); Class Evaluations (Val/Jess)	
5/9	<b>AT Olympics</b>	<b>Final Reflective Journal</b>

#### Finals Week- Comprehensive Examination- To be Scheduled

\*\*\*\* 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.

ATEP 541 - Clin Pract in AT II			
Code	Description	Instructed	Evaluated
AC-23	<input type="checkbox"/> Use cervical stabilization devices and techniques that are appropriate to ... the circumstances of an injury.		
AC-27	<input type="checkbox"/> Explain the role of core body temperature in differentiating between ... exertional heat stroke, hyponatremia, and head injury.		
AC-28	<input type="checkbox"/> Differentiate the different methods for assessing core body temperature.		
AC-29	Assess core body temperature using a rectal probe.		
AC-30	<input type="checkbox"/> Explain the role of rapid full body cooling in the emergency management ... of exertional heat stroke.		
AC-36d	<input type="checkbox"/> heat illness including heat cramps, heat exhaustion, exertional heat ... stroke, and hyponatremia		
AC-36e	exertional sickling associated with sickle cell trait		
AC-36f	rhabdomyolysis		
AC-36m	hypothermia, frostbite		
AC-38	<input type="checkbox"/> Apply appropriate immediate treatment to protect the injured area and ... minimize the effects of hypoxic and enzymatic injury.		
AC-39	<input type="checkbox"/> Select and implement the appropriate ambulatory aid based on the ... patient's injury and activity and participation restrictions.		
AC-40	<input type="checkbox"/> Determine the proper transportation technique based on the patient's ... condition and findings of the immediate examination.		
AC-41	<input type="checkbox"/> Identify the criteria used in the decision-making process to transport ... the injured patient for further medical examination.		
AC-42	<input type="checkbox"/> Select and use the appropriate short-distance transportation methods, ... such as the log roll or lift and slide, for an injured patient in different situations.		

CIP-3	<input type="checkbox"/> Develop, implement, and monitor prevention strategies for at-risk ... individuals (eg, persons with asthma or diabetes, persons with a previous history of heart illness, persons with sickle cell trait) and large groups to allow safe physical activity in a variety of conditions. This includes obtaining and interpreting data related to potentially hazardous environmental conditions, monitoring body functions (eg, blood glucose, peak expiratory flow, hydration status), and making the appropriate recommendations for individual safety and activity status.		
PD-1	<input type="checkbox"/> Summarize the athletic training profession's history and development and ... how current athletic training practice has been influenced by its past.		
PD-2	<input type="checkbox"/> Describe the role and function of the National Athletic Trainers' ... Association and its influence on the profession.		
PD-3	<input type="checkbox"/> Describe the role and function of the Board of Certification, the ... Commission on Accreditation of Athletic Training Education, and state regulatory boards.		
PD-4	<input type="checkbox"/> Explain the role and function of state athletic training practice acts ... and registration, licensure, and certification agencies including (1) basic legislative processes for the implementation of practice acts, (2) rationale for state regulations that govern the practice of athletic training, and (3) consequences of violating federal and state regulatory acts.		
PD-5	<input type="checkbox"/> Access, analyze, and differentiate between the essential documents of the ... national governing, credentialing and regulatory bodies, including, but not limited to, the NATA Athletic Training Educational Competencies, the BOC Standards of Professional Practice, the NATA Code of Ethics, and the BOC Role Delineation Study/Practice Analysis.		
PD-10	<input type="checkbox"/> Develop healthcare educational programming specific to the target ... audience (eg, clients/patients, healthcare personnel, administrators, parents, general public).		
PD-11	<input type="checkbox"/> Identify strategies to educate colleagues, students, patients, the ...		

	public, and other healthcare professionals about the roles, responsibilities, academic preparation, and scope of practice of athletic trainers.		
PHP-10	<input type="checkbox"/> Explain the principles of the body's thermoregulatory mechanisms as they ... relate to heat gain and heat loss.		
PHP-11	<input type="checkbox"/> Explain the principles of environmental illness prevention programs to ... include acclimation and conditioning, fluid and electrolyte replacement requirements, proper practice and competition attire, hydration status, and environmental assessment (eg, sling psychrometer, wet bulb globe temperatures [WBGT], heat index guidelines).		
PHP-12	<input type="checkbox"/> Summarize current practice guidelines related to physical activity during ... extreme weather conditions (eg, heat, cold, lightning, wind).		
PHP-13	<input type="checkbox"/> Obtain and interpret environmental data (web bulb globe temperature ... [WBGT], sling psychrometer, lightning detection devices) to make clinical decisions regarding the scheduling, type, and duration of physical activity.		
PHP-14	<input type="checkbox"/> Assess weight loss and hydration status using weight charts, urine color ... charts, or specific gravity measurements to determine an individual's ability to participate in physical activity in a hot, humid environment.		
PHP-17d	Exertional heat stroke		
PHP-17e	Hyponatremia		
PHP-17f	Exertional sickling		
PHP-17g	Anaphylactic shock		
PHP-17i	Lightning strike		
PHP-24	<input type="checkbox"/> Summarize the general principles of health maintenance and personal ... hygiene, including skin care, dental hygiene, sanitation, immunizations, avoidance of infectious and contagious		

	diseases, diet, rest, exercise, and weight control.		
PHP-26	<input type="checkbox"/> Identify and describe the standard tests, test equipment, and testing ... protocols that are used for measuring fitness, body composition, posture, flexibility, muscular strength, power, speed, agility, and endurance.		
PHP-27	<input type="checkbox"/> Compare and contrast the various types of flexibility, strength training, ... and cardiovascular conditioning programs to include expected outcomes, safety precautions, hazards, and contraindications.		
PHP-28	<input type="checkbox"/> Administer and interpret fitness tests to assess a client's/patient's ... physical status and readiness for physical activity.		
PHP-29	<input type="checkbox"/> Explain the basic concepts and practice of fitness and wellness ... screening.		
PHP-30	<input type="checkbox"/> Design a fitness program to meet the individual needs of a client/patient ... based on the results of standard fitness assessments and wellness screening.		
PHP-31	<input type="checkbox"/> Instruct a client/patient regarding fitness exercises and the use of ... muscle strengthening equipment to include correction or modification of inappropriate, unsafe, or dangerous lifting techniques.		
TI-9	<input type="checkbox"/> Describe the laws of physics that (1) underlay the application of ... thermal, mechanical, electromagnetic, and acoustic energy to the body and (2) form the foundation for the development of therapeutic interventions (eg, stress-strain, leverage, thermodynamics, energy transmission and attenuation, electricity).		
TI-17	<input type="checkbox"/> Analyze gait and select appropriate instruction and correction strategies ... to facilitate safe progression to functional gait pattern.		